Speech and Language services in Sure Start Local Programmes
Findings from Local Evaluations

Patrick Myers
Jacqueline Barnes
Shraddha Kapoor

NESS
NATIONAL EVALUATION OF SURE START

July 2005
CONTENTS

EXECUTIVE SUMMARY.......................................................... 3

1. INTRODUCTION.................................................................. 6

2. WHY IMPROVING CHILDREN’S COMMUNICATION SKILLS IS IMPORTANT FOR SSLPS ............................................. 8

3. METHODS USED TO EVALUATE SPEECH AND LANGUAGE DEVELOPMENT AND SERVICES IN SSLPS... 12

4. RESULTS: THE PROCESS OF INTEGRATING SPEECH AND LANGUAGE SERVICES................................................ 15

5. RESULTS: IMPACT AND OUTCOMES.................................. 19

6. CONCLUSIONS..................................................................... 33

APPENDIX 1: PROGRAMME DOCUMENTS THAT HAVE CONTRIBUTED TO THIS SYNTHESIS REPORT AND THE REPORT FOCUS .................................................................................. 37

APPENDIX 2: NESS SUPPORT FOR LOCAL EVALUATION TEAM ................................................................................. 41
Executive Summary

Background

NESS synthesis reports bring together information that Sure Start local programme evaluations are reporting around a specific theme or topic. This report addresses the evaluation of speech and language provision and the changes that have resulted for a range of beneficiaries.

Existing evidence suggests that early preventative interventions focussing on language and communication can have beneficial outcomes for children’s well being, learning and future opportunities. It is against this backdrop that programmes are encouraged to examine the process by which they are delivering services and to measure the impacts and outcomes that services are having. Good evaluation can add to the evidence base, inform programme development and ultimately influence the mainstream agenda by demonstrating what works in the field of speech and language from the programme’s perspective.

Methodology

For the purpose of this synthesis, all reports received up to December 2004 were examined for any evaluation outputs relating to speech and language provision. This yielded 40 pieces of research. Their findings were integrated into a framework that sought to extract information - from the point of view of benefits and changes - for children, for parents and carers, and for Sure Start staff. The report also attempts to place findings in the context of existing knowledge and the anticipated benefits that may arise as a result of the interventions described.

Findings

Process: 29 reports have highlighted how programmes have implemented speech and language services. The rationale has often been to establish preventative strategies to improve communication between parents and children from a very early age. Reports have also highlighted the process by which speech and language therapists have worked with staff to increase knowledge and confidence in this field of work. Studies of this
nature reflected on the need to utilise a collaborative and multi-agency approach to achieve the desired outcomes. It is reported that the result of such approaches can be a system that delivers personalised, family focused and sensitive interventions when more intensive support is required. Some reports provide useful descriptions of the way that Sure Start speech and language services are working with and supporting the existing provision of speech and language services in the locality.

Service delivery: Emphasis is placed on increasing parents’ and children’s exposure to communication and language-rich environments in order to facilitate the acquisition of appropriate language skills, minimise the risk of communication problems and provide opportunities for greater interaction. Enhanced staff knowledge improves their skill at making referrals for speech and language delay, leading to earlier intervention.

Outcomes: 19 evaluations have studied outcomes.

The main outcomes reported are:

Children: 19 reports focussed on outcomes for children.

Improvements in comprehension and expressive language are identified, following intervention such as nurture groups, one of which was based on the High Scope pre-school principles. Where programmes have used the Sure Start Language Measure changes over time have been reported in children’s word count as well as a more appropriate level of parental concern.

Parents: 14 reports focussed on outcomes for parents

Much activity within programmes has been orientated to improving interactions between parents and their children. Parental self-report and observation of parent-child interactions has indicated that parents are more effective and confident in their interactions with children.

Staff: 6 reports focussed on outcomes for staff

A range of staff within Sure Start Local Programmes as well as workers in other settings have been provided with opportunities for training, for example on how to provide a language rich
environment and on ways to identify speech and language delay in the children that attend their settings. Staff self-report questionnaire studies indicated that knowledge, skills and confidence have increased as a result of training.

Conclusions

Evaluations have shown that there are benefits of Speech and Language therapist involvement, both when they work directly with children and families and indirectly with staff. Changes in parental behaviour and improvements in staff knowledge and skills were identified. This can lead to environments and interactions that afford the best prospects for children’s experiences in terms of communication. Children of course are beneficiaries of the work that has been undertaken with others, since evaluation has shown that the environments change and staff and parents become more competent in issues around communication. Encouraging effects were detected in the small number of studies looking at children’s comprehension and expressive language though most studies do not include control groups.

The available evidence has several limitations: in particular there is lack of detail about methodology and most studies have small sample sizes. In addition the evaluations reported on activities occurring early in their programme’s development when the process of service delivery was often scrutinised. It will now be important for programmes to pay more attention to assessing impact. Additionally a focus on determining whether changes in children’s language skills are related to programme activities (rather than increased age or other factors) and that they are sustained over time will be needed, ideally comparing them to children who are not in receipt of services. This will create more robust evidence of what Sure Start local programmes are achieving.
1. Introduction

Sure Start Local Programmes (SSLPs) are a key part of the government’s effort to improve the life chances of children in areas of greatest challenge and need. They represent integrated approaches to service delivery specifically aimed at:

- Improving learning
- Improving children’s health
- Improving social and emotional development
- Strengthening families and communities

SSLPs are required to undertake local evaluation examining the process of service delivery and the impacts and outcomes that have resulted from their activities. Evaluation outputs such as annual evaluation reports and findings reports are submitted to the National Evaluation of Sure Start (NESS) team to help develop the evidence base of the impacts of programmes. NESS also provides support to local programmes in conducting their local evaluations.

NESS acts as a repository of all evaluation outputs from the 524 SSLPs. The collation and dissemination of information relating to local evaluation is an important part of the work of NESS, and is facilitated through the NESS website (www.ness.bbk.ac.uk) and through regional workshops and networks. Synthesis reports are amalgamations of evaluation findings on a particular theme. This synthesis document is the second synthesis report by NESS, integrating local evaluation findings related to speech and language provision within SSLPs.

