Better Start BRADFORD

2015-2025

SHARING KNOWLEDGE, SHAPING FUTURES

Talking Together

Project Impact Report: 2025

BHT Early Education & Training

Contents

About Better Start Bradford

Better Start Bradford is part of the ten-year A Better Start Programme set up and funded by The National Lottery Community Fund in 2015.

Since 2015, A Better Start partnerships in Blackpool, Bradford, Lambeth, Nottingham and Southend-On-Sea have supported families to give their babies and very young children the best possible start in life, specifically to:

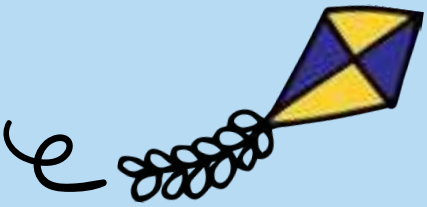
- Improve children's diet and nutrition to support healthy physical development and protect against illness in later life.
- upport children to develop social and emotional skills so they can develop positive relationships and cope with difficult situations.
- Help children develop their language and communication skills, so that they can engage with the world around them.
- Bring about changes in systems, practice and behaviour that increased the focus on the first 1001 days of life and invest in preventative and early intervention approaches that have been demonstrated to have impact.

In Bradford, we created over 20 evidence-led projects and services for expectant families and families with children aged 0-3 in Bowling and Barkerend, Bradford Moor and Little Horton (the Better Start Bradford area).

Each one was designed with, and for, our specific communities, delivered by commissioned partner organisations, and evaluated throughout by the Better Start Bradford Innovation Hub (BSBIH).

Better Start Bradford set up the Innovation Hub with Born in Bradford at the Bradford Institute for Health Research (BIHR) to be our evaluation partner for the whole programme. We also commissioned the additional birth cohort, Born in Bradford Better Start (BiBBS), to allow a more extensive and longer-term evaluation. The findings of the BSBIH evaluation of each of the projects are threaded through the Impact Reports and are credited to BSBIH.

This work has been supported by complementary strands of work, including community engagement, workforce development, campaigns and volunteering.



About Talking Together

The Talking Together Project was delivered for Better Start Bradford by local charity, BHT (Bierley, Holmewood and Tyersal) Early Education and Training from 1 June 2015 to 30 November 2024.

Talking Together was designed by BHT Early Education and Training to improve the home learning environment for children aged two at risk of language development delay.

The project had three main elements

- **Talking Together screening:** a universal language assessment for all two-year-olds, completed as a home visit.
- **The Talking Together programme:** a targeted six-week home-based intervention for those identified as at risk for weak or delayed language development.
- **The Talking Together plus programme:** additional support identified after the six-week intervention, tailored to individual family need.

This was complemented by Owlets, a friendly group for families with children 18 months to three years with focused support for children's language through play.

Why was Talking Together needed

Speech, language, and communication needs (SLCN) were identified as one of the three core areas for the National Lottery Community Fund's A Better Start programme. National evidence highlighted a significant gap between service provision and demand, with ongoing shortages in specialist services such as Speech, Communication and Language Therapy (SCLT) (Royal College of Speech and Language Therapists, 2022).[i]

Research indicated that up to 75% of children in areas of high deprivation have communication and language difficulties upon entering school (Bercow Report, 2008)[ii]. Early intervention is essential to improve outcomes, as highlighted in reports by Field (2010)[iii] and Graham Allen (2001)[iv]. However, a lack of shared understanding among education, health, schools, and parents often hinders effective support (Lindsey & Dockrell, 2002[v]; Barron et al., 2007)[vi].

In response, BHT Early Education and Training developed early intervention strategies in 2006, building on work from the Sure Start Children's Centres. The Talking Together programme was adapted from the evidence based It Takes Two to Talk[vii] [viii] approach by the Hanen Centre in Canada, providing language development support in the family home, Children's Centres, and schools.

Better Start Bradford commissioned BHT Early Education and Training in 2015 to deliver the Talking Together project in the Better Start Bradford area. The proposal utilised existing partnerships and evidence-based work BHT Early Education and Training had undertaken as a Children's Centre provider as part of its core purpose. The programme recognised that effective language skills are critical for school readiness.

The following data from the Better Start Bradford Innovation Hub clearly demonstrates the level of need identified in Bradford.[ix]

Language delay in Better Start Bradford

The data captured by BHT and our BiBBS birth cohort has enabled the Innovation Hub to identify for the first time research evidence of the need for Talking Together and early interventions for language in the Better Start Bradford area.

We analysed a sample of language assessments of 712 BiBBS children collected pre COVID-19.

From this we found that approximately 1 in 4 children in the BiBBS cohort who took part in the universal Talking Together screening had evidence of early language delay and could be categorised as late talkers.

children in the BSB area are late talkers

This is double the rates found elsewhere in the UK.

Factors that were associated with being a late talker were:

- being of Pakistani heritage
- being male at birth
- having parent-reported hearing concerns
- having a delay in understanding words
- not yet using language in everyday settings as expected (e.g. not yet combining words or asking Wh- questions like 'where' or 'what', family not understanding the child).

