

Speech, language and communication Needs assessment summary

August 2019, updated with actions January 2020

This needs assessment is primarily based on the 0-5 age group. Where possible, data has been included for under 25s as a part of work linked to our Special Educational Needs and Disability (SEND) needs assessment which is due to be published in 2019/20.

The two needs assessments should be considered in conjunction with each other

The updated version in 2020 reflects the priorities for action agreed by the Programme Board

Helen Vincent | Business Intelligence
Key contributors: Sital Kajee and Sarah Goldsmith

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Introduction

The term speech, language and communication needs (SLCN) encompasses a wide range of difficulties related to all aspects of communication in children and young people. These can include difficulties with fluency, forming sounds and words, formulating sentences, understanding what others say, and using language socially.

Communication skills are pivotal to well-being from early years into adulthood. The consequences of unmet / unidentified needs continue to affect individuals across the life course. The impact is costly to the individual, the economy and to society. Providing early support to children and young people can reduce the likelihood of severe problems later in life, which, nationally, could cost an estimated £16.6bn a year¹.

Children's language skills develop particularly quickly in the first three years of life. Children with poor language and communication have more educational, social and behavioural difficulties compared to other children². They are more likely to be excluded from school and to be involved with the criminal justice system in later years. Research also suggests a link to problems with literacy, mental health and employment in adulthood³ and there is evidence that poor language skills in adulthood are associated with poor health and poor self-management of chronic conditions⁴.

In 2019, Luton Council successfully secured funding from the Department of Education through their Early Outcome Fund (EOF), which aims to narrow the word gap in young children as part of the government's Social Mobility Strategy⁵. In Luton, this programme of activity is known as Talking Takes Off and the funding has allowed for a focus on how to make a systems change to better support children to develop their communication and language skills.

After undertaking a detailed analysis of the system strengths⁶, it was identified that a key priority was to complete a detailed needs assessment to understand the SLCN of the 0-5 year old population.

It is important to note that, while the EOF is specifically focused on the pregnancy to five age range, this needs assessment includes population estimates of prevalence for children and young people up to the age of 24. Where data was available for older group, it has been included in specific sections.

¹ Chowdury, H and Oppenheim, C (2015) Spending on late intervention: How we can do better for less Early Intervention Foundation in I CAN and Royal College of Speech and Language Therapists (2018) [Bercow: Ten Years On](#)

² I CAN and Royal College of Speech and Language Therapists (2018) [Bercow: Ten Years On](#)

³ All Party Parliamentary Group on Speech and Language Difficulties (2013) The links between speech, language and communication needs and social disadvantage, APPG on Speech and Language Difficulties

⁴ Caird J et al (2011) Childhood Obesity and Educational Attainment: a systematic review EPPI- Centre Social Science Research Unit: Institute of Education, University of London in Kent Public Health Observatory (2017) Speech, Language and Communication

⁵ Department for Education (2017) [Unlocking talent, fulfilling potential](#)

⁶ We used the Early Intervention Foundation Maturity Matrix for Early Years Speech, Language and Communication to do this analysis

It is also important to understand that the SLC needs assessment is part of a wider focus on the needs of Luton children, informed particularly by the Special Educational Needs and Disability (SEND) needs assessment. Phase one of this document is due to be published by the end of 2019, and will be further developed in 2020. The two needs assessments should be read in conjunction with each other when both are published.

A range of national and local data sources were used to complete a full needs analysis which covered the following:

- a description of the problem and why it matters
- unmet need
- who is most affected, where inequalities exist, and where there may be intervention opportunities
- local perspective and barriers / opportunities relating to SLC needs
- how Luton can better approach the issue of SLC needs to make a real difference to people’s lives

This report presents the key findings and recommendations from this analysis. The analysis is covered in more detail in the main document.

SLCN definitions and rates

Descriptions and definitions of need, showing the national rates which were used to calculate SLCN need

Need (description)	Need (definition)	Rate for estimates*
Transient difficulties that can be overcome with the right support (poor or delayed language)	Children who are starting school with SLCN who have poor language skills; inadequate for starting formal learning. These children may have a small vocabulary, be just starting to join words together, find it hard to listen and may sound like a much younger child. With the right support, they may catch up with their peers	Upwards of 50 per cent of children at school entry
Persistent SLCN	Potentially complex and long term needs. Children have unusual or disordered speech, language and communication and will need specialist support to reach their full potential	10 per cent of children
	Primary need	7 per cent of children
	Communication difficulties along with, or arising from, other conditions, for example autism, learning disability or cerebral palsy	3 per cent of children, of which 1 per cent have severe and complex SLCN, and cannot express their basic needs

*SLCN estimates are widely published. See, for example: The Communication Trust (2014) [Factsheet for schools](#); Public Health England (2019) [Speech, language and communication needs assessment report for Luton](#); The Communication Trust: [How many children have speech, language and communication needs](#). The definitions used here are taken from [I Can Talk Series – Issue 7, Speech Language and Communication Needs and the Early Years](#)

