The Times Health Commission:
Submission from the Royal College of Speech and Language Therapists

About the Royal College of Speech and Language Therapists (RCSLT)

1. The Royal College of Speech and Language Therapists is the professional body for speech and language therapists working across the United Kingdom. The RCSLT currently has around 20,000 members. We promote excellence in practice, provide leadership, set professional standards and influence health, education and justice policies.

GPs and pharmacists

2. To help reduce pressure on GPs and other health professionals, and to ensure more timely and better patient care, the Royal College of Speech and Language Therapists, the British Dietetic Association, the Royal College of Occupational Therapists, the British and Irish Orthoptic Society, and the Society of Radiographers are calling on the Government to use the powers it has under the Medicines and Medical Devices Act 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 our professional practice.

3. For more information see: https://www.rcslt.org/news/prescribingnow-campaign-launched/

Social care

4. Issues reported by speech and language therapy managers in England include:
   a. issues with discharging people with swallowing issues as social care crisis creating issues in terms of willingness of staff to prepare modified foods;
   b. failed discharges as people go back to their place of residence/care home and are coming back in again;
   c. people being discharged needing intensive rehab;
   d. allied health professions’ advice provided to social care colleagues. Lack of availability of nursing and social care colleagues to deliver speech and language therapy interventions; and
   e. the need more community rehabilitation and community provision, more focus to prevent cycle of hospital admission.

5. The RCSLT is a member of the Community Rehabilitation Alliance, a collective committed to improving commissioning, planning and delivery of rehabilitation. The alliance includes 50 charities and professional bodies who are working to deliver effective, person-centred community rehabilitation services to all those who need them.

6. For more information see: https://www.rcslt.org/policy/england/community-rehabilitation/
Hospitals

7. Speech and language therapists have an important role to play in urgent and emergency care. They can help to prevent admissions to accident and emergency departments and support early discharge and patient recovery.

8. We were pleased to see speech and language therapists referenced in NHS England’s January 2023 plan - *Delivery plan for recovering urgent and emergency care services* - along with other allied health professionals who play a critical role in keeping patients out of hospital and safe in their communities.

9. We were disappointed that *Delivery plan for recovering urgent and emergency care services* did not recognise the full extent of the role we can play.

10. For more information on the role of speech and language therapy in critical care see: [https://www.rcslt.org/speech-and-language-therapy/clinical-information/critical-care/](https://www.rcslt.org/speech-and-language-therapy/clinical-information/critical-care/)


Workforce — including recruitment, retention and training

12. 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.¹

13. 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.

14. 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 focused on health settings and NHS employers.

15. 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.²

16. 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.³

17. To address these workforce planning failures and to ensure recruitment, retention and training, the following is necessary:
   - improved workforce planning
   - improved funding
   - a national workforce plan must be accompanied by sufficient funding to support recruitment, retention and continuing professional development
• train more students
• retain and develop the workforce – including:
  i. identifying and addressing why speech and language therapists are leaving the profession completely
  ii. removing barriers preventing speech and language therapists being able to develop their skills

18. For more information see our newly published report on workforce planning in England:

Cancer

19. Speech and language therapists assess, diagnose, and treat swallowing, voice and communication difficulties arising as a result of cancer.

20. In accordance with National Institute for Health and Care Excellence (NICE) guidelines, the speech and language therapist is a named core member of the multidisciplinary team for head and neck cancer, neuro-oncology, critical care and paediatrics and young adults.

21. While head and neck cancers make up a significant proportion of the speech and language therapy caseload, it is not a homogenous group; people with various cancers including, but not exclusive to, lung, brain, oesophageal, haematological and patients with metastatic disease are also referred.

22. There is emerging evidence demonstrating the need for more frequent speech and language therapy screening and intervention of patients with lung and oesophageal cancer.

23. Speech and language therapists could better support people with cancer across a range of areas:
   a. priorities over the next decade
   b. raising awareness of the causes of cancer and how it can be prevented
   c. raising awareness of the signs and symptoms of cancer
   d. how to get more people diagnosed quicker
   e. how to improve access to cancer treatment and improve people’s experiences of cancer treatment
   f. how to improve after-care and support services for people and their families
   g. improving data and translating research into practice


Mental health

25. A high proportion of people presenting to mental health services may have speech, language, communication needs and/or difficulties with eating, drinking and swallowing. iv

26. Communication needs are a barrier which prevent people from accessing mental health services. This affects people’s recovery, and their wider health and wellbeing.
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.

The expansion of the mental health workforce must recognise speech and language therapists.

The draft Mental Health Bill apply must take account of speech, language and communication needs and eating, drinking and swallowing difficulties.

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.

For more information on the 10 year plan to improve mental health see: https://www.rcslt.org/news/rcslt-responds-to-evidence-call-for-10-year-plan-to-improve-mental-health/

For more information on the draft Mental Health Bill see: https://www.rcslt.org/news/rcslt-responds-to-draft-mental-health-bill/

Health inequalities

There are important links between health inequalities and speech, language and communication needs, and difficulties with eating, drinking and swallowing difficulties.

The RCSLT is concern that the Government is losing focus on health inequalities and will not now publish the promised Health Disparities White Paper.

To contribute to tackling health inequalities we are calling for:

a. recognition that addressing health inequalities will mean being clear and identifying the unmet need in society for SLT as well as those people already in waiting lists; and

b. speech and language therapists are supported by their Trusts and in their ICSs to address health inequalities.

RCSLT is a member of the Inequalities in Health Alliance (IHA). The IHA is a grouping of over 230 organisations calling for a cross-government strategy to reduce health inequalities.

For more information see: https://www.rcslt.org/learning/diversity-inclusion-and-anti-racism/addressing-health-inequalities/

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5 https://www.rcplondon.ac.uk/projects/inequalities-health-alliance