

## The NHS England Long Term Plan: what it means for speech & language therapy

### Chapter 3: Further progress on care quality and outcomes – A strong start in life for children and young people

<b>Headlines</b> – relevant sections for speech and language therapy	<b>Page / para</b>	<b>Implication</b> – what does this mean for speech and language therapy?
<p><b>Chapter 3: Further progress on care quality and outcomes</b></p> <ul style="list-style-type: none"> <li>Continuation of priorities around cancer, mental health, multi-morbidity and healthy ageing including dementia;</li> <li>New focus on children’s health, cardiovascular and respiratory conditions, and learning disability and autism.</li> </ul>		
<p><b>A strong start in life for children and young people</b></p>		
<p><b>Maternity and neonatal services:</b></p> <ul style="list-style-type: none"> <li>Increasing access to evidence-based care for women with moderate to severe perinatal mental health difficulties and a personality disorder diagnosis.</li> <li>All maternity services that do not deliver an accredited evidence-based infant feeding programme will begin the accreditation process in 2019/20</li> <li>Introduction of more Neonatal Intensive Care Cots where the Neonatal Critical Care review has identified under capacity</li> <li>Expanded roles for some AHPS to support neonatal nurses</li> </ul>	<p>Pg. 49, paras 3.16</p> <p>3.18</p> <p>3.19</p> <p>3.20</p>	<ul style="list-style-type: none"> <li>Opportunity to raise awareness of speech, language and communication needs as a mental health risk factor, and as a barrier to accessing accurate assessments and effective interventions, for women with perinatal mental health difficulties.</li> <li>Highlight role of SLT in identifying and supporting babies at risk of feeding difficulties.</li> <li>Opportunity for increased number of SLT posts on neonatal intensive care units and/or expanded roles.</li> </ul>
<p><b>Children and young people’s mental health services:</b></p> <ul style="list-style-type: none"> <li>Funding for children and young people’s mental health will grow faster than both overall NHS funding and total mental health spending.</li> <li>Investing in expanding access to community-based mental health services via NHS funded mental health services or school or college-based Mental Health Support Teams</li> </ul>	<p>Pg. 50 – 51</p> <p>Paras 3.24</p> <p>3.25</p>	<ul style="list-style-type: none"> <li>Increased funding for mental health presents opportunities for new SLT posts embedded within children and young people’s mental health services – both in terms of prevention and intervention.</li> <li>Members working in children’s services in trailblazer areas* interested in mental health opportunities are encouraged to contact the RCSLT: <a href="mailto:caroline.wright@rcslt.org">caroline.wright@rcslt.org</a></li> </ul> <p>*Trailblazer areas are: Newcastle (3);</p>

<ul style="list-style-type: none"> <li>Expanding timely, age-appropriate crisis services</li> <li>New services for 6,000 highly vulnerable children with complex trauma</li> <li>Extension of current service models to create a comprehensive offer for 0-25 years olds that reaches</li> </ul>	<p>3.27 3.29 3.30</p>	<p>Hertfordshire (2); Gloucestershire (4); Buckinghamshire (2); Camden (2); Northumberland (2); Stoke on Trent (2); Swindon (3); Berkshire West (2); Tower Hamlets (2); South Tyneside (2); Nottinghamshire (2); Oxfordshire (2); Hounslow (2); Liverpool (3); South Warwickshire (2); North Kent (2); Haringey (2); Doncaster &amp; Rotherham (4); North Staffordshire (2); Bromley (2); Kirklees (2); SW London HCP (3); West London (2) Greater Manchester (3)</p>
<p><b>Children and young people with cancer:</b></p>	<p><b>Pg 53 – 54</b></p>	
<ul style="list-style-type: none"> <li>Develop and implement networked care to improve outcomes for children and young people with cancer</li> <li>Off all children whole genome sequencing to reduce the use of harmful medications and interventions.</li> <li>From September 2019 all boys aged 12/13 will be offered vaccination against HPV related diseases, including oral and throat cancer</li> <li>Increased match funding for CCGs who commit to increase investment in children’s palliative and end of life care.</li> </ul>	<p>Paras 3.37 3.38 3.40 3.41</p>	<ul style="list-style-type: none"> <li>In the long term – <ul style="list-style-type: none"> <li>possible reduction in number of children requiring SLT support as a result of side effects of cancer treatments.</li> <li>reduction in numbers of HPV-related oral and throat cancers</li> </ul> </li> <li>Raise awareness of value of SLT role in end of life care for children.</li> </ul>
<p><b>Redesigning other health services for children and young people</b></p>		
<ul style="list-style-type: none"> <li>NHS England will create a Children and Young People’s Transformation Programme which will oversee the delivery of the children and young people’s commitments in the Plan.</li> </ul>	<p>Pg 54, para 3.42</p>	<ul style="list-style-type: none"> <li>RCSLT will be seeking to engage with NHS England to inform the development of the CYP Transformation Programme</li> </ul>
<p>New models of care:</p> <ul style="list-style-type: none"> <li>Local areas will design and implement models of care that are age appropriate, closer to home and bring together physical and mental health services. These models will support health development local authority and NHS services including primary care, community services, <b>speech and language therapy</b>, school nursing, oral health, acute and specialised services.</li> </ul>	<p>Pg 55, para 3.44</p>	<ul style="list-style-type: none"> <li>Please contact RCSLT if you can provide examples of models of care which provide holistic care to children and young people across local authority and NHS services: <a href="mailto:caroline.wright@rcslt.org">caroline.wright@rcslt.org</a></li> </ul>

<p>Critical care:</p> <p>Over the next five year, paediatric critical care (and surgical services) will evolve... Paediatric networks which will involve hospitals, NHS staff and patients and their families, will ensure there is a coordinated approach to critical care and surgical services.</p>	<p>Pg 55, para 3.46</p>	<ul style="list-style-type: none"> <li>• Opportunities for SLTs working in paediatric critical care to engage with paediatric networks</li> </ul>
<p>0-25 years services:</p> <ul style="list-style-type: none"> <li>• By 2028 we aim to move towards service models for young people that offer person-centred and age appropriate care for mental and physical health needs, rather than in arbitrary transition to adult services based on age not need.</li> </ul>	<p>Pg 55, para 3.47</p>	<ul style="list-style-type: none"> <li>• Please contact RCSLT if you provide a service model that supports young people through to 25, based on need rather than age: <a href="mailto:caroline.wright@rcslt.org">caroline.wright@rcslt.org</a></li> </ul>

## RESOURCES

- The NHS Long Term Plan is accessible via: <https://www.longtermplan.nhs.uk/>
- The RCSLT analysis of the plan (Feb 2019) is accessible via: <https://bit.ly/2RTUoGr>
- The RCSLT response to the plan (Jan 2019) is accessible via: <https://bit.ly/2DKI7AI>
- The RCSLT consultation response (Sept 2018) is accessible via: <https://bit.ly/2C4dcgm>

For more information, please contact [peter.just@rcslt.org](mailto:peter.just@rcslt.org)