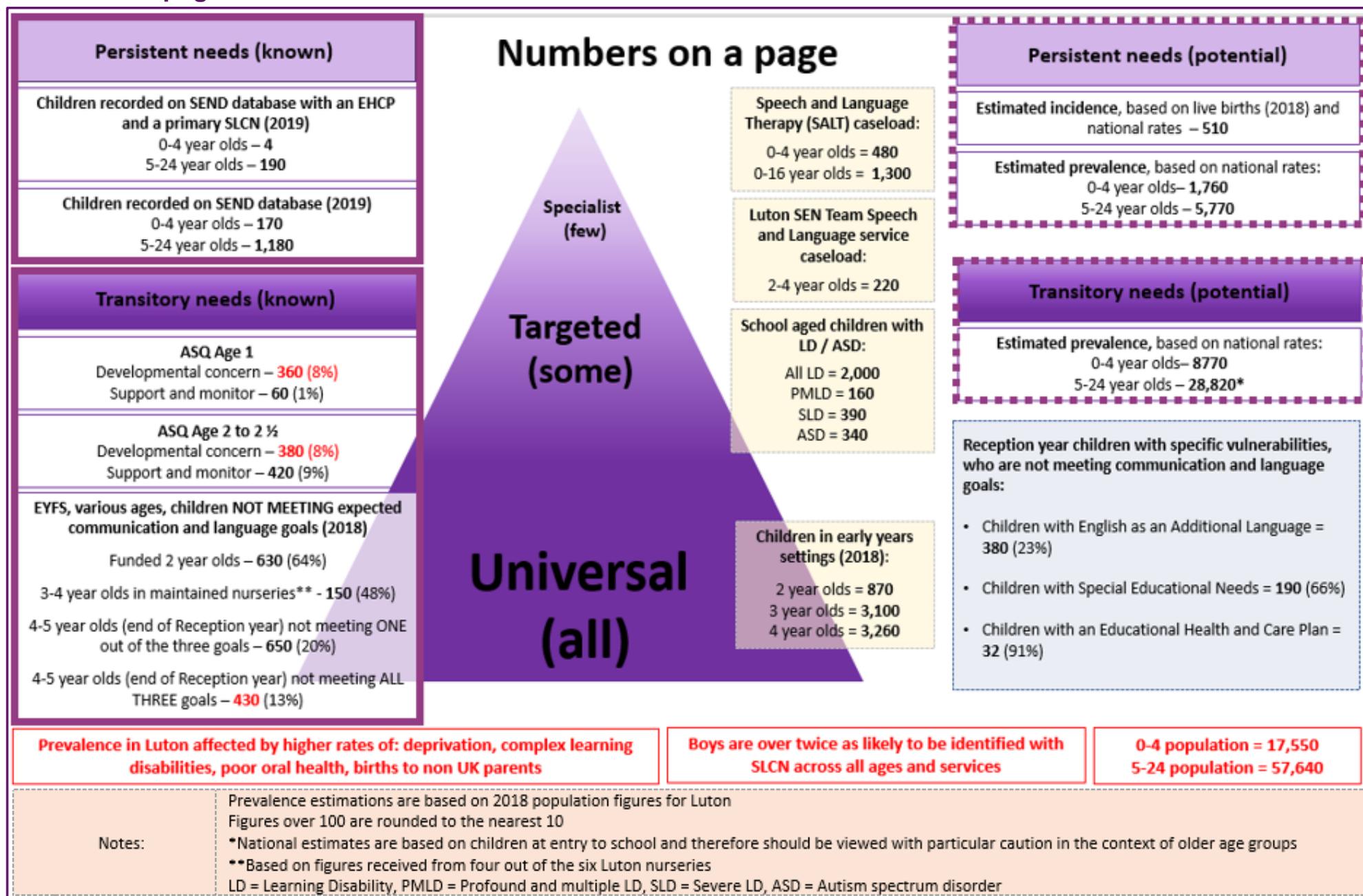
Agreed activity and ownership

Workstrand	Agreed activity (Link to key finding – see pages 11-31)	Who
Strategy	Prioritise SLCN and implement a systems change (1)	Talking Takes Off Partnership Board Children’s Commissioners Luton CCG/ PH SEND programme Board
Commissioning	Ensure equitable access to SLCN services for all Luton communities (15-18) Implement new communication and language pathways, which will ensure a systems approach in how early language support is offered in Luton (22) Prioritise SLCN and implement a systems change (1)	Children’s Commissioners Luton CCG/ PH Talking Takes Off Partnership Board SEND programme Board
Workforce	Improve the local understanding of SLCN in children with ASD (14) Raise awareness of the link between SLCN and oral health (21)	SEND Delivery Board / Business Intelligence Community Dental Service
Leadership	Ensure that early communication and language development is recognised as an important mitigation against poverty (9) Review the agreed approach to tackle the increased risk of congenital anomalies in some communities (14)	Children’s Trust Board Luton Health and Wellbeing Board Luton Council Corporate Leadership Team Public Health
Community	Listen and respond to the perceptions of need and the difficulties that families face (2)	Luton Parent Carer Forum Luton SEND development board All Service providers

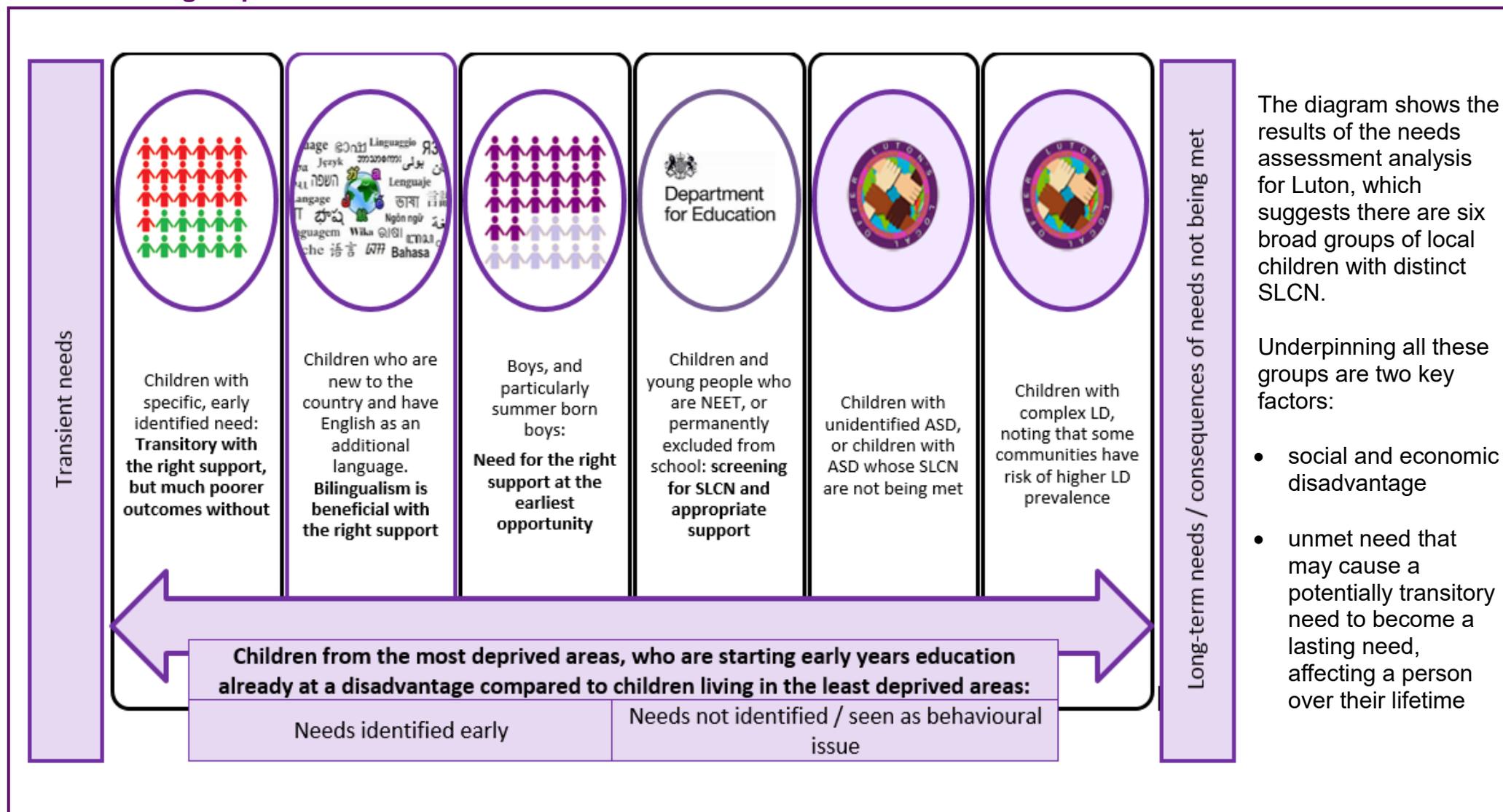
Workstrand	Agreed activity (Link to key finding – see pages 11-31)	Who
Services and Intervention	<p>Access / take up of services Ensure reach and appropriate early SLC intervention with children who have limited engagement with services (3)</p> <p>Support early intervention and early learning opportunities (7-8)</p>	<p>Talking Takes Off/ Communication work stream</p> <p>Early years Childcare service</p> <p>Luton SEND development board</p> <p>All services through use of new Early Years Toolkit and Talking Takes Off training</p>
	<p>Identification of need Improve identification of SLCN in children with SEND, learning disability and Autism Spectrum Disorder (ASD) (13-14)</p> <p>Ensure older children and young people are screened for SLCN, particularly children and young people in identified risk groups (19-20)</p>	<p>SEND Delivery group</p> <p>All services using the new screening tool</p>
	<p>Provision of services Encourage male involvement to advocate and support young boys' language development (dads / grandads / older brothers / volunteers / teaching staff) (6)</p> <p>Capitalise on the diversity and richness of language in Luton to enhance children's language learning experiences (15)</p> <p>Support children with transient English language difficulties, recognising potentially greater need in children who have recently arrived from abroad and minority groups such as Gypsy / Roma or Irish traveller children (16-18)</p>	<p>Luton Education Service</p> <p>Early Years Settings and providers</p> <p>All Service providers</p> <p>Luton Cultural Education Partnership</p>

