

**Getting it right for communication - right support, right place, right time:
our response to the Department for Education's SEND Review Green Paper
July 2022**

"We know how important it is for children and young people to access the speech and language therapy that they need, and that the right funding is fundamental to that."

[Will Quince MP, November 2021 \(PDF\)](#)

"The government recognises that the current SEND system does not deliver the outcomes we want and expect for all children and young people with SEND, their families or the people and services who support them. The SEND Review is seeking to improve the outcomes for children, with high expectations and ambitions, and is looking at ways to support mainstream settings to identify and get support to children and young people more quickly, through making best use of precious expertise such as speech and language therapists. These issues are long-standing and complex, but the government is determined to deliver real, lasting change."

[Will Quince MP, January 2022](#)

We welcome the Government's recognition that the system is not working and that change is needed. There are proposals in the SEND Review Green Paper which could help. But its scale and ambition are nothing like sufficient. For children and young people with communication needs to get the right support, in the right place, at the right time, the Government needs to take action urgently in six key areas:

- funding;
- workforce;
- joint commissioning;
- early intervention;
- accountability; and
- professional development.

To get it right for children and young people with special educational needs and disabilities (SEND), we must get it right for communication. If we don't, we will fail many children and young people with SEND. We must not allow that to happen. Now is the time finally to get it right for communication.

Why getting it right for communication is crucial

[As the Green Paper highlights, speech, language and communication needs are the most common type of primary need – representing almost a quarter \(23%\) of all children and young people with SEND. It is the second most common type of need for pupils with education, health and care plans.](#) Children with speech, language and communication needs include those with developmental language disorder, a speech sound disorder or a stammer.

But more than that – many of the children with other types of SEND will also have communication needs that require additional support – be that autistic children, those with learning difficulties, hearing impairments, or social, emotional and mental health needs, or those with needs resulting from a rare disease or genetic condition. It can also include those with cerebral palsy or those who use augmentative and alternative communication.

To get it right for children and young people with SEND, we must get it right for communication. If we don't, we will fail the majority of children and young people with SEND. And we know what the consequences of that will be for them and their families – and the impact it will have on their wellbeing and mental health, their health outcomes, their education, their home and family life, their social life and friendships, their employment prospects, their life chances and the risks of them becoming involved in the criminal justice system. We also know the consequences for wider society – on health inequalities, on inequalities more generally, and on hard-pressed public finances when false economies have meant more money needs to be spent down the line because issues were not identified and responded to at an earlier stage.

Getting it right for communication also means getting it right for those children and young people – the vast majority of those with communication needs - who do not have the statutory protection of an Education, Health and Care Plan (EHCP), but instead rely on Special Educational Needs (SEN) support. If we don't get it right for them, we will be failing the vast majority of children with speech, language and communication needs.

Although throughout this statement we focus on speech, language and communication needs as one of the Department for Education's primary category of needs, it is important to note that some children and young people with SEND will also have swallowing needs. It is essential that they and their families also receive the speech and language therapy support

they require. So we must also get it right for children and young people with eating, drinking and swallowing difficulties.

Enablers of success: what needs to happen and how it needs to happen

What needs to happen

From our conversations with parents, organisations representing children and young people, charity partners and speech and language therapists we have identified six enablers of success to delivering the right support, in the right place, at the right time.

How it needs to happen

We call on the Government to work with us, with relevant charity partners and other organisations, and with children and young people who have communication needs, and their families and carers, to deliver the six enablers of success.

Getting it right for communication is everybody's business. So together, let's seize the opportunity the SEND Review Green Paper gives us to improve the lives of all children and young people with SEND and their families. They deserve nothing less.

Funding

What we've heard from parents and carers

"Our local speech and language therapy service is not fit for purpose. They don't have the resources to adequately support children. It's reached crisis point as the service has discharged hundreds of children with severe speech and language difficulties."

"It needs to be properly funded so people and services aren't just playing hot potato with the kids all the time."

