

# 'The UK Government must build back better, not just build back' Statement on behalf of Dave Harford, Gillian Rudd and the Royal College of Speech and Language Therapists 30 September 2021

## <u>Introduction</u>

As we said in our initial statement in July on the UK Government's response to the #FundSLT petition,<sup>1</sup> we want to thank everyone who made that response possible.<sup>2</sup> We also want to thank all those who have signed and shared the petition since then and continue to do so. We are grateful for your support, thank you.

Having consulted with people receiving speech and language therapy and their families, the charities that work with and represent them, other partners and speech and language therapists, we urge the UK Government to do more to ensure that speech and language therapy services are adequately funded so that everyone who requires them is able to access them. The forthcoming Spending Review and Autumn Budget provides the Government with the perfect opportunity to do that.

While welcome, the Government's response to the petition appears to be focussed on building back to where we were before the pandemic. As Tricia Kemp, Group Coordinator of the Cochlear Implanted Children's Support Group, said to us, 'It seems that this may be 'building back' but not necessarily 'building back better".

### This is not good enough. We must do better.

 For all those people who were not able to access speech and language therapy before the pandemic.

<sup>&</sup>lt;sup>1</sup> Fund improved support for people with communication and swallowing needs - Petitions (parliament.uk)

<sup>&</sup>lt;sup>2</sup> Joint statement on the Government response to the petition | RCSLT

- For all those people who were receiving speech and language therapy, but not getting the amount they and their families needed.
- For those people whose speech and language therapy has been interrupted by the pandemic.
- For all those people who have developed needs since March 2020 or whose needs have worsened in that time, including those with long COVID, a brand new clinical condition.

In short, we must build back better with people who have communication and swallowing needs.

### Overall reflections on the Government's response

We welcome the positive tone of the Government's response, including its welcome for the Royal College of Speech and Language Therapists' (RCSLTs') *Speech and language therapy during and beyond COVID-19*<sup>3</sup> report and its recommendations.

We welcome, in particular, the Government's acknowledgement that what people told us about their experiences is important information that the NHS can consider and utilise.

We urge the Government and the NHS not only to consider people's experiences, but also to act on them. We know what the issues are - people have told us clearly. Many of them pre-date the pandemic. Now is the time finally to address them. Unless we do, as a country we can neither build back better nor level-up - and we cannot address the 'disease of disparity' recently identified by the Secretary of State for Health and Social Care.<sup>4</sup>

The Government should use the opportunity of the forthcoming Spending Review and Autumn Budget to set out a detailed plan for how it proposes to fund improved support for people with communication and/or swallowing needs.

<sup>4</sup> The hidden costs of COVID-19: the social backlog - GOV.UK (www.gov.uk)

<sup>&</sup>lt;sup>3</sup> Speech and language therapy services after COVID-19 | RCSLT

# **Detailed reflections on the Government's response**

Clarity from Government is required in the following areas:

Funding: how much of the quoted £1bn is going to be spent on speech and language therapy services? As Action for Stammering Children said to us, 'it would be useful to receive clarification on how much of the additional £1bn of NHS funding provided by the Government for 2021-22 is allocated to Allied Health Services, especially since we recognise the unprecedented strain on all frontline health services.'

**Recovery:** will recovery of services include addressing the long-standing postcode lottery of access to services in England? The Children's Commissioner for England highlighted this in June 2019 in relation to services for children and young people.<sup>5</sup> RCSLT survey respondents told us it still exists. We know that many adults with certain conditions are not able to access any speech and language therapy at all. People living with dementia told us this while the RCSLT survey was open. Will recovery of services also address the long-standing issues in areas of social disadvantage where we know too many people are at increased risk of communication inequalities? As a partner organisation said to us about children, 'Based on feedback from schools we also noted that children were starting Reception in September 2020 without having had any SALT input or assessments, this really compromised the Code of Practice theme to support early identification and intervention and was most keenly felt in deprived communities.' Again, we know that some minority communities face challenges accessing services. As a partner organisation said to us, 'we would also encourage more feedback to be sought from minority communities on their experiences in accessing services as they may face different challenges or barriers, for example we know that children from minority ethnic background or with English as a second language are less likely to take up formal places in early education settings.'

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<sup>&</sup>lt;sup>5</sup> We need to talk: Access to speech and language therapy | Children's Commissioner for England (childrenscommissioner.gov.uk)

**Access:** are local trusts' plans to recover services and activity only about recovering to the situation in March 2020? Or are they about ensuring that everyone who requires speech and language therapy receives it, solely on the basis of their level of need, including those who were unable to access speech and language therapy before the pandemic? We know that prior to COVID-19 too many people of all ages were not able to access the therapy they need. As one service user said to us, 'the issues with access to speech and language therapy pre-date the pandemic and even with services restored access is inadequate'.

**Recruitment:** allied to the recruitment drive, what plans does the Government have to ensure existing vacancies are filled right now, long-standing issues around staff retention are addressed and that there will be jobs for students once they have completed their training? We know many NHS staff are experiencing burn-out, not solely related to the pandemic.<sup>67</sup> As the Head of a Children's Speech and Language Therapy Service said to us, 'services were holding excessive waiting lists, carrying ridiculous pressures on staff and not delivering a service to the standard they aspired to well before COVID.' While recruitment of more speech and language therapy students is welcome, it is not the whole answer. As a charity partner said to us, 'it's obviously important to train more therapists, but we also need that to be matched by job opportunities as they complete their training.' In addition, recruiting more students will not address issues people have now. Children and young people cannot wait the time it takes to train a speech and language therapist to have their needs identified and supported without potential significant risk to their educational attainment, mental health and long-term life chances. Neither can people recovering from a stroke or living with a progressive neurological condition, such as Parkinson's disease, multiple sclerosis, motor neurone disease, dementia or Huntington's disease, or with cancer or an acquired brain injury.