Workstrand	Agreed activity (Link to key finding – see pages 11-31)	Who
Information and Data	<p>Improve our collective understanding of need (4)</p> <p>Increase identification and reduce the gap between known and unknown need (5)</p> <p>Consider intelligence gaps in context of council intelligence priorities and other ongoing needs assessments (23)</p>	<p>Business Intelligence Team</p> <p>SEND programme board</p>

Numbers on a page

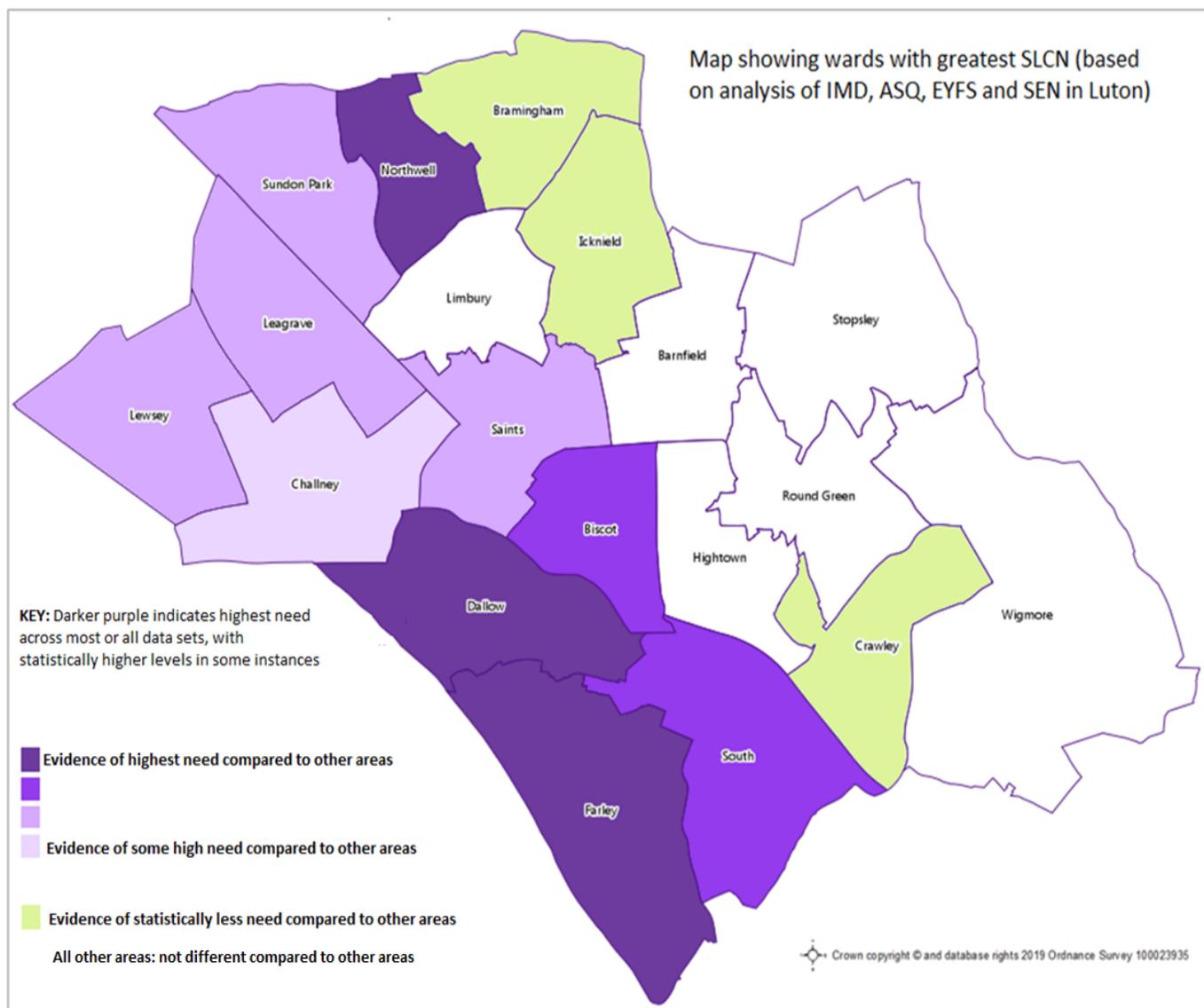


Identified risk groups on a continuum of need



Geographical influence (areas of greater need)

Map showing wards with greatest SLCN (based on analysis of IMD, ASQ, EYFS and SEN in Luton)



The map highlights the wards in Luton that have the greatest experience of SLCN.

It is based on the information from various data sources used in the needs assessment. Pooling this information provides the best possible understanding of need with the data that is currently available.

Dallow, Farley and Northwell are areas with greatest need, followed by Biscot and South.

There are opportunities for targeted interventions in these geographical areas that have been identified as having higher proportions of children with SLCN.

Key findings and recommendations

Costs to the individual and the nation

No.	Key finding	Recommendation(s)
1	<p>Not meeting Speech, Language and Communication needs (SLCN) is costly to society and to individuals. Consequences are wide-ranging, but evidence shows links to the following:</p> <ul style="list-style-type: none"> • SEN and associated costs • school exclusions • young people not in education, employment or training (NEET) • young people who offend or are criminally exploited • life chances • relationship difficulties • behavioural, emotional and social difficulties • intergenerational ('cycle of communication deprivation') <p>Providing early support to children and young people can reduce the likelihood of severe problems later in life. The estimated national cost of not meeting SLCN is £16.6bn a year.</p> <p>National evidence, along with local needs analysis, suggests that SLCN should be placed at the heart of the Council's approach to reducing poverty in Luton.</p>	<p>Prioritise SLCN and implement a systems change</p> <ul style="list-style-type: none"> • ensure that speech, language and communication needs are prioritised, appropriately funded, and that a long-term strategy is adopted to reduce future costs • ensure that the importance of early communication and language skills are understood as a mitigation against poverty as part of the Luton Investment Framework (LIF), the Inclusive Growth Commission, and the priority council action of eradicating poverty by 2040 • implement a systems change for improved identification, support and outcomes for children and young people with SLCN • ensure that communication and language is embedded as a priority in the local system following the one year funding from the Early Outcome Fund through the development of a sustainability plan • the sustainability plan should be overseen by Flying Start, with development of support for operational communication champions via termly network meetings • include communication and language as a priority in the refreshed Children and Young People's Plan