Methodology

All local evaluation reports received up to December 2004 were examined for any work relating to speech and language services. Forty reports provided sufficient detail to enable the authors to undertake some assessment of findings pertaining to the process of speech and language implementation in local programmes and to outcomes that were attributed to the services.
A framework was created to examine the findings based upon the potential beneficiaries of speech and language input: children, families, and staff within SSLPs.

As is often the case with evaluations of this nature, much of the focus of the reporting was around description of service delivery and process evaluation. However it is encouraging to see that some programmes have begun to address the important issue of what has changed as a result of an intervention or service. To that end, this synthesis report differentiates between process evaluations, which rely more on description, and those that sought to detect changes and outcomes. They are reported separately even when reports covered both types of evaluation.
2. Why improving children’s communication skills is important for SSLPs

Language is used to communicate our needs, to indicate our likes and dislikes, to request information, to refute something, to socialise, as well as to establish and maintain relationships. The acquisition of language is the most complex skill anyone ever achieves; yet this task needs to be well under way by the time a child reaches school age. If children show good language development they are likely to become confident communicators and this is provides a foundation for a happy, fulfilled and successful life.

Language development is often taken for granted. However, 1 in 10 children have speech and language difficulties and are at serious risk of social isolation and educational failure. There is evidence that speech, language and communication difficulties in young children are strongly linked to poor outcomes in their intellectual, social-emotional and educational development.

Early language development is an important indicator of potential for later reading and writing proficiency. Children who fail to develop adequate speech and language skills in the first years of life are up to six times more likely to experience reading problems in school. Over 50% of reading difficulties are preventable if children are provided with effective language development experiences in the early years.

Young children spend a lot of time with parents, and they are in the best position to promote speech and language development. Parents and other carers are a child’s first teachers, and the years from birth to three can be crucial in developing all aspects of a

young child’s growing need to communicate. Evidence indicates that children’s level of language development is strongly influenced by how much parents talk to their children. The more stimulation young children receive in terms of being read and talked to, the greater their capacity for language and literacy.

Why do some children not receive enough language stimulation in the home? There are numerous possibilities including:

- Parents’ working patterns – no time to talk
- Loss of extended family surrounding the baby, and smaller family units
- Family gatherings rare e.g. no family mealtimes
- Background noise from TV and radio
- Pushchairs face away from the pusher
- Pace of living – lack of time even for sustained eye contact
- Some parents lack models of imaginative, active play
- Expectation that children will just pick up speaking skills from general chatter around them, or learn language once they begin at nursery school
- Lack of awareness of the importance of pretend play, music, rhythm and rhyme on language development
- Lack of awareness of the importance and pleasure of talking and listening, and of how communicative behaviours start from birth onwards

The key to helping young children to speak, listen, read, write and socialise better lies in encouraging parents and carers to talk to them more, and to respond to their attempts to communicate. The ability to learn a language will be more difficult, and perhaps less efficient or effective, if children do not experience a rich variety of language and speech opportunities. However, parents often lack confidence or experience of important parenting activities, such as attentive listening, singing songs, playing rhyming games and sharing books. Nevertheless, they can be supported so that they understand their valuable contribution to their child’s ability to make sense of the world, through encouraging communication at every opportunity. Young children are active learners, and the

---

pleasure to be gained by both child and adult in simply talking together is undervalued5.

SSLPs are well positioned to address these issues and work hard to prevent delay in the development of language and communication skills. One of the main aims of Sure Start is to ensure that children are prepared and ready to thrive once they reach formal education and as such any delay in the acquisition of speech and language skills and abilities materially impacts on a child’s opportunity to learn. Working with parents and children on issues around communication should have a major impact on young children’s capacity to take advantage of educational opportunities whilst at the same time reducing the risk of becoming isolated in both social and educational surroundings.

In addition to promoting this kind of opportunity and communication enriched experiences for parents and children, speech and language therapists in SSLPs also seek to address early identification and subsequent remediation of communication difficulties.

Programmes’ efforts to provide and enhance speech and language support contributes to several PSA objectives (see Table 1)

Table 1: Speech and Language and Public Service Agreement (PSA) objectives

<table>
<thead>
<tr>
<th>PSA</th>
<th>Speech and language activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improving Social and Emotional Development</td>
<td>Preventative work with children and their parents to encourage stimulating language in the home may prevent speech and language delay in vulnerable children, enhancing the quality of parent-child interactions and possibly preventing family conflict, often precipitated by failure to comprehend parental instructions. Early identification of communication problems can</td>
</tr>
</tbody>
</table>

5 Bowman BT, Donavan SM, Burns SM (2000) Eager to Learn Educating Our Preschoolers Commission on Behavioural and Social Sciences and Education Washington DC
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Improving children’s learning</strong></td>
<td>Speech and language delay has an impact upon a child’s ability to learn and participate in situations where learning takes place such as playgroups and other group settings.</td>
</tr>
<tr>
<td><strong>Strengthening Families and Communities</strong></td>
<td>Frustrations that are associated with poor ability to communicate can lead to family tensions and conflict, and may contribute to parental depression. Improving the language of both parents and children should help to prevent frustration.</td>
</tr>
</tbody>
</table>
3. Methods used to evaluate speech and language development and services in SSLPS

A range of methods has been used including:

- Audit
- Questionnaires
- Observations
- Interviews
- Communication Specific Measurement Scales
- The Sure Start Language Measure (SSLM).

**Audit**

Audit has been used to assess both need and the current state of speech and language services that families are able to access from mainstream statutory service providers. Some reports have highlighted the referral structures and waiting times. The referral system and the length of wait has been used by many programmes to inform the development of their speech and language service, by both looking to address the preventative speech and language input as well as seeking routes to support those children in more acute need sooner and within the community in which they live.

**Questionnaires**

Questionnaires have been used to assess parents’ experiences of speech and language input and any changes that they have seen in their children. They have also been asked to report on changes in their own confidence and communication ability with their children. Staff who have had access to training in communication have completed questionnaires to assess the nature of the training and the changes that may have occurred in their practice as a result of the training. Most studies, however, do not cover skills prior to the speech and language service. A further limitation is the small sample size in most.

