

Balanced System® Service Delivery Framework Speech and Language Therapy Service Delivery¹

Introduction

This document outlines the Service Delivery Framework to for speech and language therapy services for children and young people in the context of whole system transformation towards delivery of the Balanced System® Outcomes Framework².

The Service Delivery Framework has been developed to support joint commissioning and service delivery transformation and can be linked to more formal specifications for service commissioning and contracting as required.

The Service Delivery Framework has been developed through engagement, consultation and collaboration with parents, professionals and stakeholders. It is an outcomes-based framework that has been developed to ensure that the needs of children and young people with speech and language therapy needs are met in a whole systems approach. The Framework is structured according to the Five Strands and Three Levels of the Balanced System® (Gascoigne, 2008-2023). This approach builds on professional guidance for speech and language therapists and aligns with what is recommended by the Bercow Report (2008) and The Better Communication Research Programme (2012). The Balanced System® is recommended as a framework for speech, language and communication, in the Public Health England guidance issued in 2020³.

This version of the Service Delivery Framework addresses the speech, language and communication needs of children and young people.

Outline of the Service Delivery Framework and Balanced System® Model

The provision for children and young people outlined in this Service Delivery Framework describes the key deliverables from a Speech and Language Therapy (SALT) service perspective within the wider system of service provision for children and young people. The wider system includes colleagues and services across health, social care and education who all contribute to the overall Balanced System® outcomes for children and young people in a given geographical footprint.

The Balanced System® is an outcomes-based approach, integrating systems to support children and young people, which has been developed in line with both national policy and legislation. More detailed information can be found at www.thebalancedsystem.org

The outcomes framework is built around Five Strands of Family and Young Person Support; Enabling Environments; Workforce Development; Early Identification and Effective Intervention and for each of these Five Strands outcomes are identified at universal, targeted and specialist or individualised levels. This results in fifteen high level outcomes against which existing provision can be mapped and areas of development across the therapies and wider system can be identified.

¹ This document should be referenced as follows: Gascoigne, Marie (2023) “The Balanced System Service Delivery Framework for SLCN” Content should not be reproduced without permission of the author

² <https://www.thebalancedsystem.org/what-is-it/>

³ https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/931310/BSSLC_Guidance.pdf

High level outcome descriptors are available for each of the therapy areas. Figure,1 below provides an example of the integrated high-level outcomes for supporting children and young people with speech, language and communication needs.

