**DRAFT LETTER FOR LORDS USE**

The Rt Hon Boris Johnson MP

The Prime Minister

10 Downing Street

London

SW1A 2AA

Date

Dear Prime Minister,

**Building back better with people who have communication and swallowing needs**

I am writing to urge you to support the policy recommendations in the recently published report by the Royal College of Speech and Language Therapists (RCSLT) – *Speech and language therapy during and beyond COVID-19: building back better with people who have communication and swallowing needs*.

The report presents the findings of a survey into people’s access to speech and language therapy during the first UK-wide lockdown (March-June 2020). This revealed that while some people continued to receive speech and language therapy during lockdown and liked the new ways in which they received their therapy, these positive experiences were not shared by all, far from it. Survey respondents said that lockdown had a negative impact on their communication and swallowing, as well as on their access to speech and language therapy, especially in the most deprived areas of England. People said their lives and the lives of their families and carers were made worse because they had less therapy. Additionally, they expressed concerns about being able to access speech and language therapy in the future, and the potential effect of this on their education, social life and friendships, mental health and home and domestic life.

I understand that a broad coalition of over 80 organisations which represent and support people who have communication and swallowing needs has written to you in support of the report. I join them in supporting the RCSLT’s call to action to build back better and level up speech and language therapy services in the following ways.

Firstly, national and local recovery policies must identify and provide appropriate response to an individual’s communication and swallowing needs. Specifically, support for children and young people’s communication and language development should be central to education recovery plans; support for adults’ communication and swallowing should be integral to the restart of rehabilitation services; and 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.

Secondly, speech and language therapy services must be appropriately resourced to ensure that the increase in demand for speech and language therapy services as a result of the pandemic (including those with long COVID) can be addressed; those who have developed a higher level of need due to delays in identification and reduced support during the pandemic can be properly supported; staff who have been redeployed to other parts of the NHS are able to return to their substantive posts as soon as possible; and speech and language therapists are able 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.

I hope that the Government take this opportunity to both address the huge backlog facing services and ensure that building back is not just about catching up, but rather about building back better to secure a real, sustained improvement in the lives of people with communication and swallowing needs and their families and carers.

I look forward to hearing from you.

Yours sincerely,

Name