Engagement with families

No.	Key finding	Recommendation(s)
2	<p>The need to engage with, and listen to, parents / carers, children and young people is paramount. Engagement projects have highlighted some recurring themes that matter to children and parents.</p> <p>Children value:</p> <ul style="list-style-type: none"> • social acceptance and emotional well-being • educational targets that reflect their interests and enthusiasm <p>Parents value:</p> <ul style="list-style-type: none"> • early signposting, early help and early diagnosis • help for young children • appropriate and supportive environments for children before, as well as after, diagnosis • shorter waits for assessments and more opportunities to review • more engagement from / with services, feeling included in plans around their child's needs • a diagnosis for their child and a place at a resourced nursery • therapy for children with complex needs <p>Lack of clarity about the use of the term SLCN was also identified as an issue that may impact upon provision.</p>	<p>Ensure that we listen and respond to perceptions of need and the difficulties that families face</p> <ul style="list-style-type: none"> • implement a system of support for families, ensuring a clear and coherent offer • understand and include the views of parents / carers, children and young people when planning services • agree the definition of SLCN that is understood by professionals and parents and that encompasses all children and young people with a need, and widely communicate the definition as part of the training offer to professionals • integrate any SLCN engagement and co-production with the SEND written statement of action

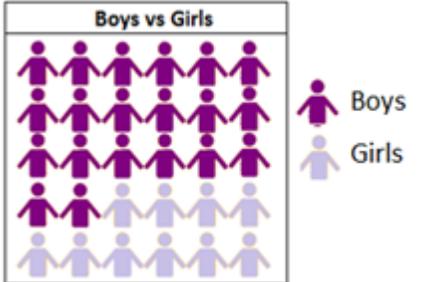
No.	Key finding	Recommendation(s)
3	<p>There are some children who are harder to reach because parents are new to the country, or have no / limited engagement with services. This group is likely to be particularly vulnerable and at greater risk of having unidentified needs</p>	<p>Ensure reach and appropriate early SLC intervention with children who have limited engagement with services</p> <ul style="list-style-type: none"> • empower community and grass roots organisations, and develop SLCN champions from the voluntary sector • ensure that messages and information are clear and accessible and embed in the communication and marketing plan, recognising the need for sustainable communication which is mindful of the needs of diverse communities • embed opportunities to engage with communitiies who do not engage with mainstream services as part of the Communication Friendly Town work

Incidence, prevalence and unmet need

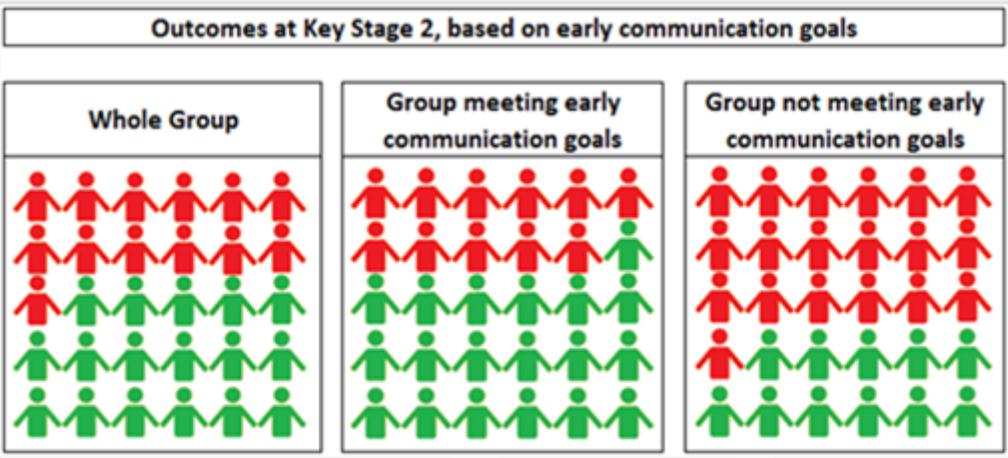
No.	Key finding	Recommendation(s)
4	<p>Due to difficulties when applying estimates to heterogeneous populations, it is not possible to determine exact prevalence, although all methods explored in this assessment suggest notable numbers of affected children and young people when applied to Luton.</p> <p>This is not surprising given that there are a number of Luton characteristics that differ statistically from national averages, and that are likely to affect SLCN prevalence. These include:</p> <ul style="list-style-type: none"> • a younger population • a more diverse population • higher levels of deprivation • higher prevalence of some learning disabilities • poorer oral health in young children • higher rates of births to non-UK parents <p>Based on national prevalence rates, there may be as many as 7,500 children and young people aged 0 to 24 in Luton with a persistent SLCN and 37,600 with a transitory SLCN.</p> <p>For children aged 0 to 4, there may be as many as 10,500 children in Luton who may have a transient SLCN need at some stage, or a long term need.</p>	<p>Improve our collective understanding of need</p> <ul style="list-style-type: none"> • improve data sharing between different services • as part of the Luton families' programme, review how the 'One Family, One View' workstream can support improved data collection • understand the value of developing the Citizens' Index project to support greater understanding of need at a local level • ensure that the audit of Educational Health Care Plans (EHCP) is used to further our understanding of SLCN • amend existing databases (in particular the SEND database) to capture SLCN in a separate data field

No.	Key finding	Recommendation(s)
5	<p>It is difficult to distinguish between need that is recognised and may be being met, but is not recorded.</p> <p>There are notable gaps between prevalence based on national estimates and numbers of children for whom there is a recorded need. For example, the proportions of transitory need identified through ASQ (17 per cent) and end of EYFS (20 per cent) are much lower than national prevalence estimates (50 per cent).</p> <p>Potential gaps in the local understanding of need are as follows:</p> <p>0-4 year olds</p> <ul style="list-style-type: none"> • children aged 0 to 4 with transitory needs – the gap is between 5,800 and 8,600 children • children aged 0-4 with persistent / complex needs – the gap may be up to 1,600 children <p>0-24 year olds</p> <ul style="list-style-type: none"> • children and young people aged 0-24 with transitory needs – the gap is between 17,300 and 27,600 • children and young people aged 0-24 with persistent / complex needs – the gap may be up to 4,600 children and young people 	<p>Increase identification and reduce the gap between known and unknown need</p> <ul style="list-style-type: none"> • develop appropriate screening tools for under-fives and for older children • develop training to raise awareness of SLCN and how to signpost to services as identified in pathways • deliver training widely, across the statutory, private, voluntary, independent and community sectors to ensure professionals understand normal development, when a need may be emerging

