

Submission for the Select Committee into Child Development Services

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My past role as Principal of the North-East Metropolitan Language Development Centre for more than 25 years and my current role as an oral language consultant to schools, have provided me with a unique perspective about oral language development services in Western Australia. I am particularly aware of the effect of oral language difficulties and how they impact on children's lives, both socially and academically. As such, I would like to contribute to the inquiry into Child Development Services, focussing on speech pathology.

I am happy to discuss this submission with the Committee and to provide further assistance if required.

To participate effectively in our society, educators all agree that the ability to read is critical. Schools are continually under the spotlight for failing to improve literacy levels. This focus is particularly intense following the publication of the NAPLAN results each year. Western Australian Schools are also required to complete the Australian Early Developmental Census, often with similarly results

Major research findings show that:

- Literacy outcomes in children are directly linked to future academic and social success;
- A strong link exists between oral language development and reading and writing;
- Between 20-30% of pre-primary children in Australian schools have language difficulties (AEDC data);
- Children from low SES backgrounds display gaps in the development of language processing, including vocabulary, phonological awareness and syntax;
- Between 50-70% of children with emotional and behavioural problems have clinically significant language deficits;
- 50% children with oral language difficulties leave school early;
- 60% of the 7,000 young children who pass through young offender institutions have communication difficulties (Bryan, 2004);
- Children with oral language difficulties are **twice as likely** to have a **mental illness** by the age of 19; and
- These findings were acknowledged in Recommendation 2 in the report of the National Inquiry into Reading which stated "... *that teachers provide an integrated approach to reading that supports the development of **oral language, vocabulary, grammar, reading fluency, comprehension** ...*'.

Despite these findings there continues to be no systematic approach to the provision of speech pathology services/intervention in the Western Australian Public Health Department. In the current climate, the vast majority of private metropolitan speech pathology clinics in Western Australia have a 4-12 month waiting period for private clients to

access speech pathology services for 0-18 year olds. The Hon. Donna Faragher states that “... *there are currently 5,154 children waiting to see a Speech Pathologist.*” While this figure is a major concern it is likely to be an underestimation because the waiting list does not include:

- Children whose parents do not access any child development services;
- Children whose parents can afford private speech pathology services and do not place their children on the wait-list;
- Children who do not attend the initial speech pathology appointment and are consequently not included on the wait list;
- School aged children who continue to require ongoing and intensive support for speech and language, for diagnoses including Childhood Apraxia of Speech and Developmental Language Disorder, who no longer qualify for Child Development Services due to the chronic nature of their disorder/s and their age;
- School aged children who are not identified until they reach full-time school (Pre-Primary). Most of them are not referred because the WA Health Department does not prioritise children aged 7+ years for service; and
- School aged children whose oral language difficulties are not identified until Year 3 or 4, when they experience what is referred to the “4th Grade Slump” in reading. Many children with oral language difficulties remain unidentified, especially those with comprehension deficits, and “fly under the radar” in early childhood classrooms.

There continues to be no systematic approach to the teaching of oral language in schools in W.A.

The Health Department appears not to be responding to the evidence.

- Although there is strong evidence that early intervention provides the best outcomes, many children have not been identified as requiring access to speech pathology services in the WA Health Department SP until school age. This is because they have not attended Child Development Services prior to school entry and have consequently not been identified and referred for early intervention. *See Recommendation 1 (Appendix)*
- Research indicates that there is a strong relationship between oral language and literacy development. Speech Pathologists understand the relationship between oral language and literacy development and of the processes underlying reading and spelling. This understanding includes knowledge of the different components of language and how these relate to literacy. The specialised knowledge of Speech Pathologists complements the evidence-based literacy practices in classrooms. *See Recommendation 2 (Appendix)*

The Western Australian Education Department and training institutions appear not to be responding to this evidence.

- Teachers are graduating from our universities without the skills to explicitly teach oral language. *See Recommendation 5 (Appendix)*
- Although experienced teachers identify concerns about children’s progress, their lack of training makes it difficult to identify the cause. As a result, schools adopt a ‘push down’ approach – “If we start to teach reading and writing early enough, with a lot of practice they’ll be fine by NAPLAN.” *See Recommendation 5 (Appendix)*
- There is no mandated standardised oral language assessment in schools in stark contrast to reading, writing and numeracy. Teachers find that the On-entry

assessment currently used in Pre-Primary is time consuming to administer and provides little useful data. Additionally, no training or guidance is provided to school administrators or teachers on using this data to identify students requiring external services. See *Recommendation 4 (Appendix)*

