

Working with families

Monitoring and supporting early
language development

In this I am aiming to

- Explore how materials such as the Early Support Monitoring protocol for Deaf Babies and children are supporting partnership working with families and others and what families have to say about them
- Consider how they influence family attitude to their child's hearing loss, their confidence in their own parenting skills and in their child's spoken language development

But remember

- Children do not achieve optimally because of new born hearing screening – its what happens next that matters
- Many profoundly deaf children identified late, who don't get implants, who didn't have digital aids achieved age appropriate academic success, reading levels etc
- We're expecting more children to achieve at these levels through newborn hearing screening but even those identified later can do this too

Early Support ethos is about

- Trusting families
- Empowering families
- Working together with families
- An absolute belief in families' ability to provide effectively for their child's development
- Practitioners (teachers of the deaf, audiologists and speech and language therapists recognising that family led, family focussed services will provide improved outcomes
- Protocols and practices that facilitate this

All Early Support Materials were designed

- In consultation with families
- To support families
- A by-product is that they support practitioners in their work
- So what did families tell us they needed

What did families tell us that they needed?

- Information – about options, about their baby’s difficulties, about how their child is doing and the sort of things that will help him/her to move on
- Services- resources, access to professionals and to expertise
- Confidence – in themselves, their child and the professionals
- *They do not want gatekeepers* (they want gateways – facilitators, ‘keys’)



Example: The Monitoring Protocol for Deaf Babies and Children

- What is it for?
- What does it achieve?

Brief: To design a monitoring procedure which would

- *Support parents understanding* of their child's development
- *Enable* families to share what they know about their child
- Support *families in taking the decisions* that they need to
- Provide support to practitioners in their assessment of need and provision of advice
- Standard materials for use by families, wherever the child and family live and whoever is supporting them

What did families tell us about assessment

- They felt let in to it rather than part of it
- It was rarely holistic – practitioners each gave them part of the jigsaw but expected them to assemble it
- It often reinforced ‘can’t do’ rather than can do
- The language and explanations made them feel less than ‘up for the job’
- Was done to children and shared with families; they sometimes wanted to disagree but ‘it was a done thing’ by the time they were let in. They were expected to confirm rather than participate

Practitioner consultations

Recognition that

- Families knew their children best but did not always understand the significance of what their children were doing
- Practitioners needed families' evidence to help evaluate impact of programmes/ support evaluation of hearing aid fitting etc.
- Major challenge was to enable parents to share their evidence and understand their deaf child's development and what they can do to help (training issues for parents and practitioners)



Families: What did they tell us they wanted to know?

- Where is my child?
- Are the hearing aids making a difference?
- What will he/ she do next?
- How can I help?
- Is everything else alright?



The Monitoring Protocol for Deaf Babies and Children

Its prime purpose is to provide families with

- a sense of growth and development
- confidence in their children's ability to learn
- confidence in their ability to help their child
- validate what the diversity of families do

10 years on;

- Families and practitioners are hugely positive about the protocol and other materials and what they achieve or them
- They cite very different ways of using it
- They cite very different ways of being introduced to it
- They say it has ‘really helped them to understand what my child is doing and why- and what I can do that helps’ Helen
- We could not have predicted which families would use it most

Issues centre around

- Access for the diversity of families
- When and how to introduce – its all in the telling
- Letting go – allowing families to lead on what they want to do; changes in working practice
- Timing – changes in working practice

The Monitoring protocol itself

- It is a tool
- It is underpinned by the Early Support partnership ethos- and the pivotal link between family engagement and outcomes for children
- It sets up expectations in families re how their voice will be heard
- It is integrated into the whole system of family Service plans and unified service delivery
- It is underpinned by the ‘so what’ concept of assessment

Changing practices

- It is not a tick list – the important part is the discussion and the promotion of everyone’s understanding of what the child can do and will do next and how everyone will support this

Enabling parents/ carer contributions

- Families choose the level of involvement
- They are not made to feel guilty for not carrying out every element themselves
- Their views are listened to and respected and will determine what is in the protocol
- Professionals add to observations but do not 'challenge' them
- 'training' is in small group contexts (less threatening)
- It centres on describing what babies and children can do - possibly and definitely

Profile, family A

Please shade boxes when you have entered 'Definitely' for most of the behaviours in that stage:

	Communication	Attending, listening and vocalisation	Social-emotional	Other developmental milestones	Play
Stage 11					
Stage 10					
Stage 9					
Stage 8					
Stage 7					
Stage 6					
Stage 5					
Stage 4					
Stage 3					
Stage 2					
Stage 1					

Key:

Colour	Age/Date	Colour	Age/Date	Colour	Age/Date	Colour	Age/Date
	Oct 04						
	March 05						
	June 05						

Attending, listening and vocalisation

Please shade boxes when you have entered 'Definitely' for most of the behaviours in that stage:

	Attending	Listening	Vocalisation
Stage 11			
Stage 10			
Stage 9			
Stage 8			
Stage 7			
Stage 6			
Stage 5			
Stage 4			
Stage 3			
Stage 2			
Stage 1			

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Level 1/ 2: Developmental profiles