Factors that protected against being a late talker were:

- living in a larger household

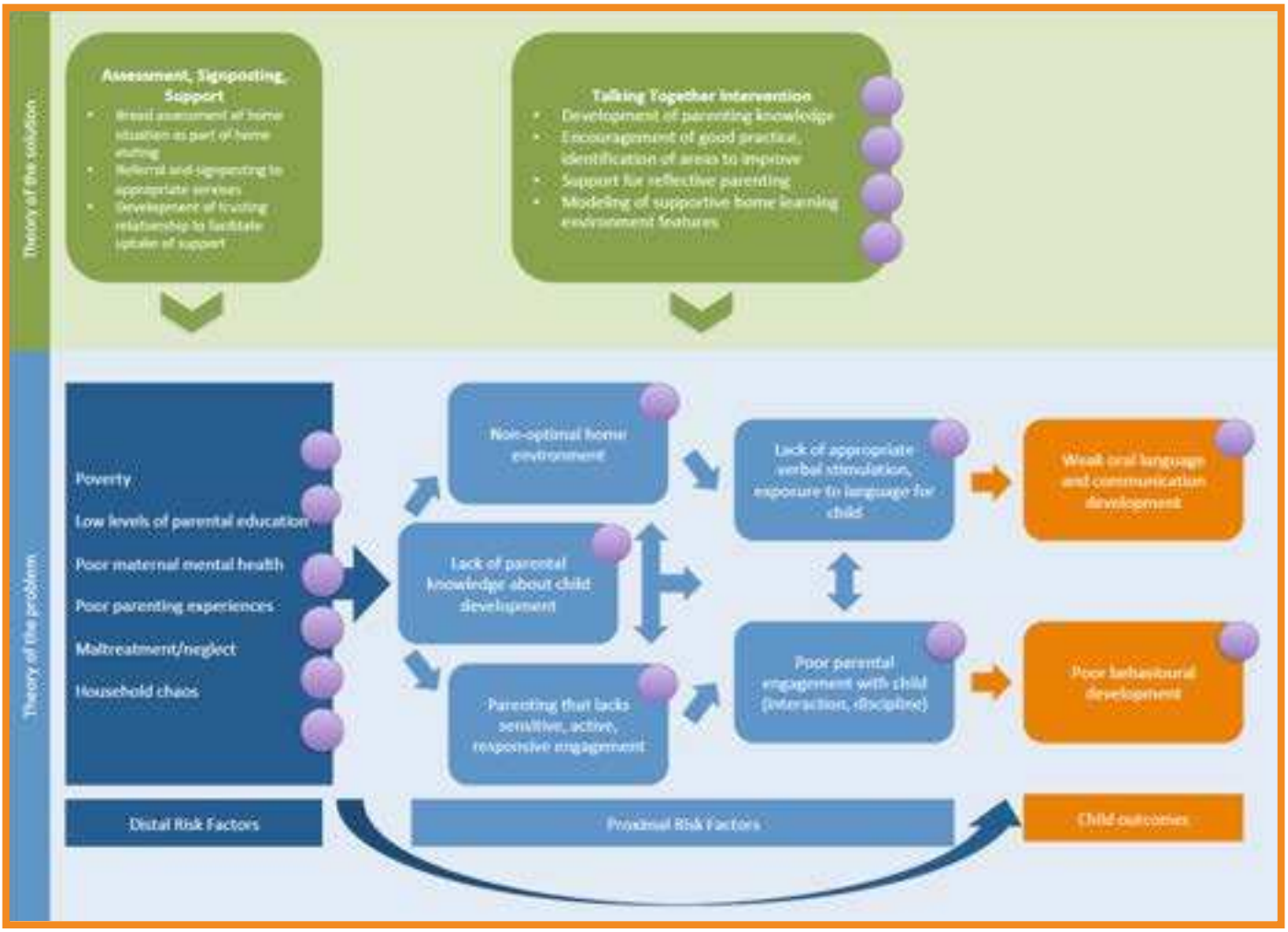
We concluded that children in the Better Start Bradford area are already at a disadvantage in their language skills from as early as 2-years-old when compared to other children in England, and that there is high demand for early intervention.

Theory of Change and Logic Model

We used a Theory of Change and Logic Model approach to design our services. These are included in the impact reports because they offer a useful summary of the service design. They are accompanied by an evaluation plan which is delivered by Better Start Bradford Innovation Hub.

The Theory of Change explains how we have identified a need (for example poor health) for improved outcomes and why we believed the proposed service would provide a solution (based on evidence and science). The Logic Model shows the steps we needed to take to arrive at the desired outcomes. It identified the need, the target group(s), the inputs and activities which would impact on the outcomes and the changes we should expect to see in the short, medium and long term.