"More money! Especially if the government genuinely wants SEND children to survive and thrive in mainstream."

What we've heard from speech and language therapists

"The impact of budgetary restrictions is the elephant in the room. There are large numbers of children and young people who are not eligible for services they desperately need because the referral threshold has been changed in order to avoid overspend."

"Services have been diluted down to the point where many children miss out on intervention altogether because the threshold for input is so high, and the intervention that some do receive is so little that it's not enough to make a meaningful difference or improve the outcomes of children and young people."

“There is a huge lack of funding in local authorities, schools, health and NHS services.”

“All services are severely, chronically underfunded. The SEND process will never work without realistic cost analysis and investment.”

“Therapists are having to slim down services to fit the increasing commissioning cuts with the rapidly increasing needs for services, in part related to the pandemic and in part related to the effects of the austerity measures of the past decade or so and the effects of widening societal inequalities.”

“The funding that currently goes into tribunals would be much better spent meeting children and young people’s needs in the first place.”

As the Children and Families Minister, Will Quince, stated in his response to [a letter to the Prime Minister and Chancellor from over 20 All-Party Parliamentary Groups ahead of last year’s Budget and Spending Review \(PDF\)](#), [“We know how important it is for children and young people to access the speech and language therapy that they need, and that the right funding is fundamental to that.” \(PDF\)](#)

We agree. But for too long, too many speech and language therapy services have not been funded in the way that they need to be to meet the needs of their local populations. It is not just us saying that.

[In 2017, Ofsted and the CQC found that \(PDF\)](#):

“Too often, therapy services were too overstretched to deliver what was needed in their local areas. In nearly all local areas where inspectors identified access to therapy services as a weakness, it was because of this. Typically, services were being reduced because of challenges to funding and difficulties in filling vacant posts. This funding did not keep up with the rising number of referrals. This led to unacceptably long waiting times for the children and young people and their families.”

In the five years since, the situation has only worsened with [services’ ability to meet need being significantly impacted since the pandemic](#). Data that is emerging on children’s early language and communication skills suggests that the level of need is only likely to increase in the next five years. [Latest figures published by the Office for Health Improvement and Disparities](#) found that, of the children who received a two-to-two-and-a-half year review during the period October – December 2021, only 85.3% met the expected standard for communication and language. [The average for the previous 14 quarters was 88.1%.](#)

One service has told us that there has been a 25% increase in their number of referrals in comparison with their pre-COVID referral rate. They now have 1000 extra children on their caseload compared with 2019. All this at a time when the public purse is under pressure.

Action required: funding for speech and language therapy services must be improved, both locally and nationally.

This must include:

- **commissioners allocating sufficient funding to enable services to identify, assess and meet local needs. This includes funding and specifying that services should work in ways which:**
 - **support prevention and early intervention, including for children and young people on SEN support, and through working with families and the wider workforce.**
 - **ensure speech and language therapy for those children and young people who need it longer-term;**
 - **ensure support for those with low incidence, high need conditions or those who require specialist support, such as augmentative and alternative communication.**
- **Government providing sufficient funding both for commissioners to do this and for the wider system that supports children and young people, including local authorities, early years providers, schools and colleges.**

Workforce

What we've heard from charity partners – STAMMA

“We've been informed about specific NHS Trusts where highly specialist speech and language therapists working with children who stammer are not being replaced on retirement. We can only assume that such decisions are the result of funding and workforce challenges. But such decisions can have huge, detrimental effects on children who stammer and their families coming into those services, as the service slowly loses its specialist knowledge and developing therapists have no specialist to learn from or oversee their work. The loss of specialisms is the loss of knowledge and expertise.”

What we've heard from speech and language therapists

“Local demand is outstripping local supply and we cannot fulfill all requests due to recruitment issues. Schools are not even able to commission independent SLT due to lack of capacity.”