**Observations**

Some local programmes’ evaluations have involved observations of children, parents or staff to assess changes that occur over time in the quality of their language following speech and language input. Reports often provide scant detail of the rationale for why
certain methods were employed and often in the case of observation fail to address issues of how validity and reliability were considered, for example by reporting the use of two observers that were subject to some inter-rater reliability check.

**Interviews**

Evaluations have used interviews to elicit views associated with the provision of speech and language services. Some have recognised the contribution that qualitative methods can have in evaluating both process and outcomes. Reports have included interviews with staff and parents as well as some reflexive diaries of speech and language workers that were explored in dialogue with researchers.

**Communication Specific Measurement Scales**

Before and after measurement of children’s speech and language have been conducted in a small number of studies, using standardised instruments. This is encouraging since the use of standardised well-tested measures improves the reliability and validity of the findings. A pre- and post- intervention measure, albeit with quite modest sample sizes has indicated that interventions are making a difference in both comprehension and expressive language skills. Where assessment measures have not been used, one programme highlighted this as a limitation in the evaluations that have taken place. The suggestion from them was that, in order for the children’s progress to be monitored, the same assessment needs to be used before the speech therapy course begins and after they have been completed. This will enable direct comparison between the two assessment times and will determine an improvement or not. Also, the involvement of a member of the speech and therapy teams in the evaluation task group will help the therapy team keep in line with the national targets set up for Sure Start, and will keep them up to date with evaluation procedures and what needs to be added/changed to the service.
The Sure Start Language Measure (SSLM)

The SSLM is a parent report tool administered during an interview. The measure is being used to monitor progress that is being made in communication abilities of children in SSLP areas. The measurement instrument looks at the appropriate levels of parental concern relating to children’s ability to put words together. However the tool can also be used at the local level to report progress, inform programme development and where necessary re-shape services to achieve greater outcomes. The document “Monitoring language development of two year olds”, available on the Sure Start website, suggests some potential uses of the SSLM for programmes. They are summarised below:

- To feedback results to beneficiaries and the wider programme partnership to demonstrate progress.

- To set a local baseline to compare performance across years.

- To examine the relationship between SSLM performance and referrals to local Speech and Language services. Are the results associated with a change in referral patterns?

- To compare the local results of the SSLM with either regional or national data.

The intention therefore is that programmes use the SSLM and utilise the information as part of their local evaluation. Programmes have used the SSLM in various ways. Some have measured a sample of their child population whilst others have adopted the approach of attempting to collect information about all children in the target age range.
4. Results: The Process of integrating speech and language services

Process evaluation, describing the approach to speech and language provision, has been used to reflect upon how the programme is implementing its strategy. This is useful in that it can document the context by which outcome measures can be interpreted. However, not all reports considered the development of services in terms of progress and outcomes following the initial implementation stage. Instead, these reports tend to focus on the type and delivery of services.

Twenty-nine reports used process evaluation to explore speech and language provision within their programme. Most of the time programmes have reported on the development of speech and language services, outlining the approaches taken in service delivery and developing speech and language capacity. It is hoped that future evaluations will take more time to approach the measurement of speech and language activity in the programme with a more outcome orientated methodology. The information has been categorised according to the focus of the reports into: what has happened for children; for parents and carers; and for staff. Five reports also described the type of instruction and training that took place. Where outcomes associated with these outputs are reported they are included in section 5.

Children

Six reports highlight innovative ways that speech and language therapists are working. For example, a programme in the West Midlands has adopted a policy of making sure that all activities that are undertaken by Sure Start receive some speech and language input. The speech and language therapist works in collaboration with local programme staff providing input into planning activities as well as being available to conduct diagnostic work with children who may have speech and language delay.

It is also clear from the reports that communication is seen as being more than speech. Efforts have been made to incorporate the whole range of communication options in the practice of developing communication skills. For example, one programme has a baby signing project where children are exposed to language in conjunction with signing, thus providing a holistic
experience of communication and reinforcing multiple means of communication.

### SOME WAYS COMMUNICATION ACTIVITIES ARE DELIVERED

Children practise their language and reading skills through delivery of a range of groups including: Babble, Bounce and Rhyme, Story Sack sessions in the parent/toddler groups and Story Sack training sessions for the parent/toddler group leaders, and Sure Speakers - a themed reading and craft and rhyme session. These usually run for 6 x 2 hour sessions, 6 – 10 parents attend with their children.

Sessions in the swimming pool involve educational play and communication related activity. This group is said to be popular; 25 parents attend with their children and there is a waiting list.

Library box visits are carried out to parent and toddler groups, there are currently 8 boxes operating. This scheme reported a 700% increase in the issue of children’s books at the local library.

Additionally one report highlights some efforts that are made to screen babies. A visit is made to all children aged 8 months to screen and also discuss language stimulation techniques with parents. This is another demonstration of how services are being shaped in a family and child centred preventative way.

### Parents and Carers

Five evaluations commented on the role that home visiting has for service delivery.

### ACCESS TO SERVICES THROUGH HOME VISITING

One evaluation reported that the programme’s speech and language team offer home visits for the first contact with the team. The result was that a 96% success rate was reported for initial contact compared with less than 50% at more conventional clinic settings.

Another programme reported on the use of telephone reminders about speech and language appointments.
Many evaluations have examined ways to influence the role that parents have in terms of developing their children's ability to communicate and make developmental progress. To that end, programmes have developed ways to engage with parents at early stages to demonstrate their role in their children's language development before a problem may develop. One report concluded that working closely with parents facilitated early identification of potential problems, enhancing parents' knowledge of language acquisition and key markers for normal language development.

**WORKING WITH PARENTS**

Early Start-Baby Talk is a family-learning programme supported by the Basic Skills Agency. The aim of the project is to provide support for families on issues around speech and language and also to support parents and carers with literacy and numeracy problems. It was conceived as an inter-agency project and a way in which work could be undertaken with parents and children together.

One evaluation highlighted work that was being undertaken with the parents of children who had been identified as having below average language skills. These children were identified at 8- and 18-month developmental checks. Parents were invited to participate in a home visiting programme that utilised story bags as a means to increasing parental involvement in their children's language acquisition.