Figure 1: Balanced System High Level Outcomes

THE BALANCED SYSTEM INTEGRATED SOLUTION TOOL OUTCOMES

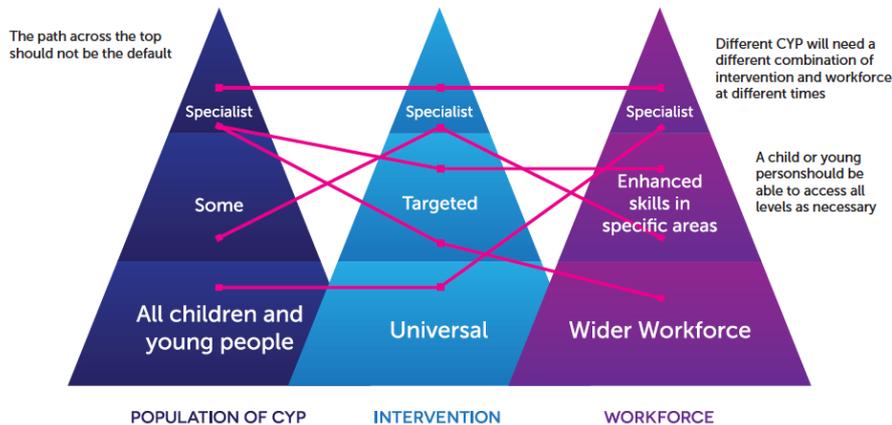
FAMILY SUPPORT	ENVIRONMENT	WORKFORCE	IDENTIFICATION	INTERVENTION
FS3. Specialist - Parents and carers of children with specialist SLCN receive specific specialist support to ensure confidence in their role as a key communication partner for their child and to increase their understanding of the specific communication challenges associated with their child's needs. Young people with SLCN are enabled to be active participants decisions about their support.	EE3. Specialist - Places where children and young people with specialist and complex SLCN spend their time for learning and leisure are communication friendly. The necessary adaptations are in place to maximise access in addition to the enhancements expected at a universal and targeted levels.	WW3. Specialist - Knowledge skills and expertise are developed in identified members of the wider workforce in order to ensure that, working with specialist support, there are staff that are confident and competent to support the delivery of specialist interventions including individual and small group work, support parents, adapt the environment and identify children who need specialist support.	ID3. Specialist - Children with specialist SLCN have their needs identified effectively and quickly. This includes multi-disciplinary assessment where appropriate.	IN3. Specialist - Children and young people needing specialist intervention for their SLCN receive appropriate and timely provision in the most functionally appropriate context for their needs. Progress measures will include activity, participation and well-being goals in addition to goals relating to their core SLC impairment.
FS2. Targeted - Parents and carers of children with identified speech, language and communication needs (SLCN) access additional specific support to ensure confidence in their role as a key communication partner and educational support for their child. Families and young people with SLCN are supported to make choices and access services.	EE2. Targeted - Places where children and young people with identified SLCN spend their time for learning and leisure are communication friendly. Appropriate additional enhancements are made that enable children and young people with identified SLCN to more easily understand and to express themselves.	WW2. Targeted - The wider workforce is supported to develop specific knowledge and skills to support children and young people with identified SLCN. Setting and school staff are confident and competent to deliver targeted interventions, support parents, adapt the environment and identify children who need additional support.	ID2. Targeted - Efficient and accessible processes are in place that support the identification of more specific SLCN. The wider workforce, setting and school staff are supported to be confident and competent to identify children and young people who may require targeted support and/or referral to specialist services for their SLCN.	IN2. Targeted - Children and young people benefiting from targeted interventions will have access to evidence based targeted interventions to develop core speech, language and communication skills delivered in the most appropriate functional context. These might include 1:1 and / or small group interventions that are typically designed by specialist practitioners and delivered by those with appropriate training.
FS1. Universal - All parents and carers are supported with information and resources to encourage their role as effective primary communicative partners for their children. Families and young people are able to make proactive choices with respect to their child's or own needs.	EE1. Universal - Places where children and young people spend their time for learning and leisure are communication friendly. Environments have appropriate enhancements that make it easier for all children and young people to understand and express themselves.	WW1. Universal - The wider workforce is supported to have a good basic understanding of speech, language and communication including supportive strategies. Setting and school staff are confident in their role as facilitators of communication. The wider workforce has access to appropriate training around speech, language and communication.	ID1. Universal - Early identification of children and young people whose speech, language and communication needs may require targeted or specialist support is as efficient and accessible as possible. Pre-identification information and advice is available in a given area, school or setting.	IN1. Universal - Homes, settings and schools are supported to develop the language and communication skills of all children and young people through language enrichment and supportive activities.

In order to result in a local system where the Balanced System® high-level outcomes can be achieved and evidenced, it is essential to see the contribution of the therapy workforce alongside that of other practitioners and the contexts of families, settings and schools where children and young people spend their time.

Children and young people should be able to access the range of assessments and/or intervention in the simplest way possible. A range of pathways should be available based on individual need at any given time; this will be based on children and young people's profile of need rather than their setting or even their diagnosis. These pathways should allow flexibility across the levels of service provision at any one time.



RELATIONSHIP BETWEEN POPULATION, INTERVENTION AND WORK FORCE



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When considering the specific role of therapists, a number of important distinctions need to be made:

