

Talking Together: A Partnership in Language and Learning

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Language and Learning in Schools

School has been called a verbal game, and those who know the rules and play the game succeed'
(Bashir 1989)

The development of a partnership between Health and Education

Step 1- Memorandum of Understanding to:

- foster a collaborative effort between the NSW Department of Education and Training (DET) and NSW Health in relation to the development of a joint service to school aged children with difficulties in learning, language and communication
- improve learning outcomes for school aged students (K-6),
- provide clear guidance to staff of both agencies about working together in a partnership to deliver seamless and coordinated services to school aged students.

Talking Together: Partnerships in Language and Learning

Step 2 – development of a trial project in two regions

The project will provide a framework for:

- a shared professional learning focus for DET personnel and speech pathologists
- a collaborative team approach between teachers, speech pathologists and families
- early identification of students with learning, language and communication difficulties through the use of curriculum based assessment and school and family information
- improved teacher knowledge and understanding about language development
- embedding language and communication goals and appropriate teaching and learning strategies for students within the class program

Why is this important?

Three types of language usage are identified in our syllabuses

- Interactional language
 - The develop and maintain social relationships
 - Build on and clarify ideas
- Transactional language used to transfer information or exchange services
- Poetic and creative language used to engage and entertain

Prevalence of language difficulties

- Exact prevalence data is difficult to determine
- 23-50% of preschoolers presented with language and speech problems (Best 1993)
- Prevalence increases with poverty or low social economic status
- Students with language-learning difficulties constitute 40-60% of students with LD (Mercer 1991)
- A Sydney study included children from disadvantaged area schools and NESB and found all grades (K-6) 32% of students had some form of communication impairment

Language and literacy

Number of researchers have documented the link between early literacy acquisition and language development

- Academic difficulties have been due to children not having access to base skills to *process and manipulate language*
- Teachers assume students have the skills to *process and manipulate language*
- Without this ability students are unable to access information or build on experiences

Language and school failure

- Cooper, Petit and Clibbens found that initial difficulties at school start the pattern of school failure
- Research is showing that possibly as many as 50-70 % of students with language impairment also have emotional and behavioural problems (co-occurrence)

How did we get to here?

An Historical Perspective

- Pilot 1993 with DET and Dept of Defence in Liverpool Health Service, impetus for pilot
 - long waiting lists
 - Mobility of Dept. of Defence families
- Expansion to other parts of Liverpool in 1994 to help address other issues
 - Appropriate delivery of services to children with language and learning difficulties
 - Transport
 - Joint management of children with difficulties
 - Training of teachers

Historical Perspective

- Growth at Liverpool from 1 – 21 projects / year
- Other project areas:
 - Illawarra (began in 2000)
 - Hunter (began in 2004)
 - Western Sydney (began in 2004)
 - discussions in Waterloo
- Successful in areas of high need
- Complement existing clinic based services

Typical Demographic

Communities of need who benefit:

- High population growth e.g. Liverpool 57.1% (1991 – 2001)
- High culturally and linguistically diverse population e.g. Liverpool 38.1% born overseas (NSW 17.8%), ATSI (1.9% NSW)
- High mobility e.g. Liverpool Dept of Defence, Illawarra low SES
- Low SES in parts
- Poor school retention

Talking Together: Partnerships in Language and Learning

- Negotiations between health and DET
- MOU
- Trial
- Secondment
- Project framework

The Model

- Objective

AHS and DET work in partnership with school communities to achieve long term, sustainable change for children with communication impairments and/or learning difficulties.

Consistent with the recommendations of the *“Final Report of the Inquiry into Early Intervention for Children with Learning Difficulties Report”*
Parliamentary Paper No. 116 Sept 2003

Components of the *Talking Together* Model

Schools will be supported by regions to negotiate with the local Area Health service to purchase speech pathology time for the school. The time may be used to provide professional learning activities that are planned with the Learning Support Team and the speech pathologist working within the school.

It is important that the model is flexible to support the range of needs in any school.

Components of the *Talking Together* Model

The school may plan to:

- provide professional learning activities around language and communication which may take the form of :
 - whole school staff development,
 - collaborative planning sessions between teachers and speech pathologists,
 - demonstration lessons or team teaching
 - one on one consultation with teachers

Components of the *Talking Together* Model

The school may plan to:

- provide time for teachers and speech pathologists to work together to develop and implement language assessments and teaching and learning activities that reflect English K-6 Talking and Listening outcomes
- identify and plan support to students with language and communication difficulties.
- involve the speech pathologist in *some* individual assessments for those students who appear to have severe language and communication difficulties
- train parents, volunteers and teachers' aides in some areas of language and communication development