**Staff**

Twenty-one evaluations have highlighted the role that Sure Start and other staff in early years environments have in working towards better language and communication outcomes for children and families. Much speech and language therapist time has been devoted to improving skills and practice by supporting workers in a variety of settings. Some evaluations highlighted how the programme had developed communication specific information packs for both staff and parents to encourage better communication between adults and children.
This has been achieved with a combination of training staff in communication skills and increasing their levels of confidence in assessing children’s speech. The therapists provided some of this training but specialist training has also been conducted by outside agencies. Some therapists have been instrumental in ensuring that staff in a range of settings think about enhancing communication during all their activities. For example, they may be encouraged to ensure that the physical environment is full of interesting features that stimulate children’s language, decorated with eye level displays of events and trips undertaken by Sure Start programmes, thus facilitating recall and discussion about them with other children and families.

The interagency approach to delivering better outcomes for children has been highlighted in several reports, recognising that good communication was the whole team’s responsibility. All members of the team working together are more able to act to prevent communication delay, ensure early identification and intervene when delay has been recognised and work towards a language and communication rich environment in every place a child experiences.

DEVELOPING NEW SKILLS FOR STAFF
One programme wished to develop their staff’s ability to evaluate their setting in terms of speech and language opportunities. A training programme was devised and delivered to three settings. The project had several short-term aims:

- To start the process of increasing self confidence with regard to working on speech and language
- To start the process of increasing staff awareness and knowledge of speech and language development
- To support staff in formulating speech and language targets for their individual settings
- To effect change in the practice of settings

Objectives included:
- To increase staff knowledge and confidence via a training day
- To formulate a plan of action for each setting to implement speech and language targets
5. Results: Impacts and outcomes

The need for speech and language services

Preventative work around communication skills and language acquisition delivered flexibly can have an impact on the life chances of children. However, much of the evaluative output from Sure Start local programme evaluations naturally concerns the short-term changes that occur within settings and for individuals.

The outcomes of programmes’ efforts to affect the communication of children and families can be categorised according to the intended beneficiary. It is worthwhile considering how each group of recipients of speech and language support (children, parents, staff, systems and services) has experienced change as a result of the intervention and what may be the wider benefits that occur. Also one particular goal identified in several reports was to develop better access to services. Often this was seen as a goal of the additionality that SSLPs were encouraged to develop, supplementing existing provision with approaches that could work alongside such delivery.

Better Access to Services

Four programmes conducted formative needs assessments and reported that children referred to mainstream speech and language services encountered a considerable wait for an initial assessment. For example one report detailed an average of 19 weeks. Another report noted that in the Sure Start local programme area referrals were more likely to occur at age 4 rather than earlier. One programme used this information to develop action points to inform service development. These included:

- To increase the percentage of 2/3 year olds being referred to speech and language therapy,
- To decrease the percentage of 4 year olds being referred to the service.

As a result of information such as the above, three evaluation reports have looked at the percentage of children accessing the speech and language service, based on monitoring statistics available within the programme. Often this involved incorporating
Speech and Language therapist monitoring data into the evaluation outputs in order to provide readers with a sense of the productivity of the service. However, when these are related directly to outcomes in terms of improving access, reports have indicated a much quicker route to speech and language support as a result of some of the processes highlighted in the previous sections.

SUPPORTING THE MAINSTREAM

One programme prioritised preventative work and screening work with children of 2 and 3 years old to maximise the impact that speech and language can have early on in a child’s life. Early identification of problems may result in an increase in referrals to specialist support for younger children.

As a result of documenting a long wait between referral and first appointment, a new strategy was put into place with interim assessment and support to children and families in the waiting time. It was hypothesised that providing some speech and language input whilst waiting for the mainstream appointment could ameliorate the effect of communication delay.

For some programmes, increases in the identification of speech and language delay were seen as a good outcome. This is based upon the need to work with younger children so that the interventions are able to ameliorate the later effects by working with children while they are more disposed to responding to speech and language interventions.

One way to report on this outcome was to scrutinise and report on statistics about the uptake of services. This is another useful way to contextualise some of the impacts that have been achieved. For example one Sure Start local programme detailed the following:

SERVICE DELIVERY STATISTICS – 2001/2002

43 children referred to the Speech and Language service.

67% were referred by the Sure Start health visitor.

88% of children were seen in their own homes.
Average waiting time from referral to appointment with Sure Start speech and language worker was 2.5 weeks.

14% did not require any further intervention after the initial assessment.

86% had an average of three follow up visits, usually in their own home.

9% of those seen were referred to an intensive language group.

Two evaluations focused on needs assessment and as such were used to identify how Sure Start programmes were able to add to what was provided by mainstream and statutory provision. These programmes saw this as an important outcome recognising and reporting that early intervention was more preferable than later identification of need. As a result these evaluations often focused on variations in referral routes, volume of referrals and the age at which children were referred.

Several speech and language projects are designed to influence multiple beneficiaries. For example, TALKS, PEEP, Chat a Way, Talking Together often have a joint objective of increasing staff knowledge about language acquisition, reinforcing the role that parents have upon this process as well as exposing children to quality interactions in language enriched environments.

The aims of such projects usually include:
- Improving language and communication skills
- Developing literacy and numeracy skills
- Developing self-esteem
- Encouraging bonding and attachment between parents and their children
- Recognising that parents are the best educators of children and giving them the skills to help in their children’s development

Many of the reports focussed on the opportunities for parents to access services that are family friendly. It has also been highlighted that when a child is identified as being in need there are easy routes for self-referral through multiple access points
within the Sure Start programme. With staff often trained in identifying potential delay in children, parents also have others who are able to assist them in this process, addressing their concerns and strengthening networks between staff and parents at the same time.

Some evaluations also focused on the delivery of services in the home environment. The benefits that can be associated with such service delivery, particularly with those people who do not easily engage with mainstream services, are important ones. Much effort is made to focus on the flexibility of service provision, responding to the need of the service user, so that often a range of approaches are used to deliver services personalised to the particular family. The overall outcome was most often reported in terms of facilitating improved contact with families, reducing missed appointments and a proactive way of delivering these types of services.

One evaluation assessed the usage of such a project over one year and the results are detailed below. 1046 different children visited the project with a total of 2667 visits.

**Figure 1: Number of children seen and the number of visits to a language and communication project.**
Changes and Benefits for Children

As a result of children’s participation in a speech and language group, parents in several studies were reported as saying that they could detect a noticeable improvement in their child’s language development, based either on self-report questionnaires or interviews.

