Building Early Sentences Therapy (BEST) is an accessible and acceptable intervention approach to SLTs, SLTAs, and parents/carers. It aims to improve children's language development, particularly in the area of early sentences. BEST is developed to meet the needs of children with severe language difficulties, particularly those from bilingual backgrounds.

### Key Features of BEST:
- A focus on input
- Output occurs only when the child is ready
- Homework is accessible to parents
- A focus on cognitive strategies
- Promotes abstract grammatical representations
- Can be applied to a number of languages

### Introduction

Building Early Sentences Therapy (BEST) is a specialist intervention for children of 3 - 6 years with significantly delayed language development.

- Delivered by SLTs and SLT Assistants (SLTA) in close partnership with the child’s parent(s)/carer(s).
- Delivered individually or in groups, and has been adapted for delivery in a number of languages.
- Based on “usage-based” theories of language acquisition.
- Aims to improve children’s use and understanding of two, three, and four clause element sentences.
- Delivered over 16 sessions targeting 16 different verbs.
- Delivered using a standardised set of procedures and resources.

### Methods

#### Initial Development - Completed
- Identification of difficulty meeting needs of this group of children.
- Identification of gap in evidence.
- Development of therapy approach.
- Early ‘pilotting’.
- Development of resources.
- Staff training.
- Implementation across clinics.

#### Service Evaluation - Completed
- Device ‘progress tracker’ scoring number of morphemes and argument structures.
- Evaluate service through:
  1. Analysis of progress trackers.
  2. Focus groups.
  3. Regular meetings with staff for feedback and development.

#### Phase 2 Development - Completed
- Review of procedures & materials informed by evaluation.
- Development of new resources & manual.
- Distribution across clinics.
- New training package to be designed.

### Results

1. **Quantitative Results:** Data from 14 children receiving therapy in English and 4 in Mirpuri were analysed to determine which children had made significant progress in the target structures. All 18 children made significant progress: 15 in both morphology and argument structure use, 3 in either morphology or argument structure use.

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2. **Qualitative Results:** Focus group data from SLTs and SLTAs indicated high levels of acceptability and accessibility of the approach with SLTs, SLTAs, and parents/carers.

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### Discussion

- BEST is associated with significant progress in targeted language structures.
- Significant progress was achieved by children who received BEST in English and Mirpuri, a widely used Pakistani heritage language.
- Significant progress was achieved by children from monolingual and bilingual backgrounds.
- BEST is an accessible and acceptable intervention approach to SLTs, SLTAs, and parents/carers.

### Conclusion

This service evaluation is the first step in the development and evaluation of a complex intervention.

Further evaluation is necessary to definitively test the efficacy of BEST. A standard manual and set of resources has been published. Training is now available. Further research is required to evaluate:

- How BEST compares to other interventions.
- Whether gains generalise.
- Whether BEST works in a wider range of languages: Bilingual BEST (B-BEST).

### References