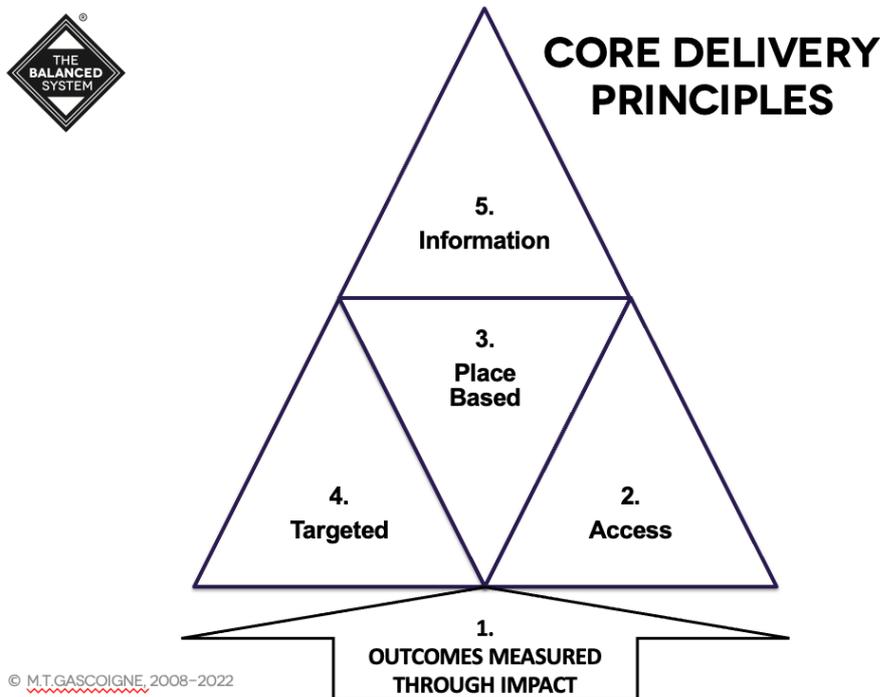
- Not all children and young people with identifiable speech, language and communication needs require direct intervention from a therapist, however, input from the appropriate range of therapists to the training and infrastructure development to allow others to support children at universal and lower-targeted levels is a fundamental part of the model.
- There is no automatic 'read across' between children and young people who might be described as having complex or specialist needs in terms of an Education, Health and Care Plan (EHCP) and the requirement for specialist level therapy support. It is often the case that targeted support is appropriate for children and young people where specific needs exist as part of a wider profile of need.
- Similarly, there will be children and young people with specific needs who may not otherwise be identified at a complex or specialist level who will require specialist interventions in order to maximise their potential.
- Children and young people may be accessing support from all three levels simultaneously.
- The focus of support from the integrated system will vary dependent on the profile of needs of the individual child or young person. For example, emphasis may vary flexibly between impairment, activity, participation and well-being depending on the individual profile.
- Functional outcomes should always be the priority measured through impact measures and not measures of input.
- In some cases where children and young people are not expected to make further progress in an area of need or where parents and educational staff have been equipped with information and strategies sufficient to ensure ongoing functional outcomes, therapeutic intervention may no longer be indicated.

Core delivery principles

In order to achieve the system wide outcomes across the Five Strands and Three Levels, there are five key elements of delivery that underpin the delivery framework.

Figure 2 below presents these graphically.

Figure 2: Balanced System Core Delivery Principles



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Measuring Impact

The delivery is underpinned by a drive to measure impact and move away from metrics for monitoring services that rely mainly on measures of activity or input. These traditional measures, such as sessions of 1:1 therapy, are not of themselves useful in evaluating the impact of the intervention. Similarly, evaluating the impact of environmental adaptations in a classroom may be more relevant to a child or young person's functional outcome than a measure of time spent by a therapist in the school.

Easy Access

The core principles for transforming service delivery have at the centre the need to make access as easy as possible for children, young people and their families, to ensure that when possible provision is in the most functionally relevant place and as a system, to ensure that there is a robust targeted offer available to complement the universal and specialist offers within the system.

Easy access requires services to consider the most appropriate place and process for children and young people and their families to access initial advice and guidance.

Easy access processes are likely to involve community-based sessions where initial therapy advice and guidance can be provided with one of the following outcomes:

1. Reassurance and signposting to generic information that will provide further detail on development and things that parents, carers and families can do to support development at home
2. Additional signposting to targeted opportunities in the community for support around specific areas of concern that are not felt to require further therapy specific assessment or intervention
3. Invitation to participate in further enquiry based investigation to determine whether more specific support may be required
4. Referral to another service based on observations

Ideally, easy access processes will replace the emphasis on traditional referrals and facilitate pro-active and pre-emptive support for families.