Many of these groups had learning objectives focussing on parental skills as well as exposure of the children to language-enriched environments. Thus any conclusions drawn should consider the synergistic nature of Sure Start speech and language interventions across a range of beneficiaries. The children may not in fact have improved dramatically (though this was not assessed directly) but the parents seemed to be more aware of their language, which is an important outcome.

Two evaluations used a before and after methodology to measure change in children’s language skills, assessed independently of the parents. In one, nursery children were screened using the standardised Heben and Whyte developmental progress chart. It was found that 75% of children had a delay of 6 months; over 50% of those had a more significant delay and associated behaviour problems.

The assessment data were used to identify five developmental levels, one representing the most basic level and five indicating that a child was ready to engage with the Foundation Stage curriculum. Each child was allocated to the level at which they were able to function comfortably. The intervention then involved a learning support assistant guided by the speech and language therapist engaging with the child with a language enriched curriculum targeted at their specific needs.

After 6 months the children were reassessed. All children had made progress according to the measures (which take chronological age into account) and were at the appropriate level to engage successfully with the Foundation Stage curriculum. In fact 38% were initially assessed as being on the lowest level of functioning at the outset of the intervention whereas none were at this level after the intervention.
The changes over one year for specific children were also reported, giving additional context to the results (see Table 2). This table illustrates how a using a standardised test score the programme was able to document the progress that had been made in the children’s use of language and understanding of language in 12 months.

Table 2: Change over time in Heben and Whyte scores for three children involved in a speech and language intervention

<table>
<thead>
<tr>
<th></th>
<th>Age (years)</th>
<th>Use of Language (H&amp;W score)</th>
<th>Understanding language (H&amp;W score)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child A Dec 2002</td>
<td>3.1</td>
<td>2.6</td>
<td>3.0</td>
</tr>
<tr>
<td>Child A Dec 2003</td>
<td>4.1</td>
<td>5.0</td>
<td>4.0</td>
</tr>
<tr>
<td>Child B Dec 2002</td>
<td>3.5</td>
<td>3.0</td>
<td>3.0</td>
</tr>
<tr>
<td>Child B Dec 2003</td>
<td>4.5</td>
<td>5.0</td>
<td>5.0</td>
</tr>
<tr>
<td>Child C Dec 2002</td>
<td>3.6</td>
<td>2.7</td>
<td>2.1</td>
</tr>
<tr>
<td>Child C Dec 2003</td>
<td>4.6</td>
<td>4.6</td>
<td>5.0</td>
</tr>
</tbody>
</table>

Use of standardised assessments such as the Heben and Whyte Scale can provide insight for programme staff into those children who did not make progress. It was reported that, after the involvement of a learning support assistant, some of the children were referred on to specialist speech and language services which were offered within the same setting.

Another evaluation using pre- and post-intervention assessment, this time with the Reynell Scales, found that skills in linguistic concepts, recalling sentences and vocabulary, did not show marked differences, while scores for phonological awareness were higher post intervention.

Standardised assessments can also be used to document the proportion of children with marked delay (see Figure 2).
While it is interesting to look at delay in children younger than 4, it is also a useful evaluation strategy to look at those children aged 4 (Sure Start ‘graduates’) as they move to other settings. One such evaluation was able to document a steady decline in the numbers identified with speech and language delay at screening sessions for 4 year olds (see Table 3).

**Table 3: Changes in speech and language delay at age 4**

<table>
<thead>
<tr>
<th>Year</th>
<th>% of 4 year olds with speech and language delay</th>
</tr>
</thead>
<tbody>
<tr>
<td>2001-2002</td>
<td>30%</td>
</tr>
<tr>
<td>2002-2003</td>
<td>14%</td>
</tr>
<tr>
<td>2003-2004</td>
<td>11%</td>
</tr>
</tbody>
</table>

Two other reports highlighted significant decreases in the number of children with delay at age 4. One programme identified a reduction from 5% in 2001/02 to just over 2% in 2003/04 with the other programme reporting a reduction from 8% to 5% over the same period.

One evaluation made use of Foundation Stage results for 2004 comparing a school in the Sure Start area with county performances across a range of domains (see Figure 3). Although the school has over 50% of children receiving school meals, the achievement is above the county average in all FSP domains.
The programme reported that these results were derived from an intervention that sought to increase the level of language ability in nursery-aged children through ongoing language enrichment activities. The results indicate good progress across all the Foundation Stage Profile domains from aggregated scores.

Another report focused on outcomes at 4 years old that resulted from a comparative study of two cohorts (see Table 4). One cohort (2001) represents Sure Start graduates while the previous cohort (2000) had not received any Sure Start services. Both groups were screened using a comprehensive screening tool.
Table 4: Comparison results for pre-intervention (2000) and intervention (2001) 4 year olds in four schools

<table>
<thead>
<tr>
<th>School</th>
<th>Linguistic Concepts</th>
<th>Recalling sentences</th>
<th>Vocabulary</th>
<th>Phonological Awareness</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>7.68</td>
<td>8.72</td>
<td>9.84</td>
<td>8.76</td>
</tr>
<tr>
<td>B</td>
<td>8.52</td>
<td>9.55</td>
<td>9.51</td>
<td>9.72</td>
</tr>
<tr>
<td>C</td>
<td>8.31</td>
<td>8.27</td>
<td>8.87</td>
<td>9.02</td>
</tr>
<tr>
<td>D</td>
<td>9.50</td>
<td>9.78</td>
<td>10.33</td>
<td>11.00</td>
</tr>
</tbody>
</table>

Although the screening of 4 year olds shows some differences after the introduction of Sure Start services it is only the measures of phonological awareness that are statistically significant. This outcome is encouraging in that good phonological awareness has been proved as a key predictor of later literacy success. This report represents good practice in outcome evaluation. Not only was the method designed to compare groups it also applied some rigorous statistical techniques to assess the strength of any difference. It is important that evaluations attempt to focus on changes over time and wherever possible use some comparative data to attempt to assess the attribution of such differences to the programme’s activity.