- Developmental milestones
- Communication
- Attending, listening and vocalisation
- Play
- Social Communication

Enough Progress: Family B

Monitoring protocol for deaf babies and children

Developmental profile

Child's name: _____ D.O.B _____

Please shade boxes when you have entered 'Definitely' for most of the behaviours in that stage:

	Communication	Attending, listening and vocalisation	Social-emotional	Other developmental milestones	Play
Stage 11					
Stage 10					
Stage 9					
Stage 8					
Stage 7					
Stage 6					
Stage 5	Red		Red	Red	
Stage 4	Yellow		Yellow	Yellow	
Stage 3	Cyan		Cyan	Cyan	
Stage 2	Orange	Cyan	Orange	Orange	
Stage 1	Orange	Orange	Orange	Orange	

Key:

Colour	Age/Date	Colour	Age/Date	Colour	Age/Date	Colour	Age/Date
Orange		Red					
Cyan							
Yellow							

Enough Progress Family B

Monitoring protocol for deaf babies and children

Developmental profile for attending, listening, and vocalisation

Child's name: _____ D.O.B _____

Please shade boxes when you have entered 'Definitely' for most of the behaviours in that stage:

	Attending	Listening	Vocalisation
Stage 11			
Stage 10			
Stage 9			
Stage 8			
Stage 7			
Stage 6			
Stage 5			
Stage 4			
Stage 3			
Stage 2			
Stage 1			

Key:

Colour	Age/Date	Colour	Age/Date	Colour	Age/Date	Colour	Age/Date



A monitoring protocol – what do families and professionals tell us it achieves?

1. It enables families to feel a sense of growth and development
2. It gives them confidence in their child's 'ability' to learn
3. It validates what they are doing – 'making the ordinary' good enough
4. It forms the basis for discussion and sharing – parents say they feel listened to and that their views are important

Professionals say

- It challenges them to be more family centred
- to 'live up' to the rhetoric of partnership, of valuing parental evidence and empowering parents
- It challenges them to find ways to support the diversity of families and their access
- There are issues they still have to resolve re gatekeeping/ gateway/ access
- There are implications for time and timing of visits

Early Support Monitoring Protocol is focussed on

- Supporting families contributions to assessments in both clinics and homes
- i.e. Enabling the voice of the Family to be heard

Challenges for everyone working with babies who are deaf and their families

- How to enable parents so that they share their observations and understandings of their child
- How to engage the diversity of families
- How to gain the information we as practitioners need to advise and support families
- If families are more informed regarding development can this be potentially more threatening for practitioners and/or for families?

Diversity: access – what one practitioner said

How have I enabled families?

- I have acted as reader/scribe
- A family have made audio recordings of exemplars
- Another practitioner has made a video record of exemplars
- I ensure interpreter time is available, the interpreter has also been trained in the use of the monitoring protocol
- I make sure there is enough time available.

How does it work in practice?

- Most families fill in monitoring protocol on an ongoing basis
- Key service staff contribute, at least, to the pre review of family service plan or at 2-3 month intervals
- On recognising progress, most families then ‘look forward ‘ to what should consolidate or emerge in next few months
- Discussion around activities that promote development
- If there is an area ‘lagging behind’ this is discussed, and ‘what will now happen’ is shared.

Once the protocol is completed

- There is clearly allocated time for discussing where the child 'is' and what they need now to go on to do
- This includes using the 'fridge cards' for suggestions as to what helps children to move forward
- Families have copies of all contributions to the monitoring protocol and keep it (professionals will need to ask if they can photocopy it or will need to fill in their own copy).

Where are they going next?

Target setting or simply looking forward to new learning? What if they are not moving forward?

Profile, family A

Please shade boxes when you have entered 'Definitely' for most of the behaviours in that stage:

	Communication	Attending, listening and vocalisation	Social-emotional	Other developmental milestones	Play
Stage 11					
Stage 10					
Stage 9					
Stage 8					
Stage 7					
Stage 6					
Stage 5					
Stage 4					
Stage 3					
Stage 2					
Stage 1					

Key:

Colour	Age/Date	Colour	Age/Date	Colour	Age/Date	Colour	Age/Date
	Oct 04						
	March 05						
	June 05						

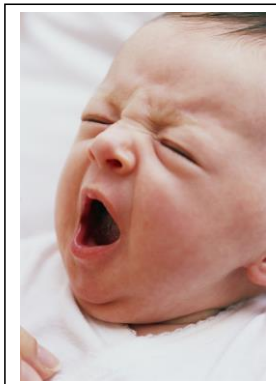
Attending, listening and vocalisation

Please shade boxes when you have entered 'Definitely' for most of the behaviours in that stage:

	Attending	Listening	Vocalisation
Stage 11			
Stage 10			
Stage 9			
Stage 8			
Stage 7			
Stage 6			
Stage 5			
Stage 4			
Stage 3			
Stage 2			
Stage 1			

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COMMUNICATION

- Spend time in face to face contact and use these opportunities to talk about what Lilly is doing or how she is feeling e.g. "was that a yawn? You're tired"
- Copy sounds, mouth movements and facial expressions that Lilly makes, e.g. pouting expressions- sometimes Lilly will start to copy you too.
- Continue to use speech, touch and facial expression to communicate with Lilly, this is often the time when routines such as nappy changing and feeding start to have a game elements – repeated tickling, touching and comments, e.g. "you little rascal –are you laughing at me?"
- Remember to leave spaces in your 'conversation' with Lilly so that she can have a turn.