Theory of Change



Logic Model: Talking Together

Need	Inputs	Activities	Outputs	Outcomes	Impact
Overall early years foundation stage profile (EYFSP) scores in Better Start Bradford area are lower than Bradford and national average – 6% difference.	Staff: 13 FTE Language Development Workers (LDWs) 1 FTE Deputy Manager 1 FTE LDW manager 0.75 FTE Administrator	Assessment of a child's language and communication, parent/child relationship and home learning environment at age two.	No. of children eligible for assessment.	Children receiving intervention will have improved vocabulary and language skills.	Short Term: More children will enter Early Years provision with the language and communication skills they need to engage in this stage of early learning and to develop effective relationships.
			No. of children assessed.		
			No. of assessments completed.		
In communication and language, 76.5% Better Start Bradford children achieve a Good Level of Development (GLD), compared to 80% district wide and 82% nationally.	Review three months after last session.	6 x weekly hour-long sessions delivered by language development worker, in child's home with main carer (Talking Together).	No. of children offered Talking Together after assessment.	Children receiving intervention will have age-appropriate language skills	
			No. of children accepting Talking Together.	Improved maternal sensitivity.	Medium Term: More children will have better literacy and language skills through primary school.
	Additional six weeks (Talking Together plus).	Review three months after completion.	No. of children completing Talking Together.		
	Assessment tools (100-word checklist, Oxford Communicative Development Inventory (CDI)).	If required, 6 x additional weekly sessions (Talking Together Plus).	No. of children referred to Talking Together plus following review.	Children's behaviour will improve.	
			No. of children starting Talking Together plus.	Parents will have increased confidence in interacting with their children.	Long Term: Children will have better literacy and language skills and better achievement on leaving primary school. Children in Primary school have improved school behaviour and engage positively with their peers and teachers.
Boys perform significantly worse than girls (73.1% compared to 83.7%)	Project management.	Work with early years settings to support individual children.	No. of children completing Talking Together plus.		
	Budget for staff training, support.	Onward referral to appropriate agencies.	No. of staff trained to deliver Talking Together plus.	Parents will engage more with services.	

Project delivery

Talking Together was delivered universally within the Better Start Bradford area to parents of two-year-old children identified as at risk of language delay following an assessment.

Programme Structure:

- **Assessment:** Language Development Workers (LDWs) used a validated tool adapted from the Sure Start Language Measure.
- **Home-based intervention:** A six-week one-to-one programme with weekly one-hour sessions covered key communication strategies. A follow-up review after 12 weeks determined the need for additional support (Talking Together Plus).
- **Onward referrals:** Referrals to Speech, Communication and Language Therapy (SCLT), audiology, family hubs, and other relevant services enhanced cross-sector collaboration.

Programme Adaptations:

- **Parent feedback:** Led to home-based rather than group delivery, allowing practitioners to model and support parent-child interactions in a familiar environment.
- **Group intervention (Owlets):** Developed as a complementary community-based programme for families who had completed Talking Together.
- **Integration into the SCLT Referral Pathway, Talking Bradford[x]:** Strengthened collaboration with health professionals, ensuring a smoother transition for children requiring specialist services.

Workforce Development:

Highly trained Language Development Workers (LDWs) played a pivotal role. All LDWs had a minimum Level 3 early years qualification, experience in child development and family work, and had completed the ELKLAN[xi] Speech and Language Support for 0-3s training.

Talking Together did not replace the specialist provision of the Therapist Team, it was a supplementary intervention fitting within the three-tier system, used as part of the Integrated Speech and Language Pathway, acknowledging the need for ‘universal’, ‘targeted’ and ‘specialist’ services as used in Talking Bradford.

Key programme outcomes

Short-Term:

- Improved assessment scores.
- Increased vocabulary.

Long-Term

- Sustained language and communication development.
- Improved pro-social behaviour.

Data and evaluation

The Talking Together project received an implementation evaluation and before-and-after outcome evaluation. Data was collected by the project provider from 1 June 2015 to 30 November 2024.

The executive summary below, taken from the Better Start Bradford Innovation Hub final report, provides an overview of the project background and aims of the evaluation.

Better Start Bradford Innovation Hub
ITalking Together Final Report
June 2024

Executive Summary

Project background

Talking Together, developed by BHT Early Education and Training , is a locally developed intervention designed to improve the home learning environment for children aged 2 who are at risk of language development delay. The project and has three main elements:

Talking Together Screening (TT Screen): A universally offered language assessment for all 2 year-olds in the Better Start Bradford area, completed as part of a home visit.

Talking Together Intervention (TT Intervention): A targeted 6-week home-based intervention offered to those children considered at risk for weak or delayed language development, as identified through the TT screen. Delivered by BHT 's Language Development Workers (LDWs), the 6 sessions cover a range of concepts related to early communication development, and provide knowledge and support to parents to allow them to best support children's early language skills themselves.

Talking Together Plus Intervention (TT+): An additional programme offered to some families who received Talking Together, where it is identified that they may benefit from some additional support. Delivered by LDWs the programme is tailored specifically to an individual child's need and therefore differs in length per family.

Talking Together was commissioned by the Better Start Bradford programme from the 1st June 2015 and will be delivered until 31st November 2024. This report is based upon data collected by the project provider between June 2015 and April 2024, covering almost 9 full years of delivery. A further update to the data in this report will be provided as part of a contract completion appendix once the project has closed. Previous evaluation reports have been produced for Talking Together (in 2017 and 2021) and a feasibility RCT was conducted in 2019. Details of each can be found on the BSBIH website.