Regardless of where speech and language services are directed (children, staff or parents and carers) it has been possible to document how children's language was enhanced. For example some programmes placed great emphasis on developing parents’ interaction with their children. This not only provided parents with skills but also provided the children with better social experiences. One evaluation report suggested that this might have been the first time that the children experienced quality time with a parent/carer in a stimulating environment with all the benefits that can be associated with that experience.

Two evaluations included data derived from the Sure Start Language Measure. The national sample, which is used to monitor programmes progress in developing communication competencies and appropriate parental concerns, requires programmes to submit representative data for fifteen 2 year olds. Some programmes have compared their performance as recorded by the representative sample against that of the national sample. Programmes that have used this method have discovered that their results were not dissimilar to the national picture. However in
one programme fewer parents reported concerns about their children’s language development than the national sample. In one evaluation report data was compared between 2002 and 2003 taken from 56 and 39 children respectively. Speech and language delay was reported at 28% for the first data collection period reducing to 16% for the later. Although issues of causality will always be problematic, programmes are using these measures as proxies for impact of language and communication efforts within the services they are providing.

Changes have occurred in parental awareness and concern about normal language development. One evaluation used the SSLM with 45 children and the results indicate greater progress than nationally in terms of words known. Interestingly they also noted more parental concern associated with children’s low word count.

Several process evaluations highlighted the innovative ways that services were being developed and the potential to change traditional ways of providing speech and language input. These changes allowed for easier referral routes, earlier identification of communication delay and services closer to where the children lived. All these are likely to reduce the impact that communication problems may have on a child. Earlier identification has obvious potential impacts that may not necessarily reveal themselves in the short term but will certainly contribute to improving the life chances of children in terms of social skills and educational attainment.

Ten reports highlighted enriched child care environments that were orientated to better communication and encouraging greater opportunities for children to express themselves. Children are likely to have benefited from this quality improvement in their childcare environments, but this remains to be documented. The work achieved through the training of professionals working with children therefore has the potential to contribute by creating a better experience for children, one that adopts the principle of good practice around communication, which affords children the opportunity to make age appropriate progress in their speech development. Well-trained staff are also able to recognise problems as they emerge and make appropriate referrals, thus leading to swifter resolutions of communication problems.
In summary, the changes and benefits that have been reported for children include:

- Improved environments,
- Increased expressive language,
- Improved comprehension,
- Earlier identification of speech and language delay and other communication issues,
- More responsive services such as home therapy.

Changes and benefits for parents and carers

Evaluation reports have mainly reported on activity involving parents and carers with their children, sometimes in settings that would not be traditionally associated with improving communication such as swimming pools in the case of one report. Many reports stated that the overall aim of this type of activity was to raise parents’ and carers’ awareness of the key role that they have in their child’s language and communication development. Where necessary the inputs were also directed to offer assistance to develop the skills to enhance both parent/carer and the child’s communication experience.

Evaluations have made attempts to capture what parents have felt about their involvement in such initiatives within the programme. Many have used questionnaires and some interviews to see what has changed for parents. For example:

‘At the beginning of this group (family talk) I didn’t think it would work for me and honestly I thought it was a load of rubbish but putting the ideas into practice it has helped me and my son develop tremendously’ (Parent)

‘I feel more confident as a parent since joining the KEEP group. I am able to talk with other parents about situations I have had with my children without feeling as if you are the only parent going through the same thing. I believe I am more confident in doing different things with my children.

---

6 KEEP Projects Objectives 1. Improve language and communication skills. 2. Develop literacy and numeracy skills. 3. Develop self-esteem. 4. Encourage bonding and attachment between children and their parents. 5. Recognise that parents are the best educators of children and give them the skills to help their children’s development.
without feeling silly doing it, such as singing with them’
(Parent)

Where self-report questionnaires have been used, changes include:

- Improvements in parents’ confidence to talk with their children,
- Increased parental awareness of children’s needs in terms of language and communication,
- Awareness of the importance of eye contact,
- Positive feedback that learning has occurred,
- Increased understanding of the importance of singing and rhymes to children’s language development,
- Increased understanding of some of the ‘rules of language’ such as sequencing and turn taking.

There were some attempts to measure the sustainability of these improvements and to provide evidence of change in parental behaviour. An observational evaluation concluded that there was evidence of increased eye contact, better positioning of young babies to benefit from observing speech and also more time allowed for children to respond to verbal stimuli.

Two reports noted that, as a result of increases in skills and knowledge, there was reduced concern among parents about their child’s language.

‘He’s just starting to speak really well now and he is really pleased with himself, like he’ll say ‘I said that right’ and he’ll be really proud…. that is through Sure Start…it has taught me how to teach at home just by going (to the sessions)…. and its worked, I mean he is brilliant now’ (Parent)

As always, where groups are used, there is the added benefit of parents and carers extending social networks as well as working together and three reports highlighted this as a additional outcome of parents working together.
In summary, the changes and benefits that have been reported for parents include:

- Improved confidence in communication,
- Improved understanding of the role parents play in communication with children,
- Appropriate levels of concern associated with the child’s communication profile.

**Changes and benefits for staff**

Many programmes have recognised that opportunities for stimulating language and communication development occur in every setting and every activity that parents and carers and children experience. Eleven reports provided detailed information concerning this aspect of service delivery. These revealed that much time and resource has been placed on increasing staff’s awareness of their communication, providing them with competent skills to deliver communication enriched services and be able to detect speech and language delays more easily. This has been achieved through a combination of training sessions and speech and language therapist input into various sessions and activities taking place. Additionally, programmes have developed resources that assist staff in extending their knowledge and skills pertaining to speech and language development, often featured as part of staff training.

Changes:

Using self-report questionnaires, staff reported positive experiences of the training and support they received, including:

- Increased confidence in identifying language problems,
- Improved knowledge of developmental milestones, associated with communication,
- Improved ability to implement language enriched activities.

Open-ended comments indicated change:

‘*We have changed the way we deal with her now*’

‘*Makes you realise what you are there for, not just for the children with severe difficulties*’
Reporting the impact of training invariably involved measuring in some way or another the knowledge and confidence of the individual, often with before and after scores. Most changes were positive but two reports suggested that the training had not facilitated overall improvements, possibly due to differences between staff in their ability to respond to the material or simply that some were more motivated by the subject than others.