“Paediatric health services are already working beyond capacity, coping with increasing referrals and complexity of need, higher staff turnover, sickness (and COVID) and workforce issues. To ensure high quality provision, staffing resource, expertise and future workforce need to be considered.”

“There is a desperate shortage of therapists. Unless workforce and skills shortages are addressed these policies are going to be pointless.”

“Therapists are burning out. After working for a few years the relentlessness of service shortages mean they end up leaving. This isn’t sustainable and something needs to change before the profession breaks altogether.”

“Even recruiting into newly qualified posts in some areas is difficult.”

“There are new innovations in speech and language therapy for vulnerable young people. For example, in CAMHS (child and adolescent mental health services), for care-experienced children, violence reduction units, Liaison and Diversion that result in many new contracts for specialist staff that would have a big impact, but they are unable to be recruited to.”

Services need to be able to recruit specialist staff to fill vacancies. But there is currently a serious shortage of available speech and language therapists, with NHS services, schools and independent practices all struggling to recruit.

This has not happened overnight. [For too long, workforce planning in England has not been fit for purpose \(PDF\)](#). This has resulted in speech and language therapy becoming a profession in short supply, as acknowledged in the [NHS Long Term Plan \(PDF\)](#) and in the [Department for Health and Social Care arguing that speech and language therapists should be added to the Shortage Occupation List because the profession is facing a range of pressures including increasing demand \(PDF\)](#).

Specifically on children and young people, the Government have failed for many years to plan for a therapy workforce that meets the needs of the SEND system that crosses health and education boundaries. Indeed, the [Department of Health and Social Care has recently admitted that it has had no specific discussions with the Department for Education on workforce planning for healthcare professionals who work in education settings](#).

We welcome the proposal in the Green Paper to build a clearer picture of demand for the therapy workforce. It is essential that this work is taken forward urgently, if the changes to the SEND system are to be delivered within the next five years.

And more is needed. Speech and language therapists need to be trained, recruited, retained and crucially have their skills developed so they are able to develop clinical specialisms and undertake leadership roles.

Action required: Government must ensure effective workforce planning and the recruitment, training, retention and skills development of the speech and language therapy workforce, supporting the development of clinical specialisms and leadership. It must work closely with all relevant professional bodies and organisations to deliver this important work.

Joint commissioning

What we've heard from speech and language therapists

“Speech, language and communication needs overlaps areas of health and education in ways that are impossible to pull apart neatly to fit with one service.”

“Joint commissioning would help mitigate this as an area of conflict between health and education.”

“Speech and language therapy commissioning continues to be a total mess. ‘Joint commissioning’ is the recommendation from every review, but it rarely happens at a local level. There needs to be a long-term national plan for provision, involving joint planning at departmental level. If adequate long-term speech and language therapy was available at SEND support this would reduce the number of tribunals too.”

Local systems need more support to understand and implement strategic joint commissioning. They also need to be monitored. They need to be held accountable when they are not commissioning services in a joined-up way. Again and again we hear that joint commissioning is the solution to the gaps in provision, but it is happening in too few areas. Currently, the SEND Review represents a huge missed opportunity to drive this forward.

Action required: joint commissioning must be improved and where it is not happening local areas must be held to account. In its response to the consultation, the Government must set out how it proposes to do this, including in the new Integrated Care Systems.

Early intervention

What we've heard from parents and carers

“Unless you get early intervention you are creating issues for the future that could have been easily avoided with the correct amount of support at an early age... if I hadn't taken charge (and had the ability to go private) [it] would have cost FAR more financially and to society as a whole than frontloading the required support for 3-4 years when needed.”

“Access to speech and language therapy is crucial. Therapy affects children's life chances and mental health. Fail now and the impact and ongoing service need is catastrophic.”