Aims of the evaluation

In this report, we share findings from:

- An **implementation evaluation** to establish whether Talking Together was successfully delivered as intended, whether it was acceptable, and whether it reached a representative population within Better Start Bradford.
- An **assessment of need** to evaluate the prevalence of language delay in the Better Start Bradford reach areas, using the Born in Bradford's Better Start (BiBBS) birth cohort. This is summarised here but a full report is available on the BSBIH website.
- An **enhanced evaluation** which involved a feasibility RCT which looked at evidence of promise for the project, and the acceptability of a wait-list control design for future evaluation. This is summarised here with a full report available on the BSBIH website.

Opportunities to secure funding to support a full effectiveness evaluation of Talking Together have been explored for the last three years. Funding would need to support the continued and expanded delivery of the project as well as the evaluation. To date, no viable opportunities have been found and this continues to be the aspiration for the project to further develop its evidence base.

The programme's evaluation by the Better Start Bradford Innovation Hub has raised its evidence level to Early Intervention Foundation (EIF) Level 2+, with strong potential for an effectiveness evaluation moving it to Level 4.

Evaluating the effectiveness of Talking Together

oTTer Feasibility Study

Between 2018 and 2019, Talking Together was subject to a randomised controlled feasibility study funded by the Nuffield Foundation. This feasibility study, named the oTTer trial, is the first step in a rigorous outcome evaluation and aims to establish if and how best a full randomised contol trial (RCT) could be completed.

This study used a waiting control design, meaning eligible families who consented to oTTer were randomly assigned to either receive Talking Together immediately, or after a 6 month wait. This meant the development of the children in the immediate intervention group could be compared to children developing as normal in the waiting control group.

Key findings included:

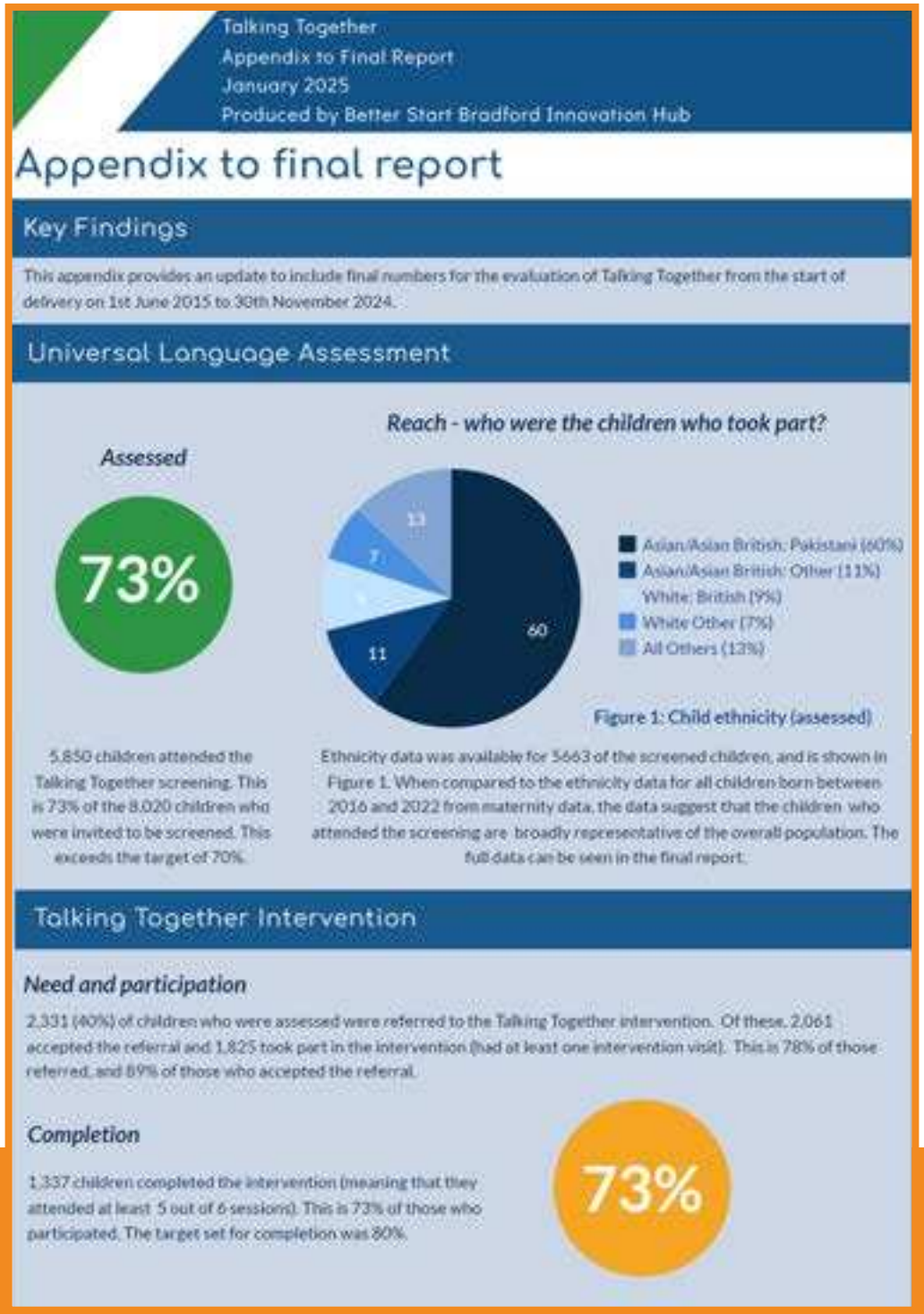
1. Referral rates indicate that Talking Together is a much-needed service and was positively received by the community.

