Too often when you read national guidance, frameworks and strategies, there is little mention of the role of SLTs in mental health and the needs of people who require speech and language therapy support. Is this because SLTs do not have a role to play? Or is it because the evidence is too weak? Actually, the contrary is true.

SLTs in mental health

We face the challenge that the profession is often not reflected in government guidance, the National Institute for Health and Care Excellence (NICE) guidelines and national benchmarking projects for mental health. There is a number of reasons for this:

■ The profession’s role in mental health is not well recognised.
■ Speech and language therapy is not seen as a core service.
■ SLTs are often not embedded in mental health teams.
■ There are fewer SLTs working in mental health compared with other areas.
■ Our evidence is not sufficiently comprehensive to meet national thresholds (as outlined in this month’s R&D Forum).

To gain an idea of staffing numbers, we undertook a quick mapping exercise to capture a snapshot of SLTs working across mental health in the NHS. The results showed that the numbers varied from trust to trust, with some areas lacking a dedicated speech and language therapy service, while other areas had a stronger representation.

A clear link

Against this backdrop, there is clear and constantly emerging evidence of the high levels of need experienced by our clients. The evidence shows that speech, language and communication needs (SLCN) and problems with swallowing are common in people with a mental health problem. However, national guidance and policy are slow to recognise this need and subsequently fail to provide adequate support for people with mental health needs.

Over the past 10 months, we have been raising the profile of SLTs and people with mental health needs, responding to a number of policy announcements and engaging with a range of national bodies, including NICE, Health Education England, Public Health England, NHS Benchmarking and other stakeholder organisations. We have started to build the narrative in a ‘key messages’ sheet, highlighting the link between mental health and speech and language therapy. But there is still much to do.

Lobbying for change

We have just finished responding to and lobbying NICE to challenge their guidelines on dementia. We were concerned at the lack of references to supporting communication problems and the role of SLTs. We are now waiting NICE’s decision and to find out whether they will accommodate our requests.

NICE has also just published a new guideline on rehabilitation for severe and enduring mental health needs, which we will respond to, highlighting the needs of people with communication and swallowing problems and cognitive impairments.

An independent review of the Mental Health Act 1983 was established last year to examine how the legislation is currently used and how existing practice can improve in the future, based on evidence of what works. The review is chaired by Professor Sir Simon Wessely, past president of the Royal College of Psychiatrists, with the interim report published in May followed by the full report this autumn. We are working with the review to offer our expertise to achieve better support for people with mental health needs.

We are also working with Health Education England, which is leading the implementation of the workforce strand for the Five Year Forward View for Mental Health, and will be highlighting the role of SLTs and how SLTs can deliver the transformation set out in the plan.

Finally, the Queen’s speech in 2017 confirmed that the UK government will reform mental health legislation in 2018/19. We will take this opportunity to work with our parliamentary supporters to highlight our concerns and identity ways in which we can better support people with mental health needs.

Many hands

All in all, it’s going to be a busy year in the policy team! Please do get in touch to support these exciting projects.

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