Developing a unique Speech and Language Therapy model

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Language and communication are skills that continue to develop throughout secondary education and into adulthood. Students are required to continue learning new vocabulary and complex language structures to enhance learning and interaction with others. In addition, students need the ability to use language for negotiation, compromise, resolving conflict, developing relationships and for managing and regulating their emotions. In essence, language and communication is a core part of everyday life.

The secondary school period is a crucial time in which the development of skills needed to problem solve, build effective relationships, negotiate and tell jokes transpires. However, a significant group of young people find this difficult: those with speech, language and communication needs (SLCN; ICAN, 2011). Despite the fact that it is as important, educationally, to speak and communicate as it is to read and write, there is often limited opportunity in secondary schools for students to access support developing their spoken communication skills. There is also a limited understanding of, and support in place for, students presenting with SLCN. Without this support, poor communication can have a direct negative impact on academic success, as well as on social and emotional development.
Speech and Language Therapists (SALTs) are fundamental in supporting children and young adults with a range of Speech, Language and Communication difficulties. Over time models of provision have changed from a clinic-based service to a school-based service (Law et al., 2000) and are shifting towards the consultation model, in which SALTs advise and support other professionals on the assessment of needs and delivery of intervention (Dockrell et al., 2006). In too many school systems, speech and language therapy services in the secondary age group are minimal (Spracher, 2000). However, research suggests that more, not less, service is needed at the secondary stage to support students during this critical and demanding time of their school life (Bashir & Scavuzzo, 1992).

Developing the provision
After previously supporting speech and language therapy students on placement at Priestnall School, negotiations were undertaken with Stockport NHS regarding the possibility of developing a school-based model of provision, as a direct response to identified need and supporting the new SEND arrangements from September 2014 (Morewood, 2014). The premise of the developing model was to work in partnership with the NHS speech and language therapy team supporting the existing statutory provision while enhancing the availability of specialist support for the wider school population through:

- Formal and informal assessments;
- Consultation with parents/carers;
- Therapeutic intervention with students;
- Helping the school to identify and address whole school development needs;
- Working alongside teaching assistants to support students with SLCN;
- Providing intervention packages and measuring progress;
- Providing discreet in-class support for students with SLCN;
- Developing bespoke support packages for students with other specialist staff.

The immediate benefits of providing the provision in this way includes a tailored support package that suits the needs of individual students and those of the whole school. Such a provision allows for a delivery model based on the nature and setting demands of the school, the teaching realities and the daily challenges faced by secondary school students.

Practical arrangements
Developing the provision within this partnership was new, and arrangements with the NHS allowed for the opportunity to develop a unique set up which involved Priestnall School employing the SALT directly and contracting out one day of therapy per week with the NHS in lieu of supervision. The SALT is registered with the Health Care Professionals Council (HCPC) and is a fully qualified member of the Royal College of Speech and Language Therapists (RCSLT), having successfully passed the RCSLT Professional Standards during the first year of arrangements. This model has ensured that all HCPC requirements are adhered to through: maintaining ongoing continued professional development; certifying that the knowledge and skill set remain current and creative, and are constantly developing; and maintaining a unique caseload within a more flexible working arrangement.
Outcomes
To date, considerable positives of the bespoke model have been identified by different stakeholders: young people, parents/carers and other professionals.

A year 7 student with complex language needs commented that: ‘SALT is really good. Miss Drews is good and we do lots of talking. I need support in my lessons. I like to try and do things on my own but have to ask for help sometimes.’ Furthermore, a young man who is on the autistic spectrum says: ‘I’ve worked on understanding emotions and now I feel better at letting others know how I am feeling. I have learned how to solve problems at school without overreacting. This makes me feel more happy at school.’ Finally, a year 10 GCSE student reports that: ‘I feel more confident talking with my friends and don’t interrupt as much.’

A year 7 parent recently commented: ‘It has been a massive weight lifted off my shoulders knowing that Adam will finally, after all these years, get the Speech and Language therapy he so desperately needs. Devon seems a really lovely person and I am glad she is working with Adam. Thank you!’ Another year 8 parent comments: ‘Speech and Language therapy is vital to David. I believe David’s time at Priestnall would definitely not have progressed if he didn’t have it. The service is invaluable to David as he goes through Priestnall.’

Staff at the school have also seen an impact on students supported by the provision across the school, with members of staff commenting that: ‘It has already given him a voice, when he would have otherwise not committed an opinion’ and that the service has provided ‘excellent provision, strong communication, good quality feedback and excellent working relationships.’ A teaching assistant who works with a GCSE student with complex learning needs also felt support by the service: ‘Miss Drews has given me ideas of things to do, which has also helped him. He has made quite considerable improvement with his communication skills and is consciously trying to engage in positive conversations.’

A more detailed analysis of impact and individual outcomes will be published in a future article in ADM.

Developing future provision
The provision is developing extremely successfully and it is hoped that a movement towards developing the role in facilitating academic success should provide a direction for the professional growth of speech and language therapy students serving as an integral member of the secondary school team and with our feeder primary schools. Plans to develop the service to support feeder primary schools, similarly to our Trainee Educational Psychology Model (Morewood & Rumble, 2013) commences with four schools this summer term, with a view to developing a service provision that can support all young people within our locality.

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References


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