

## **RCSLT submission to the Labour National Policy Forum**

### **A future where families come first**

#### **How can the next Labour government ensure all young children enjoy a childhood that enables them to thrive?**

- Communication is a fundamental life skill. In order to thrive, young children need to be supported to develop speech, language and communication skills.
- Evidence demonstrates the impact of early language development on a range of outcomes in childhood and later life:
  - School readiness: Children's vocabulary and ability to talk in two-to-three word sentences at the age of two is a strong predictor of school readiness at four.
  - Educational attainment: Children with poor spoken language at five are 6 times less likely to reach the expected standard in reading and writing at 11.
  - Wellbeing and life chances: Children with poor vocabulary skills at age five are three times as likely as their peers to have mental health problems in adulthood, and twice as likely to be unemployed.
- Children living in areas of socio-economic disadvantage are at greater risk of having poorer language and communication skills - and therefore poorer literacy and numeracy, and poorer long-term outcomes.
- In order for young children to develop the language and communication skills that enable them to thrive, the following things need to happen:
  - All professionals working with children need to be 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.
  - In the early years, multi-disciplinary teams embedded in settings which are welcoming and accessible to all families, providing high quality universal support, plus targeted interventions and outreach to those families that need it.
  - Access to the specialist workforce – including speech and language therapy – for those children and young people who need specialist support to thrive. The RCSLT is a member of the #SENDInTheSpecialists coalition – a group of over 125 organisations – calling for investment in and improved planning of the specialist workforce for children and young people, including those with special educational needs and disabilities (SEND).
  - Recognition across the education system that spoken language and communication skills are at the heart of developing and improving literacy and numeracy, with a sustained focus across all ages and stages of education, from early years, through primary and secondary school.

## **About the RCSLT and speech and language therapy**

- The Royal College of Speech and Language Therapists (RCSLT) is the professional body for speech and language therapists working across the United Kingdom.
- Speech and language therapists work with people of all ages - from babies, children and young people, to working age adults and older people – who have speech, language and communication needs and/or have difficulties with eating, drinking and swallowing.
- Speech and language therapists have specialist knowledge and skills regarding children's speech, language and communication development, which mean they also have a key role in enabling universal approaches to supporting speech and language development for all children, and planning targeted interventions for those at increased risk.
- They promote a better quality of life, supporting children and young people to access and engage with education, supporting people to gain, retain or return to employment, as well supporting people with life-long, long-term and acquired conditions. They help people achieve their potential in school, work and life, helping them to live the lives they wish to live.

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### **Public services that work from the start**

#### **Summary**

1. The Royal College of Speech and Language Therapists (RCSLT) is the professional body for speech and language therapists working across the United Kingdom.
2. Speech and language therapists work with people of all ages - from babies, children and young people, to working age adults and older people who have speech, language and communication needs and/or have difficulties with eating, drinking and swallowing.
3. They promote a better quality of life, supporting children and young people to access and engage with education, supporting adults to gain, retain or return to employment, as well supporting people with life-long, long-term and acquired conditions. They help people achieve their potential in school, work and life, helping them to live the lives they wish to live.

4. This submission highlights some priority areas where action is needed so people with communication and/or swallowing needs and their families can get the support they need to lead better lives.

## **Mental Health**

5. A high proportion of people presenting to mental health services may have speech, language, communication needs and/or difficulties with eating, drinking and swallowing.<sup>i</sup>
6. Communication needs are a barrier which prevent people from accessing mental health services. This affects people's recovery, and their wider health and wellbeing.
7. Every part of the mental health pathway requires language and communication, from assessment, to treatment, to language-based psychological therapies, all of which require significant understanding and expressive language skills.
8. The expansion of the mental health workforce must recognise speech and language therapists.
9. The draft Mental Health Bill apply must take account of speech, language and communication needs and eating, drinking and swallowing difficulties.
10. Speech and language therapists much be permitted to train as an approved clinician and a responsible clinician (RC). This will support better workforce planning and the professional development of speech and language therapists.

## **Workforce**

11. Speech and language therapy is a profession in short supply, as recognised in the NHS Long-Term Plan and by the Department of Health and Social Care in its submission to the Migration Advisory Committee's Full Review of the Shortage Occupation List.<sup>ii</sup>
12. There are not enough speech and language therapists to meet current and future demands (even though more students than ever are being trained), and

improved workforce planning must be matched by investment in a specialist workforce.