2. Results suggest a potentially beneficial impact of the intervention in improving:
   - children's home learning environment
   - parental relationships with their child
   - child emotional and behavioural difficulties

3. A full trial is feasible with adaptations to improve adherence and reduce attrition. To undertake a effectiveness evaluation the intervention would need to receive further commissioning and was scaled up.

Key achievements and lessons learned

The work of BHT Early Education and Training and the Better Start Bradford Innovation Hub has enabled a more comprehensive evaluation and monitoring for the Talking Together project. The following is taken directly from the appendix to the final report produced by the Better Start Bradford Innovation Hub and was updated in January 2025. It highlights the value, progress, and results of the project and helps to shape thoughts about future planning, delivery and commissioning opportunities.



Talking Together
Appendix to Final Report
January 2025
Produced by Better Start Bradford Innovation Hub

Appendix to final report

Key Findings

This appendix provides an update to include final numbers for the evaluation of Talking Together from the start of delivery on 1st June 2015 to 30th November 2024.

Universal Language Assessment

Assessed

73%

5,850 children attended the Talking Together screening. This is 73% of the 8,020 children who were invited to be screened. This exceeds the target of 70%.

Reach - who were the children who took part?

Figure 1: Child ethnicity (assessed)

Ethnicity data was available for 5663 of the screened children, and is shown in Figure 1. When compared to the ethnicity data for all children born between 2016 and 2022 from maternity data, the data suggest that the children who attended the screening are broadly representative of the overall population. The full data can be seen in the final report.

Talking Together Intervention

Need and participation

2,331 (40%) of children who were assessed were referred to the Talking Together intervention. Of these, 2,061 accepted the referral and 1,825 took part in the intervention (had at least one intervention visit). This is 78% of those referred, and 89% of those who accepted the referral.

Completion

1,337 children completed the intervention (meaning that they attended at least 5 out of 6 sessions). This is 73% of those who participated. The target set for completion was 80%.

73%

Talking Together Intervention

Reach - who were the children who took part?

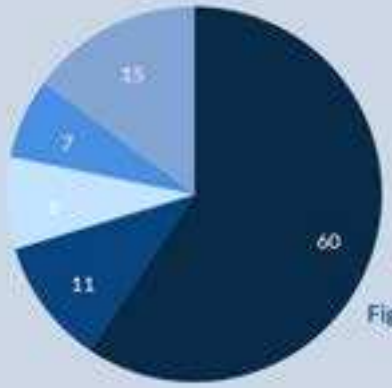


Figure 2: Child ethnicity (intervention)

Ethnicity data was available for 2005 of participating children. The ethnic background of participants is shown in Figure 2. It was very similar to the ethnicity of the children who were screened, and children were broadly representative of children in the area. Further information can be found in the final report.

Talking Together+ Intervention

Need, participation and completion

272 children were referred into Talking Together+. This is 20% of all children who completed the Talking Together intervention.

63%

170 (63%) children took part in Talking Together+.