School Projects in Primary Health Care

Model of PHC

Example: Speech Pathology PHC

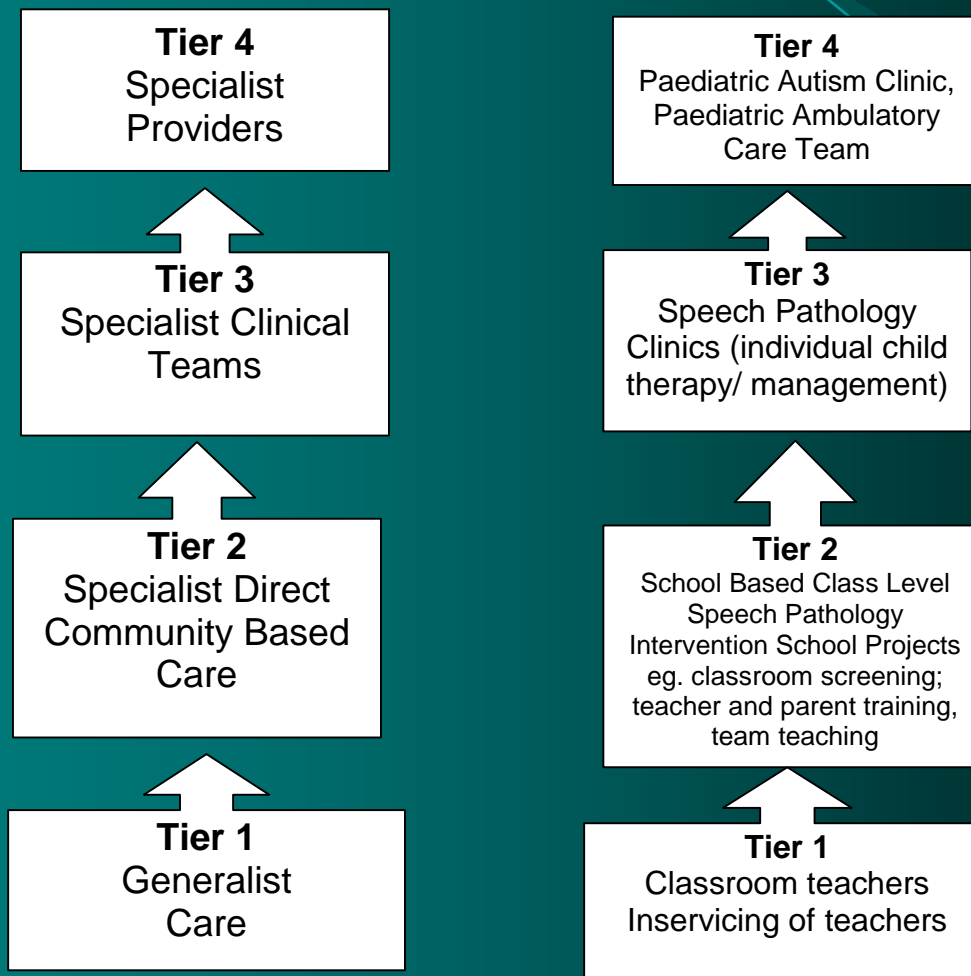


Figure 1¹ The development of an Integrated PHC System in SWS Briefing Note. SWSAHS, 2002.

Speech Pathology and PHC

- All tiers have relevancy for children with communication difficulties
 - Currently many Speech pathology clinics do not have structure to support implementation of tier 2 services.
 - The School Projects play an important role in fulfilling tier 2 and supporting tier 1.
 - Specific speech pathology roles still exist for tier 3 and 4, but the pressure on these levels could be reduced by the School Projects.

Benefits of the model

- Early identification, assessment and management of students with communication impairments
- Promotion of a holistic team approach
- Minimisation of speech pathology waiting times
- Teacher education and training in communication
- Speech pathologists develop understandings about school curriculum
- Parent training and support
- Promotion of understanding of communication impairments and their interaction with academic performance
- Collaboration, whole-of-government approach

Appendix: Parts of the Project

Teacher Inservices

- Develop teachers' skills in the identification and management of children's communication, particularly impairments.
- Schools may request topics such as: comprehension, using visual systems to enhance communication, phonological awareness, articulation and language.

Classroom Visits

- Teaching teachers to appropriately detect children with communication impairments and begin basic classroom management
- Class level screening
- Communication Profile screening tool
- Classroom management techniques

Teacher Consults

- Joint problem solving
- Curriculum focussed programming
- Individual or whole class focus
- Adjustments to class programs to better accommodate students needs
- Aides consulted and trained

Team Teaching

- Planning using curriculum outcomes, current class topics and text types
- One-off sessions or a block of sessions
- Includes teacher modelling and team teaching
- Shared responsibility for planning and conducting activities
- May involve the classroom teacher, Speech Pathologist, Support Teacher Learning Assistance (STLA) and/or ESL teachers

Individual Assessments & Reviews

- Speech and language assessments and reviews for programming, integration and evaluation of children's outcomes

Speaking Together Program (ST)

Training of ST volunteers (parents, support workers, peers, aides)

- Weekly implementation of treatment programs
- Modelling, supervision, support and program reviews during weekly visits.

Learning Support Teams (LST)

- Speech Pathologist consults and discusses management and referrals at LST meeting
- LST function:
 - prevent learning failure
 - provide ongoing support, training and development for staff
 - case conferencing

Evaluation

- Parent & teacher questionnaires
- Ongoing evaluation of children on ST
- Pre- & post- testing of targeted children
- Team teaching evaluations
- Post-project survey of schools' aims
- Evaluation report for each school written collaboratively at end of year