Gender

No.	Key finding	Recommendation(s)
6	<p>Gender has the strongest association with speech, language and communication need identification, with boys 2.6 times more likely to be identified than girls. Data from a number of local sources show that national patterns are replicated in Luton.</p> <p>Summer born boys are least likely to meet expected levels in Early Years Foundation Stage (EYFS) communication and language goals at the end of the EYFS, with 35 per cent of this group not meeting expected levels.</p> <div data-bbox="887 464 1308 868" style="text-align: center;"> <p>Proportion of children with SLCN by gender</p>  <p>Source: various local data sets (ASQ, EYFS, caseload data)</p> </div>	<p>Encourage male involvement to advocate and support young boys' language development (dads / grandads / older brothers / volunteers / teaching staff)</p> <ul style="list-style-type: none"> ensure that all settings are accessible and communication-friendly, understanding that boys and girls have different needs 'Five to Thrive' to include a focus on fathers and other male relatives develop a cohort of male role models and volunteers take speech, language and communication activities to places where boys and men are engaging – such as sports venues, football clubs raise awareness of the importance of inclusive language (eg “bring mum and dad along”) ensure that fathers are explicitly invited to activities and that there are some for dads-only (or other male relatives) raise awareness in older boys and young men in Luton education settings of the value that they could bring to boys by choosing a career in an early years setting

Educational outcomes

No.	Key finding	Recommendation(s)
7	<p>National literature shows that outcomes over the life course are very poor for children and young people whose SLCN are not met. Data relating to Luton children highlights very clearly that early intervention is crucial.</p> <p>One way that this was explored was through analysing the outcomes of the 2018 Key Stage 2 cohort⁷ compared to their earlier achievements. This showed that over two thirds of children who did not achieve expected levels in the communication and language goals at end of the EYFS, did not meet expected levels in Reading, Writing and Maths at the end of Key Stage 2.</p> <p>The diagram below shows this as a class of 30 children, illustrating the stark difference in outcomes for the children who do not meet expected levels in early years SLCN goals compared to those who do.</p> <p>Key Stage 2 outcomes in reading, writing and maths, showing the difference in outcomes for children who meet expected levels in early communication goals and children that do not meet expected levels</p>  <p>Source: School Census (EYFS 2012, KS1 2014, KS2 2018), Luton, 2018</p>	<p>Support early intervention and early learning opportunities</p> <ul style="list-style-type: none"> include a focus on the value of early education in the communication strategy, bearing in mind the need for sustainable communication use existing communication channels such as the schools newsletter ensure that the early years' workforce understand the importance of identifying and supporting SLCN, and have the appropriate skills and knowledge to do so – this will be supported by the Talking Takes Off universal offer and the operational communication champions role explore opportunities for family-based learning, and closer working between adult learning and early years <p>Encourage parents to attend Luton nurseries, particularly disadvantaged children who we know are more likely to have SLCN</p> <ul style="list-style-type: none"> actively promote the Time for Twos offer with the Talking Takes Off marketing

⁷ Please note that backtracking is based ONLY on children for whom we have data at all three points (end of EYFS, Key Stage 1 and Key Stage 2). It is not, therefore, representative of pass rates at Key Stage 2 in 2018

Proportion of children achieving expected level in communication and language by early years' status



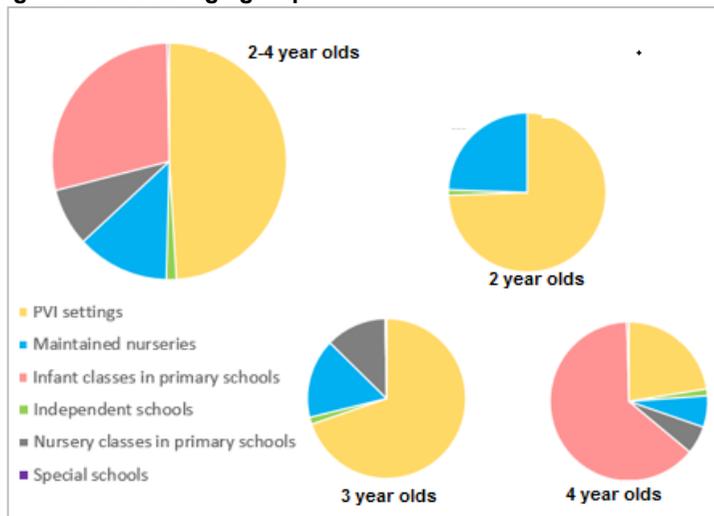
Source: School census, January 2018

Evidence shows that children who attend early years' provision in Luton have much better outcomes than those who do not.

- ensure that ICAN volunteers actively promote the Time for Twos offer

Around a quarter of Luton two year olds access a funded place at an early years setting. This increases to 88 per cent at age three, and 90 per cent at age four. Take up of funded nursery places for two year olds is low nationally, and lower in Luton where only 60 per cent of those eligible take up places.

Children in early years' settings with breakdown of type, showing changes in different age groups



Source: School census, January 2018

Note: PVI setting includes all pre-school, childminder, day care or nursery setting

Over two thirds of Luton two to three year olds who access a funded place in a pre-school early years setting do so at a PVI.

Around a quarter of Luton two to three year olds who access a funded place attend a maintained nursery or a nursery class in a primary school.