72%

123 (72%) completed Talking Together+

COVID-19 impact

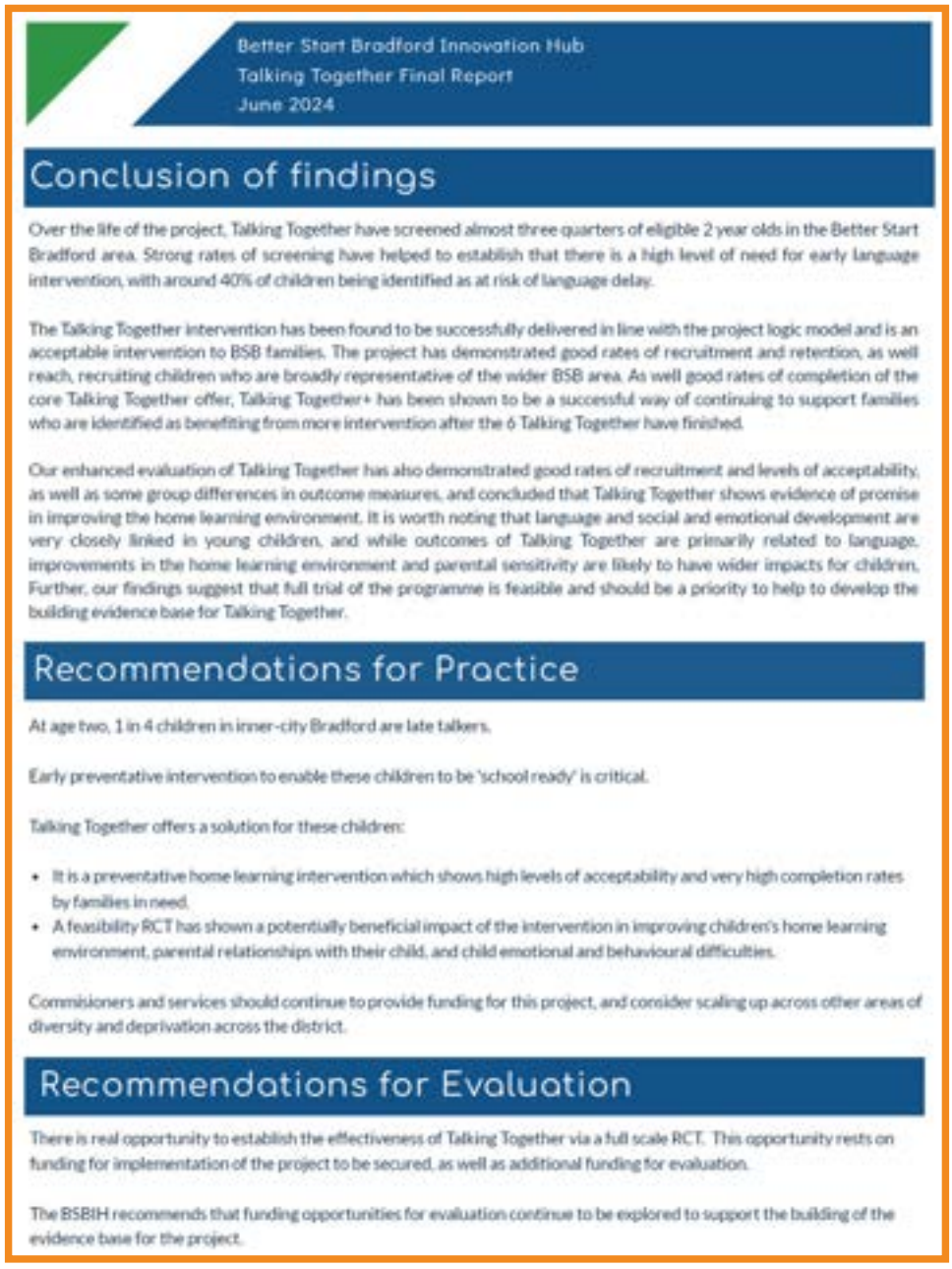
BHT Early Education and Training adapted the Talking Together project in response to the initial COVID-19 lockdown and social restrictions by:

- Delivering the language assessment to parents over the phone.
- Asking parents, post referral, whether they would like to receive sessions via phone call, video or face-to-face once safe to do so.
- Offering weekly/bi-weekly catch-up calls to those parents who were added to a waiting list for face-to-face sessions.
- Offering doorstep visits once restrictions eased to families that could not be contacted.
- Offering doorstep screening assessments using robust risk assessments.

Following a period of responsive COVID-19 adaptation, a swift transition back to face-to-face delivery in 2021 reinforced the strength of the home-based intervention.

Conclusion of findings and recommendations

The following insert has been taken directly from the June 2024 Better Start Bradford Innovation Hub final report on Talking Together. The full report can be found online. Please scan QR code:



Better Start Bradford Innovation Hub
Talking Together Final Report
June 2024

Conclusion of findings

Over the life of the project, Talking Together have screened almost three quarters of eligible 2 year olds in the Better Start Bradford area. Strong rates of screening have helped to establish that there is a high level of need for early language intervention, with around 40% of children being identified as at risk of language delay.

The Talking Together intervention has been found to be successfully delivered in line with the project logic model and is an acceptable intervention to BSB families. The project has demonstrated good rates of recruitment and retention, as well reach, recruiting children who are broadly representative of the wider BSB area. As well good rates of completion of the core Talking Together offer, Talking Together+ has been shown to be a successful way of continuing to support families who are identified as benefiting from more intervention after the 6 Talking Together have finished.

Our enhanced evaluation of Talking Together has also demonstrated good rates of recruitment and levels of acceptability, as well as some group differences in outcome measures, and concluded that Talking Together shows evidence of promise in improving the home learning environment. It is worth noting that language and social and emotional development are very closely linked in young children, and while outcomes of Talking Together are primarily related to language, improvements in the home learning environment and parental sensitivity are likely to have wider impacts for children. Further, our findings suggest that full trial of the programme is feasible and should be a priority to help to develop the building evidence base for Talking Together.

Recommendations for Practice

At age two, 1 in 4 children in inner-city Bradford are late talkers.

Early preventative intervention to enable these children to be 'school ready' is critical.

Talking Together offers a solution for these children:

- It is a preventative home learning intervention which shows high levels of acceptability and very high completion rates by families in need.
- A feasibility RCT has shown a potentially beneficial impact of the intervention in improving children's home learning environment, parental relationships with their child, and child emotional and behavioural difficulties.

