Introduction

Yesterday, the Queen set out the Government’s plans for the next parliamentary session. Areas relevant to people with communication and swallowing needs include:

**Health and social care**
- NHS Catch-up and Recovery Plan, Health and Care Bill, Social Care Reform, Prevention and Mental Health Act Reform

**Jobs and economic recovery**
- Levelling Up

**Criminal justice**

**Education**
- Education Recovery Plan and Early Years Healthy Development Review

**RCSLT comment**

In March 2021, the Royal College of Speech and Language Therapists (RCSLT) published a report on people’s experiences of accessing speech and language therapy during the first UK-wide lockdown (March-June 2020) - *Speech and language therapy during and beyond COVID-19: building back better with people who have communication and swallowing needs.*

This highlights that the identification of and appropriate support for people’s communication and swallowing needs is integral to levelling up opportunities across the UK and building back better.
Speech and language therapists (SLTs), along with other allied health professionals (AHPs), have a crucial role in supporting the national recovery from the pandemic. They also have a central role to play in delivering the Government’s health and wellbeing agenda. They help to protect the health of the nation. They are already embracing innovation and technology, where it is appropriate and beneficial to do so. They ensure patients receive tailored and preventative care, closer to home. They support the health and wellbeing of the nation, including in preventing the development or escalation of mental health difficulties and in supporting people who have mental ill-health. They play a crucial role in social care.

**Legislative and non-legislative proposals**

The RCSLT will work to influence the Government’s legislative and non-legislative proposals in the interests of people with communication and swallowing needs by highlighting how speech and language therapy is integral to the delivery of many of these proposals.

**Health and social care**

**NHS Catch-up and Recovery Plan – what needs to happen**

The RCSLT’s *Building back better with people who have communication and swallowing needs* report recommended that:

- national and local recovery policies must identify and provide appropriate response to an individual’s communication and swallowing needs; and
- speech and language therapy services must be appropriately resourced to ensure that the increase in demand for speech and language therapy (including supporting people with long COVID) can be met and the backlog addressed.

**Health and Care Bill – what needs to happen**

SLTs, and other AHPs, already provide tailored and preventative care, closer to home. It is a shame, therefore, that the Government’s Integration and Innovation White Paper made no specific reference to allied health professionals.
For our experience and expertise to be maximised in the interests of the people we work with and for, and in the interests of the wider health and social care system, it is essential that the Bill mandates that every Integrated Care System should have an AHP lead. It is important that this should be a stand-alone role and not an add-on to an existing role to ensure effective integration.

On children and young people as a distinct group of people with distinct needs, the White Paper is remarkably silent. It is essential, therefore, that as the Bill passes through Parliament this is rectified. Integrated Care Systems should bring together key stakeholders across education, health and care to support joint commissioning and integrated service provision for children and young people.

*Social care reform - what needs to happen*
On social care reform, many people who receive social care may have communication and swallowing needs. It is essential that these needs are identified and supported so people can live well and maximise their independence. It is also essential that the care workforce is appropriately trained on these issues.

*Prevention – what needs to happen*
Similarly, it is essential that prevention policies recognise and maximise the contribution that SLTs and other AHPs can make to enable people to live healthier, longer and more independent lives.

*Mental Health Act Reform – what needs to happen*
It is essential that reform of the Mental Health Act recognises the links between mental health and communication and swallowing needs. It is also essential that:

- communication needs are recognised as a potential barrier to referrals, assessments and therapeutic inputs;
- SLTs are recognised as a core part of the mental health workforce; and
- the law is changed so that SLTs are permitted to train as Approved Mental Health Professionals.
In addition, the RCSLT’s *Building back better with people who have communication and swallowing needs* report recommended that:

- given the clear links between communication and swallowing needs and mental health, speech and language therapy should be recognised as an integral part of the recovery plan for mental health services; and
- SLTs are enabled to play their vital role in protecting and promoting the general mental health and wellbeing of people with communication and swallowing needs, and their family and carers. This could potentially reduce the risk of people then needing to access mental health services.

**Jobs and economic recovery**

*Levelling Up – what needs to happen*

The Queen’s Speech argues that levelling up is about increasing and spreading opportunity; and that it is also about improving health, and education.

As the RCSLT’s *Building back better with people who have communication and swallowing needs* report argued, the identification and appropriate support for people’s communication and swallowing is integral to levelling up.

Significant communication inequalities exist across the United Kingdom. We know, for instance, that while some 10% of children and young people have long-term communication needs, those in areas of social disadvantage are at greater risk. Up to 50% of children in such areas can start school with delayed language or another identified communication need.

There is often unwarranted variation in access to speech and language therapy services. For instance, the Children’s Commissioner for England’s 2019 report *We Need To Talk* found a postcode lottery of spending on speech and language therapy in England. The top 25% of areas spent at least £16.35 per child, while the bottom 25% of areas spent 58p or less per child.iii

*Building back better with people who have communication and swallowing needs* also found variation in access to speech and language therapy during
lockdown. Those in the most deprived areas fared worse in terms of access than those in the least deprived areas.

Given the links between communication needs and education, health and wellbeing, employment, potential involvement in the criminal justice system, and our overall life chances, these needs must be identified and supported. If they are not, levelling up will not be successfully achieved.

**Criminal justice**

*Police, Crime, Sentencing and Courts Bill and Criminal Justice Catch-up and Recovery Plan – what needs to happen*

Given the extensive research on the prevalence of communication needs in the criminal justice system, it is essential that the Police, Crime, Sentencing and Courts Bill and the Criminal Justice Catch-up and Recovery Plan reflect this. It is also essential that input from SLTs is expanded across all community teams.

*Violence Against Women and Girls Strategy – what needs to happen*

During the passage of the Domestic Abuse Act, the Government recognised the links between domestic abuse and communication needs and how they can act as a barrier to reporting abuse and accessing support. It is essential therefore that there is similar recognition in the Violence Against Women and Girls Strategy and in the forthcoming Domestic Abuse Strategy.

*Draft Victims Bill – what needs to happen*

Similarly, it is essential that any victims of crime have any communication needs identified and appropriately supported. Appropriate provision parallel to the Registered Intermediary scheme should be developed to support all vulnerable victims. Otherwise, victims may not be able to access support or take part in justice proceedings.
**Education**

*Education Recovery Plan - what needs to happen*

Given the fundamental role that spoken language plays in education, and the impact that the pandemic has had on some children’s communication skills, support for children and young people’s communication and language development must be central to the Government’s long-term education recovery plan.

The RCSLT’s *Building back better with people who have communication and swallowing needs* report found that during the first lockdown:

- 62% of children and young people had no speech and language therapy at all during lockdown.
- Of those who continued to have speech and language therapy, 81% had less than before lockdown.
- Children and young people said that this was bad for their education (67%), social life and friendships (59%) and mental health (45%).
- In the most deprived areas, a higher percentage had no speech and language therapy than in the least deprived areas; and a higher percentage in the most deprived areas also had less speech and language therapy.

*Early Years Healthy Development Review - what needs to happen*

The Department of Health and Social Care should work collaboratively with stakeholders across the early years sector, including the RCSLT, to ensure the action areas outlined in the review are implemented in a way that delivers the best outcomes for all children and families.

For more information, please contact peter.just@rcslt.org

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iii [https://www.childrenscommissioner.gov.uk/report/we-need-to-talk/](https://www.childrenscommissioner.gov.uk/report/we-need-to-talk/)