ATTENDING, LISTENING, VOCALISATIONS

- Watch and think about Lilly's behaviours, copy the sounds she makes, talk about objects she is looking at.
- Take part in close face to face interaction with Lilly.
- Use your voice and touch to gain Lilly's attention, speak tunefully and make your voice fun to listen to.
- Play with sound making toys and noisy things around the house
- Talk about what you are doing.
- Try different 'touch' routines, baby massage, stroking faces hand games.
- Children enjoy patterns in your speech so repetitions of rhymes are useful.
- Watch and wait for Lilly's pauses and then use the opportunity to make a comment.



PLAY

- Play tickles games and others that include anticipation such as peek-a-boo.
- Encourage Lilly's awareness of her body by touching her face, counting her fingers or toes, tickling her tummy and giving her your finger to grasp.
- Bring toys and other interesting objects, including books, close enough for Lilly to reach out for and look at. Talk about what she is reaching for and looking at. Lilly will enjoy things she can grip such as rattles and dangling toys in the pram.

Progress – family B

Monitoring protocol for deaf babies and children

Developmental profile

Child's name: _____ D.O.B _____

Please shade boxes when you have entered 'Definitely' for most of the behaviours in that stage:

	Communication	Attending, listening and vocalisation	Social-emotional	Other developmental milestones	Play
Stage 11					
Stage 10					
Stage 9					
Stage 8					
Stage 7					
Stage 6					
Stage 5	Red		Red	Red	Red
Stage 4	Yellow		Yellow	Yellow	Yellow
Stage 3	Blue		Blue	Blue	Blue
Stage 2	Orange	Blue	Orange	Orange	Orange
Stage 1		Orange			

Key:

Colour	Age/Date	Colour	Age/Date	Colour	Age/Date	Colour	Age/Date
Orange		Red					
Blue							
Yellow							

Focusing on areas of concern – family B

Monitoring protocol for deaf babies and children

Developmental profile for attending, listening, and vocalisation

Child's name: _____ D.O.B _____

Please shade boxes when you have entered 'Definitely' for most of the behaviours in that stage:

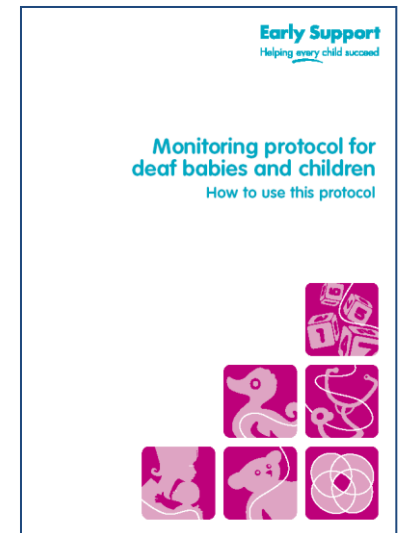
	Attending	Listening	Vocalisation
Stage 11			
Stage 10			
Stage 9			
Stage 8			
Stage 7			
Stage 6			
Stage 5			
Stage 4			
Stage 3			
Stage 2			
Stage 1			

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Reminder: Level 2 materials

- Provide more detail
 - Least important where development is following expected pattern
 - Most useful when lack of development in a particular area gives cause for concern
-
- Prime users will be professionals but some families may wish to use, alongside the monitoring protocol
 - Recommended for all end B5, B8, B9 and B11.



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Level 1/ 2: Developmental profiles

- Developmental milestones
- Communication
- Attending, listening and vocalisation
- Play
- Social Communication

Structure

Communication Level 2 materials

- Designed to look in detail at communication –how a child “learns to mean” and moves towards conventional use of language.
- Explain how these fit in with Level 1
- Stress a holistic approach oral/sign
- Look in detail at development of pragmatics, early words/signs, early grammar, interaction and attending listening and vocalisation
- Level 2 checks mesh with monitoring protocol at the end of stages B5, B8 and B11



Challenges of Level 2 materials: if the child is not moving smoothly forward

- When will further investigation swing into action?
- Who can you refer to?
- Fast track referral to other services?
- Review of support provided? Different level and/or type of support?
- Is it the support that is not working or within child/ family features?

The Monitoring Protocol and Family Service Plans - examples



Reflections on the monitoring protocol: summary of practitioner comments:

- Family engagement may be a reflection of how the monitoring protocol is introduced – ‘Its all in the telling’
- Celebration of achievements – ‘can dos’
- Sends a message to families – we value their views
- Increased contributions from families
- Observations are enhanced/more focused
- ‘Real picture’ of where the child is at
- Practical ‘real life’ ideas from the fridge cards
- Families lead more on questions
 - o Everyone is confident about how the child is doing and what he or she will do next .