Where services are part of specialist multi-disciplinary pathways, the intention is not to replace these but to explore the possibilities for sharing of information and resources with families pending more specialist assessment.

Placed based provision

Placed based provision requires therapy services to aim to provide support in the most functional contexts for children and young people and their families.

Typically, this will require services to seek community based settings in the early years and to work from schools and other educational contexts for older children and young people. The rationale for this approach includes that all therapeutic support should be functional and therefore is best provided in contexts which allow real life experience to drive the application of support. There is also the rationale of ease of access and enabling access to support without placing additional burdens on families to bring children and young people to less functional clinical settings. Finally, there are significant opportunities for integrated working with colleagues across health, education and social care by supporting children and young people in context.

Robust targeted offer as part of the continuum of universal, targeted and specialist support

The Balanced System® has at its core the continuum of provision from the universal offer through a strong targeted level of support to the specialist or individualised offer for a relatively small number of children and young people for a time limited part of their overall support.

The therapy service is required to ensure that there is a robust targeted offer in their geographical area. This will include training, coaching and support for colleagues in the wider system workforce and settings as well as the direct delivery by therapists of targeted interventions, support and adaptations.

The majority of children and young people accessing therapy services will require targeted support. Some may additionally require specialist interventions but these will over and above the universal and targeted support that should be in place.

In some geographical areas, the universal and targeted offer of the wider system partners will be well described and accessed. Therefore the calibration of the targeted offer from a therapy perspective will be co-dependent on the strength of the wider system offer that should merge seamlessly with the therapeutic offer.

Information

Finally, a single information resource for families and system colleagues will enable services to be planned holistically and avoid duplication of effort confusion for families.

The requirements of an information resource include that it should provide a 'one stop shop' for families and practitioners wanting to understand what support is available in a given area for the children and young people they support.

Information should be clearly presented and accessible based on their likely needs or enquiries and therefore integrated to avoid having to access multiple sites online to find different pockets of information.

In some areas, the Local Offer platform has been extended and adapted and in other areas more bespoke solutions are in place. The outcome in either case should be for families to access information that has been curated into one place for them.

Balanced System® Service Delivery Framework in Practice

The framework enables the development of integrated therapy and support services that are outcomes based, needs led and evidence-based, to support children and young people and their families at the earliest opportunity in order to meet their speech, language and communication needs in context.

The Balanced System® encourages integration with colleagues in education and social care and the outcomes framework provides a common point of reference for practitioners from across the children and young people's services in a given geographical area.

The long-term vision is for children and young people and their families to experience a seamless, easy to navigate suite of services, regardless of need, who are considered holistically.

Opportunities for multi-disciplinary working to achieve the systems outcomes should be explored in all service planning in order to provide families with consistent and timely information and support as easily as possible. These opportunities should be significant at the universal level and in planning and delivering some of the targeted offer.

Therapy service contributions to the Service Delivery Framework

Therapists will support children and young people in the development and functional use of their speech, language and communication skills in a way which is appropriate to them and their assessed needs. In relation to the child or young person's education, therapists enhance independent access to the environment and the child or young person's ability to access daily curricular, extra-curricular and other activities and support their participation and development within them.

The Integrated Solution Tool provides both the specification of what should be provided but also the expected contribution from therapists and wider system partners. The Integrated Solution Tool is organised around the Balanced System® Five Strands and Three Levels.

The therapy specific descriptors are available to view [here](#).

SLT requirements and specification downloads to be inserted as links

Core deliverables for any services working to the Balanced System Delivery Framework

Universal level services will:

- Provide a needs-led, primary-prevention service that focuses on early identification of need, to enable the earliest opportunities to access services, and to provide relevant resources and signposting
- Assist in the enhancement of environments which children young people and their families frequent, to promote communication, physical activity and development and participation in every day activities—enabling children to fulfil their potential. Also promoting evidenced based public health messages around healthy life trajectories to support obesity prevention programmes
- Analyse and respond to potential variances in geographical need in order to tailor universal and targeted services delivered by speech and language therapists
- Improve knowledge and understanding of techniques to promote development of speech, language, communication skills of children and young people, with families and carers and the wider children and young people universal workforce. This is to be achieved through offering evidence-based training, advice, resources, and skilling up the worker or parent/carer, signposting, referring into Targeted or Specialist levels or requesting the involvement of another service.
- Work closely and develop effective partnerships with other children and young people’s universal services to enable understanding and recognition of difficulties and appropriate utilisation of services.
- To attend network events within the neighbourhood to build links, understand needs and develop a good understanding of local provision. To promote and signpost typical and relevant community sites or services of those who would benefit
- The service will work with the wider workforce (including specialist colleagues such as health visitors, GPs and school nurses) to increase awareness and ability to identify children with potential speech, language and communication needs to increase competence and confidence in implementing basic strategies to support children and young people, to further develop integration and support the ‘user journey’
- Offer a rolling programme of universal advice sessions. These sessions will deal with general concerns but will also be part of the pre-referral phase of the targeted part of the integrated service and will be open to parents/ carers and professionals. In terms of capacity these would typically be led by the speech and language therapist linked to settings within a locality, with information provided by other therapy colleagues
- Provide and maintain evidence-based universal level resources promoting typical development and advising on typical variance that are easily accessible online and make provision for those requiring the resources who are unable to access the internet.
- The Healthy Child Programme sets out the framework for ensuring that all children receive a comprehensive series of checks and reviews of their health and development. The Speech and Language Therapy Services will link to the Healthy Child Programme to promote early identification by providing training of Health Visitors and simple easy to access support where appropriate.
- The service will support early identification in schools through regular teaching and liaison with Special Educational Needs Co-ordinators (SENCOs) and effective use of allocated resource to schools.

Targeted level services will:

- Provide culturally responsive therapeutic interventions that are evidenced-based, needs-led and aiming for functional improvement / increased participation for children and young people with and without an Education, Health and Care Plan.
- To offer targeted support and training to community groups or sites where children young people and their families frequent on how to support those with additional needs.
- Operate as part of the integrated model and will play an integral part in providing early intervention functional packages of support to prevent children and young people from developing more complex difficulties and needs, where relevant.
- Offer children and young people and their families support, advice and information and on the best way to support their children and young people during and after the period of intervention.

- Deliver targeted enrichment programmes of activity delivered through local Children's Centres for children and young people aged 0-5 living in areas of identified social deprivation.
- Assess children and young people for therapy as part of the statutory SEND assessment process within 6 weeks unless statutory exceptions apply.
- Provide intervention for children and young people in mainstream education settings with therapeutic input identified on their Statement of SEND or EHC Plan within 6 weeks of the SEND Team issuing the final Statement or Plan.
- Provide a targeted programme of support for children and young people requiring SEND Support to meet their needs, making use of trans-disciplinary working to maximise impact.
- Provide defence of therapeutic provision on Statements or Plans, within professional and ethical guidelines, in SEND tribunals, which could include detailed assessment, report writing and attendance at the tribunal as required by the SEND Team
- Offer a range of evidence based therapeutic interventions that are based on achievement of functional goals relating to identified needs of children and young people. The team will have a professional mix, which is balanced with an appropriate representation of skills.
- Provide resource packs, 'drop ins', workshops or groups in accessible locations to enable and encourage flexible access to the service for new referrals and follow ups of advice and support.
- Respond to local need and have flexibility in what groups are run depending on what needs are presenting.

Specialist level services will:

- Ensure co-ordinated inter-disciplinary or trans-disciplinary plans of intervention, working jointly with clinicians, education, social care and other services as appropriate. Therapists undertaking a lead coordinator role should have appropriate training for this. In recognition of the change required transition to the model has been addressed below.
- Provide assessment, diagnosis, advice, intervention and treatment for children and young people who present with any speech, language, communication difficulty of a severe or complex nature where their needs cannot be fully met within the Targeted based provision although it is likely that these children and young people will also access targeted and universal provision.
- Provide assessment, diagnosis, intervention and treatment for children and young people with a Statement or EHC Plan where the need requires some input at the specialist level of provision.
- Undertake intervention according to the presenting difficulties and in accordance with the needs and outcomes identified by the children, young people and their families and in the children and young people's Statement or Plan if the children and young person has a Statement or Plans