Place: geography, deprivation and population factors

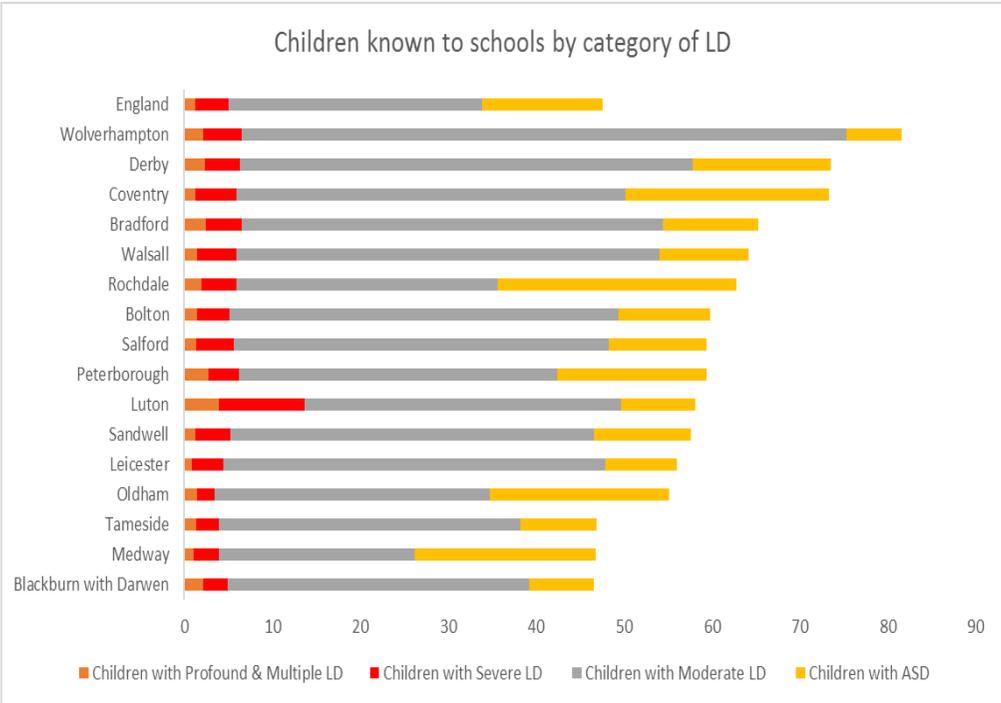
No.	Key finding	Recommendation(s)																																				
9	<p>Deprivation is strongly correlated with SLCN, and local data has confirmed this link. Luton is one of ten local authority areas facing the highest levels of child poverty after housing costs. High rents and benefit cuts have particularly impacted on child poverty levels in Luton.</p> <p>Table showing child poverty levels for the top 10 UK local authorities and infographic showing potential effects of deprivation on SLCN</p> <table border="1" data-bbox="219 427 896 890"> <thead> <tr> <th>Local authority</th> <th>% of children in poverty 2017/18</th> <th>Number in poverty</th> </tr> </thead> <tbody> <tr> <td>UK</td> <td>30.0%</td> <td>4.1 million</td> </tr> <tr> <td>Tower Hamlets</td> <td>56.7%</td> <td>42,775</td> </tr> <tr> <td>Newham</td> <td>51.8%</td> <td>48,862</td> </tr> <tr> <td>Hackney</td> <td>48.1%</td> <td>32,786</td> </tr> <tr> <td>Islington</td> <td>47.5%</td> <td>22,257</td> </tr> <tr> <td>Blackburn with Darwen</td> <td>46.9%</td> <td>19,859</td> </tr> <tr> <td>Westminster</td> <td>46.2%</td> <td>23,217</td> </tr> <tr> <td>Luton</td> <td>45.7%</td> <td>28,373</td> </tr> <tr> <td>Manchester</td> <td>45.4%</td> <td>63,427</td> </tr> <tr> <td>Pendle</td> <td>44.7%</td> <td>10,293</td> </tr> <tr> <td>Peterborough</td> <td>43.8%</td> <td>23,663</td> </tr> </tbody> </table> <p>Source: Centre for Research in Social Policy, Loughborough University</p>  <p>In some areas of deprivation, more than 50% of children start school with SLCN.</p> <p>Analysis for this assessment identified that children living in the most deprived areas have poorer outcomes compared to children living in other parts of Luton. Other proxy measures for deprivation such as families in receipt of free school meals and two year olds in funded nursery places also confirmed statistically significant differences in results, when compared with the rest of the Luton population, confirming poorer outcomes for children experiencing deprivation. Mosaic analysis also confirms the link between SLCN and what is known about deprivation in Luton, not necessarily highlighting the very poorest, but families struggling to make ends meet, including people in work in the lowest paid employment.</p>	Local authority	% of children in poverty 2017/18	Number in poverty	UK	30.0%	4.1 million	Tower Hamlets	56.7%	42,775	Newham	51.8%	48,862	Hackney	48.1%	32,786	Islington	47.5%	22,257	Blackburn with Darwen	46.9%	19,859	Westminster	46.2%	23,217	Luton	45.7%	28,373	Manchester	45.4%	63,427	Pendle	44.7%	10,293	Peterborough	43.8%	23,663	<p>Ensure that early communication and language development is recognised as an important mitigation against poverty</p> <p>Develop a place-based SLCN approach, based on neighbourhood need, prioritising identified areas and locations of greater need</p> <ul style="list-style-type: none"> • implement neighbourhood-based SLCN leads linked to the integrated neighbourhood model • develop a whole family approach to addressing needs and provide the appropriate wrap around support by services • increase support for families who are 'just about managing' and may not be in receipt of benefits or services working with the Early Help Team, and as part of the transformational work for early intervention and prevention • consider out of hours working / change to staff contracts to support the delivery of services at times that would support working parents, while balancing needs of staff with needs of families • work with early years' settings and schools in areas identified as having high levels of children not meeting early learning goals, prioritising schools and settings in Dallow, Farley and Northwell.
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10	<p>There is evidence of geographical influences on SLCN, which may assist in targeting resources effectively. Dallow, Farley and Northwell wards consistently</p>																																					

	appear as areas with higher SLCN. Other areas which are highlighted, but to a lesser degree, are Biscot, South, Saints and Sundon Park.	<ul style="list-style-type: none"> • Flying Start children’s centres to develop a means of identifying families where there may be SLCN • ensure the mosaic information informs the communication and marketing plan
11	Schools attended by children living in Northwell ward and Dallow ward have high proportions of children not meeting expected levels in early communication and language goals. It may be worth considering these schools for targeted intervention, along with other schools identified with high levels of children not meeting early goals.	
12	<p>Mosaic provides information that helps us to understand the best methods to use when communicating with families. The two Mosaic groups with statistically higher proportions of children not meeting expected levels are Family Basics and Urban Cohesion.</p> <p>Family Basics (higher proportions in Northwell, Farley, Leagrave and Lewsey wards), information relating to preferred methods of communication:</p> <ul style="list-style-type: none"> • phone (SMS and mobile) • Facebook, twitter • newspaper types: Daily Star, Daily Mirror and Sun • low membership of organisations <p>Urban Cohesion (higher proportions in Dallow, Biscot, Saints and Challney wards) information relating to preferred methods of communication:</p> <ul style="list-style-type: none"> • email or post • facebook, twitter • newspaper types: (Independent, Guardian, Daily Express, Daily Telegraph, Times, Daily Mirror) • very likely to belong to a religious organisation 	

Special Educational Needs and Disability (SEND)

No.	Key finding	Recommendation(s)
13	<p>There are approximately 1,350 children and young people (aged 0-24) who have SLC recorded as their primary Special Educational Needs and Disability (SEND) need. It is likely that SLC is much more prevalent when considered as a non-primary need.</p> <p>Between 2015 and 2019, there has been a marked increase in the number of children in the SEND database recorded as having SLCN as their primary need. While this may suggest that SLCN identification (or the need itself) has increased, there are concerns around accuracy of primary need diagnosis from schools, which means that any interpretation of the change should be accepted with caution.</p> <p>Estimates based on the proportion of SEND children recorded on the dataset at end of the EYFS suggests that between 2,700 and 4,300 children and young people (up to the age of 25), may have a SLCN as a primary or non-primary need.</p> <p>The current under five Special Educational Needs caseload is 224 children. Of the 1,685 children and young people (aged 0-24) with an EHCP in Luton, 186 have a primary need of SLCN. Five of this group were aged four⁸.</p> <p>The proportions of Luton children with SEN, and those with an EHCP, who are achieving expected levels in early communication and language goals are lower than national proportions.</p>	<p>Improve identification of SLCN in children with SEND, learning disability and Autism Spectrum Disorder (ASD)</p> <ul style="list-style-type: none"> • create closer working between early help services and those providing help to children with developmental needs to streamline the support offered to parents • provide training in schools around identification of different SEND categories of need • work with local learning institutions to ensure appropriate skills for a SEND-related workforce that is fit for the future