What we've heard from charity partners – STAMMA

“Stammering in children and young people is a risk factor for mental health difficulties such as anxiety and depression. For young children who stammer, early intervention, particularly with support and information for the adults around the child, can be vital in ensuring that children grow and develop into confident, effective communicators. On our helpline, we hear all too often from desperate parents, who are seeking guidance on how they can best support their child, yet are waiting 12 months or more for an initial consultation with their local speech and language therapy service.”

What we've heard from charity partners - CLAPA

“SEN supported children and young people are a lost patient group, which many cleft patients fall under.”

What we've heard from speech and language therapists

“On multiple occasions I've worked with young people and families who have told me if only their communication difficulties had been picked up earlier then they wouldn't have spent years being passed around other health, education and social care services. Some ending up admitted to psychiatric wards, some ending up detained in police custody. They tell me they'd have been able to get on with their education and achieve what they wanted to in life.”

“For many local authorities the criteria for an EHCP application is a severe speech, language and communication need that education settings are struggling to support - children shouldn't be left to struggle to this point to receive support.”

Too many services are commissioned only to provide support for children and young people with an education, health and care plan. This must change. Services must be commissioned to work in ways which support prevention and early intervention. It is important to recognise

that early intervention doesn't end in the pre-school years. It spans the whole age-range from 0-25.

In particular, speech and language therapy must be available to children and young people on SEN support in all areas. Too often it is not.

Providing timely speech and language therapy to children and young people on SEN support may mean some of them will not need an EHCP. It should result in improved outcomes for the child, a better experience for the family, and reduced pressures within the wider system.

In January 2022 Minister Quince said that the review would be ["looking at ways to support mainstream settings to identify and get support to children and young people more quickly, through making best use of precious expertise such as speech and language therapists."](#)

Unfortunately, the Green Paper proposals do not deliver on this aspiration.

Action required: the Government must enable service transformation to ensure that all services deliver evidence-based care across the continuum of universal, targeted and specialist support, delivering improved outcomes for children and young people.

Accountability

What we've heard from parents and carers

"Improve accountability."

"No meaningful attempt to address accountability issues."

"accountability for making sure kids are achieving their potential"

What we've heard from charity partners – CICS Group

"All too often, frontline SaLTs are put in positions where their professional judgements and practice are compromised by the needs of the system: children discharged from service before needs are met, therapy blocks cut short...A robust mechanism for defending professional SaLT judgements is needed."

What we've heard from speech and language therapists

"A robust joint commissioning and outcomes framework needs to be in place, with clear expectations on responsibility and accountability of partner agencies."

“This Green Paper does not place enough emphasis on accountability.”

“Making local areas accountable will drive up quality far more than local area SEND inspections have.”

“To help improve accountability, health commissioners must themselves be trained in children and young people’s speech, language and communication needs – they are so often a hidden disability that unless commissioners themselves recognise and understand them it is not clear they will actually commission the appropriate services.”

There needs to be increased accountability across all parts of the system. Local authorities must be held accountable if they fail to uphold the law. Health commissioners must be held accountable if they fail to commission services. Historically, children and young people with SEND have not been a priority for health commissioners. That must change.

The passage of the Health and Care Act, with its requirement to address the needs of children and young people, provides an opportunity bring about that change.

Action required: the Government must ensure that accountability for health goes beyond the promised statutory guidance for Integrated Care Boards on SEND. The Government must strengthen the requirement to jointly commission services for all children and young people with SEND in their population.

Professional development

What we’ve heard from parents and carers

“Every year we have to explain to teachers what developmental language disorder is and how it impacts my son. And every year my son struggles in the classroom because his EHCP isn’t being followed by teachers... teacher training around SEND issues needs to drastically improve”

“Excellent teacher training means absolutely nothing when every year I have to explain to teachers that they need to read and follow my child’s EHCP. Teachers need to know how to support SEND children in their classrooms.”

What we’ve heard from speech and language therapists

“So many professionals who come into contact with young people with SLCN have never even heard of communication issues let alone know how to support them. This even includes key people like social workers and the police, where if they don’t support

communication in their interactions these children end up in horrific situations that could so easily be prevented.”