**Children and young people:** what plans does the UK Government have to ensure that children and young people in England without Education, Health and Care plans

<sup>&</sup>lt;sup>6</sup> NHS workforce: our position | The King's Fund (kingsfund.org.uk)

Well-being, job satisfaction, stress and burnout in speech-language pathologists: A review - PubMed (nih.gov)

(EHCPs) are able to access the speech and language therapy they need? Many children and young people with speech, language and communication needs do not have EHCPs and without appropriate support they are at particular risk of worse educational outcomes. This includes children with speech, language and communication needs as a primary need, such as those who stammer or have developmental language disorder (DLD), as well as those with another type of need, such as a hearing impairment or learning difficulty. As Action for Stammering Children said to us, 'these children are likely to have waited even longer for referrals, disrupting early access to specialist services that are able to meet the needs of this clinical population.' This was echoed by a partner organisation who said to us that due to 'a combination of time out of settings due to lockdowns and limited access to support services we are concerned that children's inability to communicate will be a major factor affecting their wellbeing including challenging behaviour within settings and probably at **home.**' We also know that some children and young people who have EHCPs are unable to access the speech and language therapy they need. We urge the Department of Health and Social Care to discuss with the Department for Education how access to speech and language therapy can be improved for all children and young people who need it, whether they have an EHCP or not, and to ensure that these issues are covered in the forthcoming SEND review. We know from the UK Government's commitments made at the time of the *Bercow: Ten Years On*<sup>8</sup> report and the **Bercow: Ten Years On – 1<sup>st</sup> Anniversary Update**<sup>9</sup> that they want all children and young people to achieve their potential. Now is the time to make that happen for those with communication and swallowing needs and their families.

Adults and older people: what plans does the Government have to improve access to speech and language therapy for adults and older people? As a charity partner said to us, 'There is no recognition [in the Government's response] of adults with learning disabilities and older adults with cognitive communication needs, for example those with dementia, whose communication environments and opportunities have been so disproportionately affected by first the

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<sup>&</sup>lt;sup>8</sup> Bercow: Ten Years On – An independent review of provision for children and young people with speech, language and communication needs in England (bercow10yearson.com)

<sup>&</sup>lt;sup>9</sup> Bercow: Ten Years On – One Year On – Bercow: Ten Years On (bercow10yearson.com)

lockdowns and then the ever-growing crisis in social care. Without access to SLT, (and adequately resourced social care system) there is a massive lack of trained and skilled care staff to support them. Consequently, people are at risk of permanently losing skills, mental health needs, continued health inequalities and abuse. The provision of SLT as part of the AHP services needs to be thought of within a holistic solution to the social care crisis, and rebuilding of communities - not as an isolated issue for only 'health' or 'education'.' Going forward, it is also critically important that people with communication and/or swallowing needs have the support they require referenced and catered for in all relevant adult policies, including in the Government's and NHS England's work on rehabilitation and mental health reform.

Mental health: what plans does the Government have to ensure that speech and language therapists are recognised as core to the mental health workforce, including both in children and young people's mental health services and in adult mental health services? The Speech and language therapy during and beyond COVID-19 report made specific recommendations on mental health. The Government's response to the petition has not addressed these. As a charity partner said to us, emphasis on wellbeing and mental health services is important, as the condition can have a big impact on these areas, causing cognitive and mental health problems, in addition to the emotional / psychological impact. So, for the people we work with, we would very much welcome and support this as being something which could potentially bring them huge benefits.'

### Next steps – what needs to happen

People who filled out the RCSLT's survey on access to speech and language therapy during COVID-19 between November 2020 and February this year were clear. The 83 charity partners and other organisations who wrote a letter to the Prime Minister about the survey findings in March<sup>11</sup> were clear. Every single signatory to the #FundSLT petition since it was tabled in June has been clear.

<sup>&</sup>lt;sup>10</sup> Policy-implications.pdf (rcslt.org)

<sup>&</sup>lt;sup>11</sup> Speech and language therapy services after COVID-19 | RCSLT

Speech and language therapy transforms lives, but access to it must be improved. One of the key ways of achieving that is by improving funding for services.

Therefore, the UK Government should use the opportunity provided by the forthcoming Spending Review and Autumn Budget to set out a comprehensive plan for how speech and language therapy services are going to be adequately funded so that everyone, whatever their age, whatever their background, whatever their postcode, is able to access them. Only in that way can the Government ever hope to achieve its aims of building back better and levelling up with people who have communication and swallowing needs and their families - and finally addressing the 'disease of disparity' that too many of those individuals and families have faced for far too long.

We stand ready to work with the Government and any and all interested parties to help make that happen. To give the Government a platform for explaining how it is going to improve the lives of people of all ages with communication and/or swallowing needs, we urge everyone to continue to sign and share the #FundSLT petition so it secures 100,000 signatures before 9 December. It will then be considered for a debate in Parliament.

The petition can be signed and shared on this link: <a href="https://petition.parliament.uk/petitions/587872">https://petition.parliament.uk/petitions/587872</a>

As a parent said to us, 'I want my son to be independent and surely a greater independence in the future will see him be less of a burden on the care system then.'

We agree; and that fundamental message is relevant to anyone and everyone with communication and/or swallowing needs, whatever their age, whatever their background, or wherever they live. Together, let's bring it about.

For more information, please contact:

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