

# Evaluation of the Early Language Development Programme



## Summary of the Evaluation Findings

Early Language Development Programme ([ELDP](#)) was designed to improve early speech, language and communication development amongst 0-5s (primarily focusing on 0-2 year olds). The programme was commissioned and funded by the Department for Education (DfE), and delivered by a consortium led by I CAN. The ELDP was designed to increase practitioner capability, by adopting a cascade approach to training and awareness-raising. The programme built on learning from previous early years speech, language and communication development programmes, including Every Child a Talker (ECaT) and Early Talk 0-3.

I CAN developed and delivered a series of two-day training sessions to lead practitioners in localities across England over a fifteen month period (including the pilot phase of the programme). The training included time for participants to familiarise themselves with the ELDP principles and programme materials, with the second day of training focused on planning the local cascade. Following receipt of the training and supporting materials, lead practitioners worked in pairs to cascade the ELDP learning and principles to local practitioners or 'cascadees', who typically work with young children in early years settings. Through increased practitioner capability, the programme was also designed to support parent and carer knowledge and skills, with the intention of positively impacting on young children's speech, language and communication development.

The programme was available across England, with specific targeting towards the most deprived communities. All lead and local practitioners voluntarily signed up to the programme, and in some areas strategic support was provided by the local authority. Optional Enhanced ELDP training was provided by Elklan, to further develop and build on practitioner knowledge, skills and confidence. Originally funded from 2011-2014, emerging evidence of positive impacts on lead and local practitioners, parents/carers and children led to the programme being funded for an additional year from April 2014 to March 2015.

## Evaluation aims and methodology

The evaluation has been undertaken as a collaborative endeavour between consortium partners, with formative learning shared with the DfE and I CAN to inform programme development. The evaluation of the ELDP was extended in February 2013 (delivered by OPM, I CAN and the University of Sheffield), to capture additional insights regarding the impact of the programme on local practitioner behaviour.

This report should be read in conjunction with the extended evaluation report

The evaluation of the ELDP captures the impacts arising from the programme; learning regarding the processes involved in delivering and cascading the programme; and the economic costs of delivering the programme. Qualitative and quantitative methods were employed, including surveys, interviews, observations, cost data analysis and the development of case studies.

## Key findings – impacts emerging from the programme

The evaluation findings reveal that the ELDP has led to positive impacts for lead and local practitioners, parents/carers and children. The ELDP has reached a greater number of settings and families than originally intended, and those taking part report overwhelmingly positive experiences. The majority of the programme KPIs were exceeded, as outlined in Table 1, below.

**Table 1: Achievement of the ELDP Key Performance Indicators (KPIs)**

KPIs	Achievements
<b>KPI 1:</b> By March 2013, 970 lead practitioners will be trained in how to cascade training in early language development to other practitioners	KPI achieved: 998 lead practitioners attended ELDP training events, of which 150 were in the pilot phase.
<b>KPI 2:</b> By March 2013, 95% of lead practitioners reached through regional events report having the knowledge to cascade early language principles to colleagues	KPI not achieved: 89% of lead practitioner survey respondents reported they felt the training had given them the knowledge to cascade early language principles.
<b>KPI 3:</b> By March 2014, 12,028 (+/- 20%) local practitioners will be trained by lead practitioners in supporting early language development	KPI achieved: By the end of March 2014, 12,149 local practitioners had received cascaded training. By the end of September 2014, 13,502 local practitioners had received cascaded training.
<b>KPI 4:</b> By October 2014, 85% of practitioners trained report increased awareness and knowledge to support children's early language development, and to identify those with language delays	KPI achieved: 95% of local practitioner survey respondents reported that the training had increased their awareness and knowledge to support children's early language development. 93% of local practitioner survey respondents reported that the training had increased their ability to identify those with language delay. The extended evaluation reveals that improvements in knowledge and awareness appear to have been sustained.
<b>KPI 5:</b> By October 2014, 75% of sampled lead practitioners report changes to local early language development practice	KPI achieved: 88% of lead practitioner survey respondents reported that their involvement in the ELDP would support/lead to closer collaboration between theirs and other early years centres to share good practice. 92% of lead practitioner survey respondents reported that their involvement in the ELDP would support/lead to better support for