“Every professional who comes into contact with children and young people regularly and significantly must be trained in SLCN – especially those who work with vulnerable children, such as those who are care-experienced, those who are accessing CAMHS services, those who are victims of domestic abuse, and those in touch with liaison and diversion and youth offending services.”

“A commitment to SLCN content in all initial teacher training is imperative.”

Another significant barrier that remains is training for the children’s workforce, including staff in education and social care. It is evident from what we have heard from parents and carers and speech and language therapists that current training is not equipping education and social care staff with the skills they need to identify and support pupils with SEND. [Early careers teachers have themselves identified supporting children with SEND as one of their main development priorities.](#)

Action required: the Government must ensure that those working in education, health and social care are equipped with the knowledge and skills to understand how to develop children’s language and communication skills, identify children and young people who struggle with their speech, language and communication, and know what they can do to support them.

What else needs to happen

In addition to these key areas, we believe more needs to happen. The Government needs to give more detail. It needs to ensure a more joined-up approach. It needs to listen more.

More detail needed

Many of the proposals have the potential to improve the system, if accompanied by the actions described above. But they also come with significant risks, and could actually make families’ experiences worse if they are not implemented carefully. For example, national standards could skew service provision or drive down standards in areas that are currently performing well. More detail is needed before a judgement can be made on whether many of the proposals in the Green Paper should be supported or opposed.

More join-up needed

If the Green Paper is to be effective in creating positive change, it is essential that reforms are implemented in a joined-up way. This should include join up with other developments in the Department for Education, such as the plans set out in the Schools White Paper and guidance on behaviour in schools. It should also include collaboration with other departments and agencies such as NHS England and the Department of Health and Social Care, including the Office for Health Improvement and Disparities, and its forthcoming Health Disparities White Paper, given the links between communication needs and wider inequalities that affect opportunities and life chances.

More listening needed

The Government must also listen more closely to the voices of children and young people and their parents and carers – and to the voices of the professionals working with and supporting them - if the totality of the reforms to the SEND system are to work. This includes, for instance, listening to their views on mediation and on the choice of schools. The Government must also listen to the voices of speech and language therapists – the specialists in this area who are keen and stand ready to show how they can achieve high impact at relatively little cost.

Getting it right for communication: our pledge

The challenges and opportunities open to us are encapsulated in these two quotes.

The first is from our charity partner, CLAPA.

“The collaboration and integration between health and education are vital in order for all children to reach their potential (a key element of EHC Plans). In addition, without appropriate and timely early intervention the cost for ongoing speech and language therapy input will increase. The earlier speech and language therapy is accessed the greater potential for change thus reducing the long-term cost to both health and education.”

The second is from a parent.

“I would like the opinion of parents to be more valued and listened to. Too often services that are meant to be helping us and our children are putting up barriers when all we want is the best for our children. If local authorities and health services spent more time investing in services and worked with parents, as opposed to against them, the SEND system would be a much better system for everyone involved. On the subject of things being joined up, speech and language therapy is the perfect example of something that isn't.

Health will argue it's an education issue, education will argue it is health and all that happens is a lack of investment and focus on the people they're supposed to be helping. It's a vicious circle and all the while, NHS and local authorities are not talking to each other and if they are, they are not involving the parents in these conversations. It's disjointed and needs a severe overhaul. Things need to change and it won't change until parents are listened to!"

All of us want to see children and young people with communication needs and their families get the right support, in the right place, at the right time. We pledge to do all we can to help bring that about.

But we cannot do it alone. We need the Government to act. And to act in the ways we have identified. And to do so by working together with children and young people and their families, with the organisations that represent them, and with speech and language therapists and other professionals. History has shown us the price that we all pay - a price paid most heavily by children and young people and their families and carers - if we get it wrong for communication. So, finally, this time, let us get it right for communication.

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