



Nottingham Trent
University

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Summary of CoNavigator Meeting

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Introduction

The purpose of the most recent CoNavigator Meeting was to pick up key ideas raised by the initial meeting of commissioners, but to consult more widely with other stakeholders, such as the providers of those services and parent champions. Below is a summary of 10 key ideas and narratives identified by participants as they engaged in mapping the nature of future provision. In this summary I have highlighted the areas seen as needing further discussion or decision-making.

1. Governance

One group of participants clearly identified that there was a need for a governance structure to 'wrap around' any support for SLCN going forward. There is a need to consider what that governance structure needs to look like and who should sit on it.

2. Training

There was a fair degree of consensus around the need for training, and the need for that training to target a wider range of early years professionals and partners than is currently catered for. As one table put it "speech and language need's to be everybody's business". The scale of the need is such that no one service can deliver it, and so there needs to be a coordinated response and shared understanding across all the services and providers and those with any contact with children and families, so that there is a coordinated and coherent set of messages given to parents, and shared understanding of process and signposting.

In that spirit, there was a need for a basic level of 'core competence' (that needs to be agreed) for any member of the early years workforce to have, and so training needs to be put in place to ensure that this base level of understanding is achieved. There was also a need for enhanced levels of training, so that there are key people within sites and organisations that can really make sure that the training that's delivered universally is being put into place and keep tabs on who has accessed what and filling any gaps. There was speculation that the family hubs might be a mechanism to do that. But there will also be a need for designated training leads, and for training to be shared across organisations or services.

There was mention of a survey that was undertaken that indicated a need for bilingual training / services, and also culture and behaviour change within organisations so that there was more of a buy in into messaging around the importance of speech and language.

3. Use of Speech and Language Therapists

There was a view that use of speech and language therapists needed to be reviewed and optimised, and that there was a role for them to "support what's happening in the integrated system at universal and targeted levels...So that you can share the latest evidence base and ensure that the quality of the offer is really what it needs to be." One way to do that is delivering services at place with an integrated team so that you can maximise opportunities

for ad hoc conversations with colleagues support their knowledge and scale around supporting the children that they're supporting.

4. Addressing Parental Needs

Several tables mentioned the need for the new service to involve parents and really listen to what they say and having some consideration of what's working for our local parents and developing services to meet the needs of local parents. There was need for a mechanism to enable the service to listen to what parents want and need and how they access services.

5. Communication and Information Sharing

Communication was a common theme across tables and is also reflected in the need for core training. Additionally, one table mentioned the need for some level of understanding of shared outcomes across the system, so that all professionals working with a particular child would know and understand what the key outcomes were for that child and how to work towards that collectively. So, there was a need for effective data sharing across services about children. Linked to that were questions around who would take responsibility for managing and using that data, and monitoring how it was being used.

6. City and County Differences

There was acknowledgement that with the funding situation and with SSBC coming to an end there were going to be differences opening up between the city and the county, and this will need to be managed or minimised somehow within the new system. Also, some things are statutory requirements in the county but not in the city, and this is something that the new system will need to address. There is a need for training and assessment in the city and in the county to align.

7. Funding

Funding was a big area of concern. There was going to be a need to raise funds to keep some services going, but the future of commissioning was uncertain because of the funding situation, and this was leading to bigger disparities between the City and the County in terms of provision. One table noted that there seems to be a lot of funding for specialised services and not necessarily much funding for universal ones and they felt like that could be “flipped on its head a little bit because we know that obviously if they access that universal sooner, it's not going to get up to specialist.”

8. Assessment

There was mention of the introduction of an assessment tool in the City at age 2, similar to what is done in the county, but the concern was that there would be issues in terms of what happens next as a consequence of this assessment. The nature of what assessments are

used in what parts of the service was also discussed and also impacts on the issue of how best to engage in and evidence early identification of needs.

9. Early Identification

This was raised as an issue, because some services do not get as many referrals as they should. There is a failure to identify children showing signs of risk as a result of lack of workforce training (discussed earlier) and a need have tools that support early identification.

10. Universal Provision

In the context of a service that is at the mercy of funding restrictions, the need for universal programmes of support was highlighted. So schools, toddler groups and similar settings were seen as prime opportunities for early intervention if the workforce were better trained to support families, deliver speech and language activities and identify needs. The idea was that these sites can educate families on approaches and strategies and support them to monitor children's progress and their own engagement with strategies for supporting their children's development. The consistency of contact and repetition of message was seen as key here.

CoNavigator Maps

We have included an overview of the conversations that took place, and the CoNavigator maps that were created by participants on the day.

[Map One](#)

[Map Two](#)

[Map Three](#)

[Red and Green Flags](#)

[City and Council Provision](#)

CoNavigator Maps

At the start of the process, all participants wrote down their ideas (in its broadest sense, allowing people to reflect on a range of points of interest relating to SLT in Nottingham[shire]) and shared these with the group. There were also pre-seeded tiles with conversations starters agreed ahead of the session for the groups to consider. These tiles were then discussed and grouped into similar themes, and participants were invited to reflect on whether they had any stake or influence relating to specific tiles using coloured dots – the colour of the dots isn't particularly significant but does indicate how many participants thought this important or where they had influence. After this, individual participants were then asked to elevate what they believed to be the most important tile (elevated blue tiles) and link different elevated tiles and potentially other flat tiles; these elevated blue tiles is where the Summary in this document has been taken from, and indicates where individual participants felt priority needed to be whilst linking this to other ideas. Where relevant, participants also listed red and green flags (challenges and enablers for change) based on these links.

Key:

Flat Light Blue Tiles: These were 'seeded', pre-determined points of conversation that were given to groups to integrate (if relevant) into their discussions.

Flat Blue Tiles: Ideas generated by participants at the start of the session.

Coloured dots: The colour of the dots is not relevant, but the amount of coloured dots on the tiles indicates how many participants in the group felt this was an important issue that they have a stake in or influence around.

Elevated Blue Tiles: The group agreed that elevated blue tiles were the most significant or potentially central points in the conversations, highlighting key junctures in discussions or where different conversations met.

Grey links: These link different relevant tiles (some elevated, some flat) to join up conversations

Red text: Where there is red text on the documents, this indicates a barrier to action

Green text: Where there is green text on the documents, this indicates an enabler or helping point for action. There is a full list of 'red and green flags' included above that summarises where there are key operational challenges to consider, as well as helpful considerations also.

City and Council Provision

This document is separated into Universal, Targeted, and Specialist provision offered by City and County Council. This conversation acknowledged the broad range of support and services available to individuals across Nottingham and Nottinghamshire, highlighting both specific provision offered as well as general support. Boxes marked in red are initiatives or projects that are either confirmed or expected to be decommissioned. Boxes marked in Pink (in Specialist provision) were noted as being relevant but outside of SLT commissioning, and instead required broader multiagency agency approaches and strategies; these were typically places where young people may need SLT support but potentially beyond the current sight of SLT.

Conversations relating to Universal offerings acknowledged that some information is shared and accessed via similar places, such as social media, Health Visiting Teams, Family Hubs, and Midwives. These have been broadly grouped together in the middle of the map using a lighter blue to acknowledge both councils utilise these. This was also the case for some Targeted support although conversation acknowledged that there was some difference in how City and Council worked with partners.

Conversations relating to Specialist offering tended to acknowledge where there similarities in how individuals could access their support, and these tended to be the same across City and Council although did acknowledge that there were operational differences between similar services (Educational Psychologists, for example, are available across both councils, but have different experiences). For this reason, there has been no distinction between councils made.