⁸ there were no younger children with an EHCP and a primary need of SLC

No.	Key finding	Recommendation(s)
14	<p>Two thousand Luton children are recorded as having a learning difficulty of some kind, ranging from moderate to profound and multiple. National studies suggest that all will have some additional needs relating to SLC.</p> <p>Children known to schools by learning disability categories, rates per 1,000 pupils, Luton compared with England and peers, 2018</p>  <p>Source: PHE fingertips: Learning Disability Profiles, accessed June 2019 (total pupils in state funded primary, secondary and special schools)</p> <p>Data is based on schools reporting to the Department for Education about all children who have special educational needs re specific difficulties (like dyslexia), moderate learning difficulties⁹, severe learning difficulties¹⁰, profound and multiple learning difficulties¹¹ and children with ASD¹²</p>	<p>Review the agreed approach to tackle the increased risk of congenital anomalies in some communities</p> <p>The agreed approach, as identified in the 2011 Annual Public Health Report¹⁴, was to:</p> <ul style="list-style-type: none"> train health professionals to deliver consistent and evidence-based information that is not hampered by concerns regarding cultural sensitivities target community groups where consanguineous relationships are more common so that information is available before marriage and conception regarding associated risk, and engage the extended family in making decisions improve access to counselling and support services for parents in consanguineous marriages who have suffered a child death or have a child with a birth anomaly <p>Improve the local understanding of SLCN in children with ASD</p> <ul style="list-style-type: none"> explore SLCN in the context of ASD identification and diagnosis in the SEND needs assessment which is currently being completed, in particular to see if ASD is under-diagnosed in Luton

⁹ These children have difficulty in all areas of learning. They may have speech and language delay.

¹⁰ These children have serious difficulty in participating in ordinary school programs without support. Many have limited communications and self-help skills.

¹¹ These children have very severe difficulty in learning combined with physical or sensory disabilities. They require a high level of adult support for both learning and personal care needs.

¹² These children have a combination of difficulties with verbal communication, interacting with other children or adults. They often also have particular focus on specific interests and find it difficult to engage in other subjects.

¹⁴ Director of Public Health, NHS Luton and Luton Borough Council (2011) Annual Public Health Report 'The health of Luton's ethnic and migrant communities and Luton JSNA (2015)

<p>There are statistically higher numbers of children in Luton with severe and complex needs relating to a learning disability, which may affect the need for specialist speech, language and communication services.</p> <p>The number of children with the most severe learning difficulties in Luton is up to three times higher than national averages, and is much higher in Luton compared to statistical neighbours. Some of the factors affecting higher prevalence are described in the 2011 Annual Public Health Report for Luton, and it is understood to be influenced by consanguinity and the presence of congenital anomalies in children born to parents of Pakistani heritage¹³.</p> <p>The rate of ASD in Luton is much lower in Luton compared nationally, which may suggest that there are Luton-specific factors creating lower prevalence, or that ASD is not being diagnosed effectively.</p>	
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¹³ Director of Public Health, NHS Luton and Luton Borough Council (2011) Annual Public Health Report 'The health of Luton's ethnic and migrant communities and Luton JSNA (2015)

Ethnicity and English as an Additional Language (EAL)

No.	Key finding	Recommendation(s)
15	<p>Any language delay will be present in the home language as well as English, and parents and other caregivers should speak to young children in their strongest language to support the social process of language acquisition.</p> <p>Luton is language-rich, and there are approximately 150 languages and dialects spoken in Luton's schools. Children with English as an Additional Language (EAL) are over-represented when considering SLCN, although gender remains the greater influencing factor, even amongst the over-represented EAL group.</p> <p>Children who have English as an additional language may experience short-term language difficulties, but speaking another language in addition to English is beneficial in the longer-term.</p> <p>This was confirmed by local data, which showed that:</p> <ul style="list-style-type: none"> • children with English as an Additional language (EAL) who are fluent, competent or developing competence in English are more likely to achieve a good level of development compared to children whose first language is English • EAL children who are fluent in English are most likely to achieve good level of development 	<p>Capitalise on the diversity and richness of language in Luton to enhance children's language learning experiences</p> <p>Support children with transient English language difficulties, recognising potentially greater need in children who have recently arrived from abroad and minority groups such as Gypsy / Roma or Irish traveller children</p> <p>Ensure equitable access to SLCN services for all Luton communities</p> <ul style="list-style-type: none"> • ensure key messages promote parents using their strongest language with their babies and children • ensure messages are shared with providers of adults' community learning to build into lessons with students of English for Speakers of Other Languages (ESOL) • consider how to help people to understand what they might need and how to access it, particularly new arrivals to the country • seek to improve our understanding of how to reach new arrivals or people with limited English by engaging with community groups and asking for their input as part of our engagement plan
16	<p>The data indicates specific needs within some Asian and White Other populations. Pakistani, Polish and Romanian children have the highest speech, language and communication needs compared to children of other ethnicities, but there are likely to be different underlying factors for this. It is likely that the higher need in Pakistani children is influenced by higher learning disability prevalence in this community,</p>	

	<p>whereas the need in Polish and Romanian children may be more likely to be affected by their recency in the UK.</p> <p>White British children are over-represented in the Speech and Language Therapy (SALT) caseload, which may suggest inequitable access to services due to cultural factors or lack of information, particularly as White British children are shown as being statistically more likely to achieve expected levels in communication and language goals at the end of the EYFS.</p>	<ul style="list-style-type: none"> • develop the communication-friendly town project, ensuring it is responsive to the needs of diverse communities and varying levels of need at different stages of a person's life journey • work with the voluntary and community sector to ensure that key messages reach all parents, but particularly those from diverse communities • work with Luton Cultural Education Partnership to consider opportunities for celebrating cultural diversity, in particular reference to communication and language
17	<p>The proportion of children born to non-UK parents in Luton is high and statistically higher than England and all of its peers. 2,420 children are born in Luton each year that have at least one parent that was born in a non-UK country. This may mean that there are higher proportions of children requiring targeted early SLCN support in Luton compared to national proportions, although it remains important to consider the language needs of older children who are also new to the country.</p>	
18	<p>There are also high levels of needs of children in very small minority communities. Some of the data shows that Gypsy / Roma and Irish Traveller children have the poorest outcomes, although this is based on very low numbers of recorded children.</p>	