KPIs	Achievements
	young children's speech, language and communication development in their area.
<b>KPI 6:</b> By October 2014, 96,731 (+/- 20%) parents or family members are supported to help their child's speech, language and communication development	KPI achieved: 115,584 parents were estimated to have been reached by the ELDP by 1 <sup>st</sup> October 2014 (based on 344 local 'hubs' of trained practitioners being formed, each with an average reach of 336 parents/carers, based on data captured by I CAN).
<b>KPI 7:</b> By October 2014, 80% parents or family members sampled report increased awareness and knowledge in supporting early speech, language and communication	KPI achieved: In the 2013-14 roll-out survey, 87% of parent and carer respondents reported that their knowledge about supporting children to learn to talk had increased compared to a year ago. This compares to 84% of respondents to the 2013-14 roll-out survey, and 38% of respondents to the baseline survey.
<b>KPI 8:</b> By March 2014, 125 experienced practitioners will have been trained at level 4 and will have cascaded the training to 1,500 local practitioners. By July 2014, a further 100 practitioners will be trained and cascaded the training to 1,200 others.	KPI not achieved: By March 2014, 90 lead practitioners had started attending the Enhanced ELDP training.  By September 2014, 111 lead practitioners had received the training, which had been cascaded to 654 others.

At local and lead practitioner levels, there are excellent examples of impacts in terms of:

- Improved knowledge, awareness and confidence
- Greater use of practices that support speech, language and communication development
- Examples of practitioners making changes to the environment within the early years setting, to better support children's speech and language development
- Uptake of further professional development opportunities, including accredited courses
- The fostering of effective links across local settings and with other practitioners.

Amongst parents and carers, there are reports of:

- Increased confidence in supporting their child's speech, language and communication
- Improved confidence to use language in play
- Greater awareness of age appropriate language abilities
- Wider understanding of ways to aid their child's language development
- A means of introducing other initiatives and key messages regarding child development.

In conjunction with the increased knowledge and awareness of local practitioners, these improvements in parent and carer knowledge and confidence were felt to be impacting on children, by fostering an 'enriched' environment for early language development:

*“Since I have been shortening my sentences to match my child’s, I have found he is actually starting to communicate a lot more.” (Parent)*

*“I wouldn’t have known that reading to your child helps them to talk, and that it is hearing words constantly which helps. Instead of saying, ‘what’s this, what’s this?’ now I say words related to what he is saying, to extend his language.” (Parent)*

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It is important to note that early intervention programmes aimed at improving outcomes for children will always be challenging to evidence. The ELDP has not operated in isolation from external factors and contextual issues, some of which will have played a part in children’s speech, language and communication development. There is no comparison or control group against which the impact of the ELDP can be assessed (nor would it have been ethical or practical to set one up), and consequently it is not possible to know what might have happened in the absence of the programme. However, the evaluation findings do indicate that positive impacts have emerged as a result of the programme, and that practitioners are adopting strategies to sustain the impacts locally.

## **Key findings - process learning**

The ELDP cascade approach has worked well in most localities, and the materials and training were praised by programme participants. Effective working relationships have been sustained at both consortium level and between local settings. Where local authorities provided strategic support, this helped to recruit participants and ensure the ELDP remained a local priority.

Where lead practitioners had previous knowledge regarding speech, language and communication development and how to develop/train others, the cascade approach generally worked well. The involvement of speech and language therapists in some areas further helped to upskill local practitioners. Where the ELDP training has been cascaded to all staff within a setting, it is reported to have been particularly effective.

In terms of challenges, some lead practitioners did not feel fully equipped to deliver the cascaded training after the two-day I CAN training, putting in additional preparatory work before feeling able to cascade. In some areas the programme became de-prioritised in the context of competing demands, re-tendering processes and financial pressures.

Uptake of the Enhanced training was lower than anticipated, although we do not have evidence to indicate the reasons for this (anecdotally, the time commitment was cited as a barrier for some practitioners). However, lead practitioners who took part in the Enhanced training rated it highly, and lead and local practitioners reported positive impacts emerging as a result of the programme.