- Standardised assessments for reading, writing and numeracy do not commence until Year 3 (Naplan). See *Recommendation 4 (Appendix)*
- This is despite the most recent National Literacy Review Recommendation 9 that states that ‘... the teaching of literacy throughout schooling be informed by **comprehensive, diagnostic and developmentally appropriate assessments** of every child, mapped on common scales.’ See *Recommendation 4 (Appendix)*
- Many schools commonly use the Brightpath Writing Assessment from Kindergarten onwards, whereas few use the comparative Brightpath Oral Narrative Assessment. This assessment provides quality data for early years teachers and should be mandated in Kindergarten and Pre-primary. Both are licensed to Schools Curriculum Authority. Speech Pathologists play a pivotal role in supporting teachers to interpret writing and oral narrative assessment data to identify students at risk, and plan appropriate instruction and intervention. See *Recommendation 2, 3 & 4 (Appendix)*
- Professionals trained to improve oral language skills are Speech Pathologists. They are also strongly grounded in Evidence-Based Practice. Teachers who are employed in educational facilities such as Language Development Centres and work collaboratively alongside Speech Pathologists are also very competent in this area and achieve outstanding results with children with Developmental Language Disorders. See *Recommendation 3 (Appendix)*
- In Western Australia, all public schools are able to access an Outreach Service that is attached to each of the education regions. The Outreach Service employs ‘experts’ to support the schools to improve language outcomes in the early years. Although this is a worthy addition to support schools, there are a limited number of staff, most of whom are Speech Pathologists. There are approximately 10 full time staff to support all of the Western Australian schools. It is an ‘opt in’ service so there are large number of schools whose students require the service who do not access it. The Outreach Services are also mandated to prioritise students in K-2. Therefore, this service does not have the capacity to support middle to upper primary, or secondary age students who remain vulnerabla and without government funded support. See *Recommendation 8 (Appendix)*
- Speech Pathologists have specialist knowledge of phonemic awareness skills, vocabulary development, sentence structures, the ways texts are structured and listening comprehension. They understand the ways that these components contribute to the development of reading and writing skills over the course of development. Information from Speech Pathologists can be shared with school staff, through the provision of professional learning opportunities, to improve and support curriculum delivery across the school. See *Recommendation 2 (Appendix)*
- A small number of schools choose to employ Speech Pathologists. However, due to the Education Department employment policy, they can only be employed on a 12-month fixed term contract. This results in difficulty attracting experienced Speech Pathologists (who are usually looking for longer contracts). It also limits their ability to be in a position to build collaborative relationships with school staff in order to collaborate and positively influence their practice. See *Recommendation 3 (Appendix)*
- Schools employing Speech Pathologists are using student centred funding directed at employing teachers and education assistants. It could be argued that the funding should come from the Health Department. See *Recommendation 2 (Appendix)*

PTO for Appendix with Recommendations

Recommendations

Recommendation 1:

The Western Australian Health Department improves services for children with language difficulties. This would include more Speech Pathologists and provided increased services for children aged 7-18.

Recommendation 2:

Western Australian Health Department and the Western Australian Department of Education provide a collaborative service where Speech Pathologists employed by the Health Department assess and provide services in the schools, thus reducing DNAs (Do Not Attend) and providing support for vulnerable families.

Recommendation 3:

The Western Australian Department of Education employs Speech Pathologists in all schools.

Note: In Queensland the Department of Education employs Speech Pathologists who support a whole school approach and provide services at Tier 1, 2 and 3 levels – with Tier 1 being in the whole class, Tier 2 small group with extra dosage and Tier 3 provides individual intervention. They work collaboratively in all state schools, primary, secondary and special. In Victoria, the Department of Education employs Speech Pathologists in primary schools. However, their main role is to provide assessments for targeted funding. In ACT they have begun to employ Speech Pathologists as a result of NDIS commencement. There are only a small number. There are 2 Speech Pathologists in Northern Territory.

One low socio-economic school in Victoria (Mahogany Rise, Frankston) that has adopted this approach since 2013 has shown significant improvements in NAPLAN.

Recommendation 4:

The Western Australian Department of Education mandates standardised oral language assessments at school entry, and universal screening of oral language to inform practice across all 3 Tiers of intervention – Tier 1, Tier 2, and Tier 3.

Recommendation 5:

Universities that provide teacher training include evidence-based oral language teaching in their training, in collaboration with Speech Pathology faculty from Curtin University and Edith Cowan University. Curtin & ECU should also offer opportunities for student teachers to enrol in double degrees (education and speech pathology).

Recommendation 6:

All current teachers need to be trained to have a better understanding of oral language to enable them to explicitly teach it, commencing with all early childhood teachers.

Recommendation 7:

All Language Development Centres are Centres of Excellence and collaborate with schools to provide training opportunities for mainstream teachers who return to their schools as Oral Language Leaders.

Recommendation 8:

The Outreach Service at all Language Development Centres is expanded to provide whole school support for all Department of Education primary and secondary schools.