Commissioners and services should continue to provide funding for this project, and consider scaling up across other areas of diversity and deprivation across the district.

Recommendations for Evaluation

There is real opportunity to establish the effectiveness of Talking Together via a full scale RCT. This opportunity rests on funding for implementation of the project to be secured, as well as additional funding for evaluation.

The BSBIH recommends that funding opportunities for evaluation continue to be explored to support the building of the evidence base for the project.

Research conducted by the Better Start Bradford Innovation Hub on language and communication, including the rates on language delay in Bradford and interventions such as the randomised controlled feasibility study oTTer, can be found here: Language & Communication – the Better Start Bradford Innovation Hub. Please scan QR code:

Embedding learning and systems change

- **Wider recognition:** Talking Together is now widely respected across Bradford, with successful case studies demonstrating its impact.
- **Integrated working:** The programme was embedded in the Talking Bradford pathway which ensured a streamlined approach to Speech, Communication and Language Needs (SCLN) support.
- **High-quality referrals:** Comprehensive assessments have led to timely referrals for paediatrics, Portage, and specialist interventions.
- **Strengthened relationships:** Direct referrals from Health Visiting Teams to the Owlets programme have previously supported the Early Language Identification Measure (ELIM)[xii], 0-19 Team and strengthened relationships between health and voluntary services.
- **Safeguarding and family support:** Language Development Workers (LDWs) have played a crucial role in identifying and addressing safeguarding concerns, supporting Early Help and Social Care teams.
- **Workforce development:** The expertise of LDWs has contributed to professional training initiatives, aligning with national workforce development strategies.

The Talking Together project and the wider work of BHT Early Education and Training has made a significant impact on early language development in Bradford, enhancing school readiness, parental engagement, and professional collaboration. Its integration into district-wide strategies and potential for scalability provides a strong foundation for future development.

By embedding best practices, strengthening workforce capacity, and aligning with national initiatives, Talking Together serves as a model of effective early intervention, integrated working, and sustainable community impact.

Local and national strategic influences

SCAN ME
to view strategies

The Talking Together project aligns with several local and national strategies focused on early years development, child welfare, education, and social inclusion. Here are the most relevant strategies:

Local strategies

- Bradford District Children and Young People's Strategy

Bradford, like many local authorities, has strategies in place to support early years development, particularly for children at risk of developmental delays. The Talking Together project aligns with these strategies by focusing on improving the home learning environment, which is a key factor in early childhood development. Bradford's strategy includes objectives around increasing early interventions, improving language skills in young children, and supporting parents and caregivers in enhancing their children's development.

- Bradford's Local Health and Wellbeing Strategy

This strategy aims to improve the overall health and wellbeing of local populations, particularly vulnerable groups. Given that language development is closely linked to broader developmental outcomes, including emotional and mental health, the Talking Together project aligns with efforts to support families facing challenges that might affect children's developmental progress. The project could also support mental health initiatives by reducing the stress and anxiety that can come from being a parent or caregiver to a child with language delays.

- Bradford's Early Intervention and Preventative Services

Bradford's local government has invested in early intervention services aimed at preventing long-term educational and social difficulties. The Talking Together project fits perfectly within these initiatives by targeting children at risk of language delays early, providing the support they need to reach developmental milestones.

- Bradford's Child Poverty Strategy

Children from families experiencing poverty are at a higher risk of developmental delays, including language delays. The Talking Together project aligns with local efforts to address child poverty by offering support to children from disadvantaged backgrounds, ensuring that they have the resources and tools they need to succeed from an early age.

National Strategies:

- The Early Years Foundation Stage (EYFS)

The Talking Together project supports the EYFS, which provides a framework for the learning, development, and care of children from birth to age five. Within this framework, language and communication are key areas of development. The project's focus on improving the home learning environment and supporting language development directly aligns with the government's emphasis on ensuring all children are school-ready by the age of five.

- The UK's Childhood Development Strategy (SEND)

The Special Educational Needs and Disabilities (SEND) strategy in the UK focuses on early identification of developmental challenges, providing support for children with speech, language, and communication needs (SLCN). The Talking Together project aligns with this national strategy by targeting children who may be at risk of speech or language delays and offering resources to parents and caregivers.

- The National Literacy Strategy

One of the goals of the National Literacy Strategy is to address early literacy gaps, particularly in the critical early years. As early language development is foundational to literacy, the Talking Together project is a practical implementation of these national goals by focusing on language development at the earliest stages of a child's life.

- The Childhood Obesity Strategy (and associated public health campaigns)

Although primarily focused on physical health, the UK's Childhood Obesity Strategy and related public health campaigns include efforts to promote overall childhood health, including cognitive and emotional development. The Talking Together project indirectly contributes to this by supporting healthy early childhood development through improving the home environment for children at risk of language delays.

- The Healthy Child Programme

This national strategy outlines the services and support offered to families with children aged 0-5, aiming to improve outcomes across a range of developmental areas, including language. The Talking Together project, by providing early intervention and support to children and families, aligns directly with this national program.