Overall the reports that focused on staff training concluded that the capacity for staff, such as those working in nurseries for example, to spot speech and language problems and then be able to refer them to appropriate services is seen as very valuable.

‘There is a quick turnaround between a problem being spotted and a child being assessed’ (Sure Start worker)

In summary the changes and benefits that have been reported for staff members include:

- More able to identify speech and language delay,
- Understanding of the importance of language enriched environments,
- Greater understanding of child development.
6. Conclusions

A range of evaluation methods has been used by programmes to attempt to understand the process, and to a lesser degree the impact, of speech and language provision in their locality. Many programmes have recognised that further research will be required to examine the long term outcomes but some attempts have been made to assess the short-term outcomes of their interventions by looking at children’s language development, the proportion who are in need of remedial services, parents’ perceptions of their children’s speech and language, parental stimulation and the knowledge and skills of staff with respect to young children’s language development.

There is enthusiastic acceptance that preventative measures should be in place for infants and toddlers to reap subsequent dividends in their capacity to benefit from educational experiences. Programmes are witnessing more parents engaging with young children in appropriate ways, likely to lead to better outcomes in the future.

The process evaluations provide useful information about attempts to develop flexible, needs-led services that are personalised, indicating that services fit with governmental aspirations to develop a more effective approach to early intervention. Not only did this approach identify need, and indicated the best ways to meet that need, but evaluations also demonstrated ways in which Sure Start services work in conjunction with mainstream services by providing interim assessment and some therapy whilst waiting for an initial appointment. Evaluation of this type, when coupled with some assessment of the value of interim support, should be prioritised for further evaluative activity in order to contribute to the mainstreaming agenda that is currently in the ascendant.

The success of Speech and Language therapists working as consultants to share skills and knowledge with staff once again highlights the multidisciplinary approaches embedded in the Sure Start way of working. The self-reports concerning training and speech and language input are encouraging in that staff report increased confidence in communication skills, knowledge of communication milestone and most importantly increased ability to identify delay when it is evident. These approaches will then
increase the opportunity for children to experience language-enriched environments with high quality interactions and the identification of delay early on in the child’s life. The fact that these skills are being shared with a wide range of settings throughout Sure Start areas and not just directly funded projects again demonstrates the role that Sure Start local programmes have in developing and supporting quality children’s services.

To summarise, on the basis of available reports, it has been possible to identify the following:

- Speech and language services are being delivered in a preventative way, across team structures and in the wider locality
- Where outcomes for children, parents and staff have been considered some limited but discernable positive changes and benefits have been detected, although the problem of comparison groups remains
- There is evidence that Sure Start speech and language services are orientated to families’ needs and, when more intensive intervention is required, are delivered in appropriate ways
- There is also evidence that Sure Start services can interact with mainstream provision by providing additional support to families
- Children’s speech and language skills are being developed in a wide range of settings
- Practitioners are aware in this field that future evaluations could be more robust in terms of outcomes

As with all reports that are focusing on early findings, these conclusions should be considered preliminary. There are nonetheless some important implications for future evaluations and the following points should be considered:

- Some of the evaluative activity reported here measures short-term outcomes and impacts. It will be necessary to assess whether the changes have been sustained. For example witnessing closer interaction and eye contact with parents in the short term is important but has the intervention changed long-term behaviour, and behaviour in a range of
settings? And are there changes in children’s speech and language?

- If there are changes in staff confidence and their capacity to identify children in need of referral, can the needs of those children be met?

- Programmes are regularly using the Sure Start Language Measure for monitoring purposes. Only two reports used this measure to evaluate how their cohort of children was doing compared to others. This measure should not be seen as something apart from evaluation but something that can be used to add to the evidence. Programmes should maximise the use of the SSLM in their evaluation outputs as it provides a useful comparator between time points and with the national sample. To further explore the possibilities programmes should make use of the Data Collection Guidelines 2004-2005 available at http://www.surestart.gov.uk/publications/index.cfm?document=127

- It is acknowledged that the reports are focussing on early stages in programmes’ development and, in accordance with recommendations from the Sure Start Unit, much evaluation activity was initially process orientated. However more attention now can be placed on outcome evaluation. Some reports have made good attempts to detail the outcomes of the intervention. At the commencement of a project evaluators and staff need to plan what the criteria is for success and find reliable ways of measuring progress to that criteria.

- It may be worthwhile following up on Sure Start graduates that have now moved to other settings such as nursery classes or even reception classes. How well are they doing? What do teachers feel about the language and communication skills they bring to the setting? Structuring this type of enquiry in an evaluative way may well give rise to interesting data about the impact of Sure Start speech and language services. Nationally this work is being undertaken by NESS but some assessment of the perceived communication competencies of children as they progress
into other settings could add to the picture of the impacts of what programmes are achieving in this very important area.

- There is much to be positive about in terms of what this small number of reports has concluded. It is also encouraging to see that programmes recognise the value of speech and language input and are opting to evaluate this service. Although these are early findings there is reason to believe that Sure Start speech and language services will impact upon the well-being of the families and children they work with.

‘You can recognise the KEEP children instantly. As soon as they come through the door, they showed greater confidence and were willing to talk to anyone. They are more articulate, with better language skills, and are better able to contribute fully in the classroom. They show longer attention spans and greater listening skills, and were more able to form positive relationships with their peers and with staff’

(Deputy Head, Early Years Centre)
Appendix 1: Programme reports covered in this synthesis of findings and each report’ focus