13. There have been long-term failings in workforce planning in England, it does not cover all the settings in which speech and language therapists work (eg schools and the justice system) or the range of their employers, instead being focussed on health settings and NHS employers.
14. The RCSLT is a member of the #StrengthInNumbers coalition calling for a national workforce strategy based on an independent assessment of how many health and social care staff we need now and in future.<sup>iii</sup>
15. The RCSLT is also a member of the #SENDInTheSpecialists coalition – a group of over 125 organisations – calling for investment in and improved planning of the specialist workforce for children and young people as part of the Special Educational Needs and Disabilities and Alternative Provision Improvement Plan.<sup>iv</sup>

### **Independent prescribing responsibilities**

16. We are calling on the UK Government to use the powers it has under the Medicines and Medical Devices Act (2021) to extend independent prescribing responsibilities to dietitians, occupational therapists, orthoptists, diagnostic radiographers, and speech and language therapists where it is safe and appropriate to do so within the scope of their professional practice.<sup>v</sup>
17. This will support better and more timely care for our patients, reduce pressure on other healthcare professionals, such as GPs, and on the wider health and care system.

### **Community rehabilitation**

18. The RCSLT is a member of the Community Rehabilitation Alliance.<sup>vi</sup> We are calling for equal access to high quality community rehabilitation services for all.
19. To ensure that everyone who would benefit from rehabilitation receives it:

- speech and language therapy within rehabilitation services must be fully staffed and resourced - this should be as part of a national rehabilitation workforce plan;
- rehabilitation services need to be therapy-led with national data collection to capture impact;
- speech and language therapists must be located where they can have the most impact, and enabled to deliver interventions focused on people's needs not just individual conditions; and
- every Integrated Care System must include a named rehabilitation lead.

### **Health inequalities**

20. RCSLT is a member of the Inequalities in Health Alliance.<sup>vii</sup>
21. The IHA are a grouping of over 230 organisations calling for a cross-government strategy to reduce health inequalities.

### **Support for vulnerable children**

22. Vulnerable children – including children experiencing neglect or abuse, those living in homes where domestic abuse is taking place, and children in the care system - are at high risk of experiencing speech, language and communication needs (SLCN).
23. Without support, these difficulties can compound the child's vulnerability, putting them at increased risk of mental health difficulties, exclusion from school and involvement in the criminal justice system.
24. To enable vulnerable children to thrive:
  - a. All staff who work in services for vulnerable children should receive training to enable them to identify and support SLCN.
  - b. Speech and language therapists should be embedded within or readily available to all relevant services for vulnerable children and young people.
  - c. All youth justice teams must contain speech and language therapists.

### **Support for children and young people with SEND**

23. In order for children and young people with special educational needs and disabilities (SEND) to thrive, we must get it right for communication. If we don't, we will fail the majority of children and young people with SEND.
24. For children and young people with communication needs to get the support they need, action is needed to:
- Increase funding for local speech and language therapy services
  - Monitor and improve joint commissioning arrangements
  - Support services to deliver earlier intervention
  - Increase accountability across the system for children without education, health and care plans
  - Equip education staff with the knowledge and skills to identify and support children with SLCN
25. In addition, the actions detailed above in relation to workforce will be crucial to enabling children and young people with SEND to thrive.

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<sup>i</sup> [https://www.rcslt.org/wp-content/uploads/media/docs/Talking-about-mental-health\\_-\\_communication-and-swallowing-needs---FINAL---May-2020.pdf](https://www.rcslt.org/wp-content/uploads/media/docs/Talking-about-mental-health_-_communication-and-swallowing-needs---FINAL---May-2020.pdf)

<sup>ii</sup> <https://www.rcslt.org/wp-content/uploads/2022/02/RCSLT-Report-Stage-briefing.pdf>

<sup>iii</sup> <https://www.rcplondon.ac.uk/news/over-100-health-and-care-organisations-call-staffing-forecasts-nhs-long-term-workforce-plan>

<sup>iv</sup> <https://www.rcslt.org/news/sendinthespecialists-coalition-writes-to-minister-for-children-and-families/>

<sup>v</sup> <https://www.rcslt.org/news/prescribingnow-campaign-launched/>

<sup>vi</sup> <https://www.rcslt.org/policy/england/community-rehabilitation/>

<sup>vii</sup> <https://www.rcplondon.ac.uk/projects/inequalities-health-alliance>