- The Early Help Strategy

The Early Help Strategy, which is a key component of Every Child Matters and national government policy, focuses on providing early assistance to children and families in need to prevent problems from escalating. The Talking Together project directly contributes to this by offering early support to children at risk of language delays, helping prevent later educational or developmental challenges.

- The NHS 10 Year Health Plan for England (2025)

The NHS 10 Year Health Plan for England outlines a commitment to improving mental and physical health outcomes for children. Language development is often linked with mental health and emotional well-being, especially in the early years. By improving the home learning environment and language development, the Talking Together project contributes to the NHS's broader goals for children's health and well-being.

- The Social Mobility Strategy

National strategies aimed at improving social mobility for disadvantaged children, such as the Social Mobility Strategy, place emphasis on early educational support. Talking Together aligns with this by targeting children from disadvantaged backgrounds and providing them with the necessary tools to overcome early language and communication barriers, which can contribute to long-term educational success.

- Best Start in Life Strategy

The Government's Best Start in Life Strategy highlights that the foundations of success are laid in early childhood. Ensuring every child has the best start in life - the chance to achieve and to thrive - are the foundation stones of the Government's Opportunity Mission. Better Start Bradford wholeheartedly agrees with the Government's statement that every child should have the opportunity to 'grow, play, learn and thrive'.

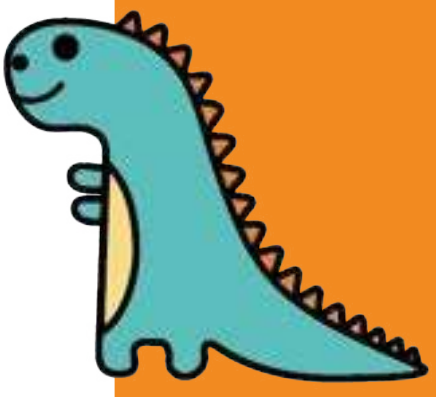
- The Department for Education's (DfE) Strategy for Supporting Vulnerable Children

The DfE has strategies in place to support vulnerable children, which includes a focus on those with developmental delays or disabilities. The Talking Together project could contribute to national efforts to ensure that these children receive appropriate support to catch up with their peers in terms of language and communication skills.

Since my son started this programme his attitude and behaviour has changed positively. The team was really nice and caring. My son was willing to participate because he really liked the professional and the interpreter. I would highly recommend everything about the programme.

Through the support from the Language Development Worker my child is now interacting with me, gaining eye contact and he is now wanting to play with us. My child used to be silent and he is now using sounds and babbling. The programme has been amazing!

She speaks very clearly now and is now putting four or five words together to make proper sentences. It is so lovely that we can have proper little conversations.



One of the sessions was all about how as humans we naturally comment on negative behaviour more than positive behaviour. Now, every little thing that my son does is commented on by us all in such a positive way and you can see how happily he responds to this.

Case Studies

Sara's story

I have five children, two girls and three boys. My eldest four are aged from 22 to 12 and my youngest son, Musa is two. It wasn't until I completed a routine questionnaire from the Talking Together team that I realised that in terms of language development, Musa wasn't where he should be.

The Talking Together team rang me to ask if I wanted them to do some work with Musa as he had scored low on the word count and I agreed that we needed a bit of extra help. They said that they would visit us at home once a week for an hour and show us different techniques to help develop Musa's language through play.

As the weeks went on, I realised that I had learned as much as Musa did. You think that as a mum of five children you know everything about parenting, but I certainly didn't. As a family, we realised that we did a lot of Musa's communicating for him. He would start trying to tell us something and one of us would talk for him and not give him that extra time to get his point across.

We all learned that we had to adapt our communication to help Musa develop his. We stopped just giving him things when he pointed to them. If he pointed to an apple, I would have normally just given it to him, but I now give him a chance to say the word.

Before our sessions with Talking Together, Musa would get very frustrated when trying to answer our questions because he simply did not have the language skills to be able to reply. We were encouraged to start from the beginning with questions that only need a response in the form of 'yes or 'no' so he could pick up the vocabulary slowly. It was also important for Musa to have my focused attention, this meant me turning everything distracting off in the background such as the television and getting down on the floor and communicating at his level.

I loved that each week the team focused on something different. I couldn't wait to put everything I was learning into place and share it with the family. It was quite comical and really lovely listening to my other children adapting how they changed the way they spoke to Musa into 'sing-song' tones, and it had such a positive impact on his development.

The last two sessions had to be delivered over the phone because of COVID-19, but they were still really helpful and I took on board the advice I was given and put it into practice immediately after the phone session finished. It was really beneficial to continue the sessions during this worrying time and it was easy to do over the phone.

Musa now sings nursery rhymes all the time. He was awake the other morning at three singing one of his nursery rhymes, which was a joy to hear despite the early hour!

We all learned so much through the Talking Together project as a family and I would fully recommend the project to other families. We thought with all of the conversation going on in the house Musa would have come on a lot more, but it had the opposite effect. It was suppressing his speech. Musa's speech is not still where he needs to be, but he has made massive progress from where he was. Little steps are like big steps for us – every new word is wonderful to hear from him.

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