<table>
<thead>
<tr>
<th>District</th>
<th>Programme</th>
<th>Report Title</th>
<th>Process</th>
<th>Outcomes</th>
<th>Child</th>
<th>Parent</th>
<th>Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rossendale</td>
<td>Bacup and Stackstead</td>
<td>Evaluation of Story Sessions</td>
<td>✓</td>
<td></td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rossendale</td>
<td>Bacup and Stackstead</td>
<td>Evaluation of Ducklings Sessions</td>
<td>✓</td>
<td></td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barnsley</td>
<td>Kendray and Bank End</td>
<td>Evaluation of Sure Start Speech and Language therapy groups to pilot nursery</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barnsley</td>
<td>Kendray and Bank End</td>
<td>Annual Evaluation Report 2002-2003</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bournemouth</td>
<td>Bournemouth</td>
<td>Lets Play Together Report</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bristol</td>
<td>Hartcliffe, Highridge and Withywood</td>
<td>Speech and Language Therapy Service Report</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Bristol</td>
<td>Knowle West</td>
<td>Three Year Report</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coventry</td>
<td>Foleshill</td>
<td>Summary of Local Evaluation</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coventry</td>
<td>Coventry West</td>
<td>Evaluation Report</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Copeland</td>
<td>Whitehaven</td>
<td>Annual Report 2001-2002</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>East Riding of Yorkshire</td>
<td>Bridlington South</td>
<td>Speech and Language Report</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Location</td>
<td>Location</td>
<td>Report Description</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>-------------------------</td>
<td>---------------------------</td>
<td>---------------------------------------------------------</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Exeter</td>
<td>Exeter</td>
<td>Speech and Language Report</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kensington and Chelsea</td>
<td>North West Kensington</td>
<td>Supporting Families &amp; Changing Services Report</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kingston upon Hull</td>
<td>Northern Hull</td>
<td>Annual Evaluation Report</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Leicester</td>
<td>Beaumont Leys and Stocking Farm</td>
<td>Evaluation Report 2003</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Mansfield</td>
<td>Ravensdale</td>
<td>Early Start-baby talk Evaluation</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Mansfield</td>
<td>Ravensdale</td>
<td>Impact on School Report</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newcastle upon Tyne</td>
<td>Newcastle East</td>
<td>Interim Report No 5</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>North Tyneside</td>
<td>Shiremoor/Killingworth</td>
<td>Programme Managers Annual Report 2003</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Northampton</td>
<td>Northampton</td>
<td>Annual Evaluation Report</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Nuneaton</td>
<td>Nuneaton</td>
<td>Speech and Language Report</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restormel</td>
<td>China Clay</td>
<td>Audit of Speech and Language Services</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salford</td>
<td>Langworthy Seedley &amp; The Precinct</td>
<td>Three Year Evaluation Report</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Sandwell</td>
<td>Rowley Regis</td>
<td>Evaluation Report</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Location</td>
<td>Area or District</td>
<td>Report Title</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------</td>
<td>---------------------------</td>
<td>------------------------------------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sedgemoor</td>
<td>Bridgwater</td>
<td>Annual Evaluation Report 2002</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sedgemoor</td>
<td>Bridgwater</td>
<td>Evaluation Report New Approaches to Service Delivery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sheffield</td>
<td>Foxhill &amp; Parsons Cross</td>
<td>Sure Start Speech and Language Pilot Project Report</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Slough</td>
<td>Britwell, Northborough</td>
<td>Annual Evaluation Report 2003</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Southend on Sea</td>
<td>Milton</td>
<td>Speech and Language Therapy in Sure Start Milton</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Southwark</td>
<td>Southwark Aylesbury Plus</td>
<td>Health Visiting Service Report 2002</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stockport</td>
<td>Adswood and Bridgehall</td>
<td>Speech and Language Report</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stockport</td>
<td>Adswood and Bridgehall</td>
<td>Three year evaluation report</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teignbridge</td>
<td>Dawlish and Teignmouth</td>
<td>Annual Evaluation Report</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tower Hamlets</td>
<td>Shadwell</td>
<td>Local Evaluation Summary 2004</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tower Hamlets</td>
<td>Shadwell</td>
<td>Annual Evaluation Report 2003</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Walsall</td>
<td>Alumwell/Pleck</td>
<td>Local Programme Evaluation Summary 2094</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Walsall</td>
<td>Alumwell/Plek</td>
<td>Review of Speech and Language Support</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

National Evaluation of Sure Start
Institute for the Study of Children, Families & Social Issues
Birkbeck
<table>
<thead>
<tr>
<th>Location</th>
<th>City/Region</th>
<th>Project Report</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wansbeck</td>
<td>Bedlington, Scotland Gate Blyth Valley</td>
<td>Three Year Report</td>
<td>✔️</td>
</tr>
<tr>
<td>Westminster</td>
<td>Westminster</td>
<td>Speech and Language Therapy: Lesson Learnt from Sure Start Church Street Report</td>
<td>✔️</td>
</tr>
</tbody>
</table>
Appendix 2. NESS Support for Local Evaluation Team

National Evaluation of Sure Start
Institute for the Study of Children, Families and Social Issues
Birkbeck, University of London,
Tel: 020 7079 0823 Fax: 020 7323 4738

Professor Jacqueline Barnes, Director - Support for Local Programmes
Tel: 020 7079 0837
Mobile: 07855 308311
Email: jacqueline.barnes@bbk.ac.uk

Patrick Myers, National Co-ordinator (South) and Regional Support (South West)
Tel: 020 7079 0849
Mobile: 07813 887039
Email: p.myers@bbk.ac.uk

Jane Stuart, National Co-ordinator (North) and Regional Support (North West)
Tel: 01539 620882
Mobile: 07855 309187
Email: j.stuart@bbk.ac.uk

Shraddha Kapoor, Research Officer
Tel: 020 7079 0846
Email: s.kapoor@bbk.ac.uk

, Regional Officer - North West
Tel: 01524 593565
Mobile: 0781 3887042
Email: c.dixon4@lancaster.ac.uk

Sarah Ellison, Regional Officer - Yorkshire & Humberside
Tel: 01904 433499
Mobile: 07813 886941
Email: se11@york.ac.uk

Louise Harrington, Regional Officer - London
Tel: 020 7079 0848
Mobile: 07814 935382
Email: l.harrington@bbk.ac.uk

Paula Latham, Regional Officer - West Midlands and South West
Mobile: 07813 887039
Email: p.latham@keele.ac.uk

Nigel Lloyd, Regional Officer - East of England and South East
Tel: 020 7079 0847
Mobile: 07989 540482
Email: n.lloyd@bbk.ac.uk

Anthony Rafferty Regional Officer – East Midlands
Mobile: 07977 3358846
Email: a.rafferty@psychology.bbk.ac.uk

Trish Van der Velde, Regional Officer - North East
Mobile: 07811 360117
Email: p.van-der-velde@bbk.ac.uk