Secondary education

No.	Key finding	Recommendation(s)																																																									
19	<p>Nationally, during the transition from primary to secondary education, there appears to be a shifting focus from SLCN to the associated behaviours instead.</p> <p>This is also evident in Luton, where there are continued reductions in children and young people recorded as having SLCN after primary school.</p> <div data-bbox="613 183 1429 710" data-label="Figure"> <table border="1"> <caption>National SEN statistics comparing primary and secondary schools, 2014</caption> <thead> <tr> <th>School type</th> <th>SEN category</th> <th>Percent</th> </tr> </thead> <tbody> <tr> <td rowspan="2">State funded primary schools</td> <td>BESD</td> <td>18.4%</td> </tr> <tr> <td>SLCN</td> <td>31.6%</td> </tr> <tr> <td rowspan="2">State funded secondary schools</td> <td>BESD</td> <td>26.7%</td> </tr> <tr> <td>SLCN</td> <td>11.0%</td> </tr> </tbody> </table> </div> <p>BESD – behavioural, educational and social difficulties Source: DfE 2014 SEN statistics, from The Communication Trust (2014) Doing justice to speech, language and communication needs. (It is not possible to replicate this for Luton due to different time frames and possible differences in recording practices)</p> <div data-bbox="613 938 1429 1292" data-label="Table"> <table border="1"> <caption>Children with SLCN as primary SEND need by school year</caption> <thead> <tr> <th>School type</th> <th>Year</th> <th>Count</th> <th>School type</th> <th>Year</th> <th>Count</th> </tr> </thead> <tbody> <tr> <td rowspan="8">Nursery - Primary</td> <td>N1</td> <td>20</td> <td rowspan="6">Secondary</td> <td>7</td> <td>53</td> </tr> <tr> <td>N2</td> <td>60</td> <td>8</td> <td>38</td> </tr> <tr> <td>R</td> <td>159</td> <td>9</td> <td>36</td> </tr> <tr> <td>1</td> <td>163</td> <td>10</td> <td>43</td> </tr> <tr> <td>2</td> <td>177</td> <td>11</td> <td>17</td> </tr> <tr> <td>3</td> <td>174</td> <td></td> <td></td> </tr> <tr> <td>4</td> <td>133</td> <td></td> <td></td> </tr> <tr> <td>5</td> <td>127</td> <td></td> <td></td> </tr> <tr> <td>6</td> <td>100</td> <td></td> <td></td> </tr> </tbody> </table> </div> <p>Source: SEND data, Luton, January 2019</p>	School type	SEN category	Percent	State funded primary schools	BESD	18.4%	SLCN	31.6%	State funded secondary schools	BESD	26.7%	SLCN	11.0%	School type	Year	Count	School type	Year	Count	Nursery - Primary	N1	20	Secondary	7	53	N2	60	8	38	R	159	9	36	1	163	10	43	2	177	11	17	3	174			4	133			5	127			6	100			<p>Ensure older children and young people are screened for SLCN, particularly children and young people in identified risk groups</p> <ul style="list-style-type: none"> develop a screening tool for older children, ensuring that children with behavioural difficulties, particularly those that might lead to permanent exclusion or involvement with the criminal justice system, are properly screened for and supported with any SLCN share the findings from this needs assessment with the Behaviour, Inclusion and Wellbeing Advisory Board (BIWAB) who should review and make further recommendations for action
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National evidence¹⁵ tells us that many children and young people do not have their needs accurately identified or supported at secondary school. For various reasons, some may not have attended schools for long period of time. The children who are of most concern are those who are absent from any educational setting or home schooling service, because this means it is not possible to identify and address any needs.

Luton has statistically higher proportions of children excluded from secondary school and of 16-17 year olds not in education, employment or training when compared nationally and with similar areas. National evidence suggests that absence from school makes it harder to evidence a young person's need for support.

¹⁵ Source: DfE 2014 SEN statistics in The Communication Trust (2014) [Doing justice to speech, language and communication needs](#)

Oral health

No.	Key finding	Recommendation(s)
21	<p>There are oral health practices that impact adversely on speech and communication (eg use of dummies or bottles). Luton has much higher rates of incisor caries compared to England. This is a particularly aggressive form of tooth decay that is associated with bottle use.</p> <p>Preventable tooth loss and decay have significant effects on a child's quality of life, including their confidence and self-esteem. Pain can affect speaking, and missing teeth can affect diction and appearance, which may cause children to avoid socialising and speaking.</p> <p>Three-year-old children in Luton have higher prevalence of dental decay experience, higher prevalence of missing teeth and dental sepsis, and greater severity of dental disease than the average child in England. Over a third of Luton three year olds did not attend a dentist appointment during 2018/19.</p>	<p>Raise awareness of the link between SLCN and oral health</p> <ul style="list-style-type: none"> • raise awareness of SLCN with Luton dental teams; especially the Starting Well practices • encourage dental teams to ask questions re dummy/bottle use, ie raise awareness of links with poor speech / diction / confidence rather than thinking tooth decay – signposting appropriately • adopt recording children's dentist details (alongside GP) on SALT assessment forms • raise awareness with community and professional groups of the links between prolonged dummy/bottle use and speech <p>Improve dentist attendance</p> <ul style="list-style-type: none"> • include key messages from the oral health needs assessment, particularly those around attending a dentist, in the SLCN communication strategy

Services that support SLCN in Luton

No.	Key finding	Recommendation(s)
22	<p>Services are already in place in Luton that directly or indirectly impact on SLCN. These span a range of services, some of which are statutory requirements, some locally developed in response to emerging need.</p> <p>Universal services include Bookstart, Cambridge Community Services (CCS) health visiting services, CCS hearing service, Luton Council Flying Start and children's centres, early years education and adult learning.</p> <p>Targeted and specialist services include the Flying Start children's centres' groups for parents with children with a developmental delay, CCS services at the Edwin Lobo Centre, Luton Special Educational Needs Service speech and language service and the CCS Speech and Language Therapy Service (SALT).</p>	<p>Implement new communication and language pathways, to ensure a systems approach in how early language support is offered in Luton</p> <ul style="list-style-type: none"> • ensure pathways implementation is clear for all professionals and that services are based on needs • support the pathways with new screening tools

Intelligence gaps and data issues

No.	Key finding	Recommendation(s)
23	<p>Luton council has good quality early years' data that has contributed to a good understanding of local SLCN, particularly for early years' children. However, some gaps remain where the intelligence picture is less well developed.</p> <p>National data highlights some themes that it has not been possible to explore in this assessment due to time and data constraints. There may be some opportunities for further analysis, but it is important to ensure that the intelligence yield justifies the work involved.</p> <p>Remaining gaps:</p> <ul style="list-style-type: none"> • local understanding of the influence of SLCN on young people who offend, or are criminally exploited • the continuing journey of older children who do poorly in early years, or whose needs were not identified or met when they were young, or those identified with behavioural difficulties in secondary education • intergenerational effects • children who are looked after, and children in need 	<p>Consider intelligence gaps in context of council intelligence priorities and other ongoing needs assessments</p> <ul style="list-style-type: none"> • work with partners to consider the intelligence yield vs the work involved in producing additional analysis on older children, particularly those identified as having behavioural difficulties in secondary education and young people who offend or are criminally exploited • support effective working between different professionals to ensure a holistic view of families through the development of the lead professional role • consider a case study approach to track the journey from early years to adulthood where needs are not met • include identified gaps, where possible, in the SEND needs assessment, which is currently being completed

No.	Key finding	Recommendation(s)
24	<p>There were some data recording gaps, particularly in ethnicity fields, which had a large proportion of missing data and non-standardised entries.</p> <p>Some data fields had not been populated despite their inclusion for the purpose of tracking inequity in relation to educational / developmental outcomes. Of note here is the recording of children in Luton who are looked after and data relating to children identified as having Special Educational Needs.</p> <p>It is important that data is recorded as fully as possible, and with entries that are useable for analysis by allowing for grouping. Gaps in data recording can skew the results of the analysis as well as potentially preventing us from identifying vulnerable groups of children.</p>	<p>Improve accuracy and consistency of data input</p> <p>Agree standardised recording practices, including use of mandatory data fields, to be used across all services</p> <ul style="list-style-type: none"> • use of “16+” ethnicity classification • use Luton Advanced Tracking System (LATS) and other best data practices to agree protocols for data systems, including the use of mandatory fields • work with the school data project to improve recording of SLCN in school databases, using consistent classification categories • ensure that the work to expand the use of the Capita system within the council supports the development of standardised recording systems and mandatory fields to ensure improvement in data collection