

**The Royal College of Speech and Language Therapists in Wales Submission to the Welsh Affairs
Select Committee: Prison provision in Wales**

1. Introduction

- 1.1. The Royal College of Speech and Language Therapists (RCSLT) in Wales welcomes the opportunity to respond to the Welsh Affairs Select Committee inquiry on prisons in Wales. We are responding specifically to point 5 within the terms of reference – is the Welsh prison estate fit for provision of education and rehabilitation facilities for Welsh prisoners?
- 1.2. There is a high prevalence of speech, language and communication needs (SLCN), and swallowing needs amongst people in the criminal justice system – the subject of a recent one-day inquiry by the Senedd Equality and Social Justice Committee. Given the links between these needs and a person’s ability to access and benefit from verbally mediated treatment programmes and to eat and drink safely, it is essential that the criminal justice system is able to identify and support communication and swallowing needs.
- 1.3. Current speech and language therapy provision for people in prisons in Wales is extremely poor. In comparison, we understand momentum is growing in England as awareness and understanding of communication and swallowing builds.
- 1.4. We are calling for speech and language therapists to be embedded within multi-disciplinary teams in all prisons in Wales and recommend that training on speech, language and communication needs should be included within prison staff training.

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

- 2.1. 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.
- 2.2. Speech and language therapists (SLTs) are experts in supporting people with communication and eating and drinking difficulties. SLTs work in a variety of environments across the justice system.

Response to the questions posed

3. Is the Welsh prison estate fit for provision of education and rehabilitation facilities for Welsh prisoners?

Prevalence of speech, language and communication needs

- 3.1. There is strong international evidence that the incidence of speech, language and communication needs (SLCN) is much more prevalent in the offending population than in the general population (Talbot, 2010). Evidence suggests that over 60% of people in prisons have speech, language and communication needs (Bryan, 2004; Bryan, 2007). Many conditions which are strongly associated with language and communication difficulties, such as learning difficulties, autism and psychiatric conditions, are highly prevalent in the adult prison population (Bryan, 2021).
- 3.2. Those who enter the criminal justice setting often do so from settings where there is a heightened risk of people having communication needs which may not have been

- previously identified. For young people, these include being in care, excluded from school, referred to a community youth offending team, referred to Child and Adolescent Mental Health Services, a drug rehabilitation scheme, or having emotional or behavioural difficulties. For adults, these include being unemployed, in touch with mental health services, being in care or having a special school history (Coles, 2017).
- 3.3. The impact of SLCN on prison staff and the prison environment is huge (RCSLT, 2023). Where individuals cannot understand others and cannot express themselves, this can manifest as: -
- Behaviour that challenges
 - Disruptive, aggressive and violent behaviour
 - Self-harm
 - Increased use of physical intervention and restraint
 - Segregation
- 3.4. Specifically with regards to rehabilitation and education, if speech, language and communication difficulties remain unidentified or unmet, people with communication needs may have limited understanding of, and participation in, the legal process, and programmes designed to reform and rehabilitate them which are verbally mediated. They are also at risk of not being able to participate in verbally mediated physical and medical assessments. Evidence suggests that around 40% of young offenders find it difficult or are unable to access and benefit from rehabilitation programmes that are delivered verbally, such as drug rehabilitation courses (Bryan, 2004). Approximately a third of young offenders have speaking and listening skills below the tested level of an eleven-year-old (Davies, 2011) and are unable to access education and treatment programmes due to their poor language skills.
- 3.5. However, despite the prevalence of these vulnerabilities, we are aware that prison staff receive limited training on SLCN. Screening processes in prisons are ineffective, and there is no nationally used screening tool for communication needs. This has resulted in huge gaps in identification. Prison staff are often therefore unaware of how to best engage with and support people with SLCN. We believe that all prison staff need to have the knowledge and skills on the vulnerabilities that they will encounter, such as SLCN and how to respond to these.
- 3.6. The RCSLT recommend that training on SLCN, and other vulnerabilities, should be embedded into prison staff training. We recommend that this is implemented as part of prison staff induction and as ongoing training and development. Training should also be reviewed at regular interviews.
- 3.7. Prison staff would benefit from being able to speak to a professional who can support them to develop their skills, knowledge and flexibility in approaches in working with people with complex vulnerabilities. All prison staff would benefit from access to a speech and language therapist for advice, guidance and support.

The impact of unidentified swallowing needs

- 3.8. The prison population is ageing with people over 60 the fastest growing age group in custody (Prison Reform Trust, 2008). Evidence suggests that prisoners consult healthcare services more often than 'standard' populations (Marshall, 2001). This suggests the need for a robust healthcare system within prison settings.
- 3.9. Dysphagia (swallowing difficulties) is a prevalent difficulty among ageing adults (Sura, 2012). Swallowing problems are associated with a range of conditions including learning disability, brain injury, stroke, head and neck cancer and progressive neurological conditions including dementia. They can also be associated with the use of anti-psychotic drugs. Left unsupported, swallowing problems can result in choking, pneumonia, chest

infections, dehydration and malnutrition. They can also result in avoidable hospital admission and in some cases, death.

- 3.10. Speech and language therapists play a key role in the identification and management of dysphagia. Evidence from the speech and language therapy service at HMS Berwyn has indicated that managing the dysphagia needs of clients without them needing to leave the site has allowed for excellent client care and cost savings to the establishment.

Provision of Speech and Language therapy in prisons in Wales

- 3.11. There has been increased provision of speech and language therapy in prisons across the UK in the last 10 years. Significant evidence demonstrates the benefits of such provision (Coles et al., 2017). Where speech and language therapy is present, this informs what specific adjustments and tailored support need to be made to guide prison staff and support the person. In the absence of an SLT in a prison, mandatory training on the identification and response to vulnerabilities becomes even more important.
- 3.12. The Royal College of Speech and Language Therapists has received an increasing number of enquiries from prison staff and prison governors across the UK in recent years enquiring about communication needs. We developed a training package called the Box to provide prison staff with practical strategies to better respond to, and support individuals, with SLCN <https://www.rcslt.org/learning/the-boxtraining/#section-3>
- 3.13. Momentum is building with regards to speech and language therapy roles within prisons in England as awareness and understanding of communication and swallowing grows. We welcome the number of recent advertisements for SLT roles within prisons clusters. We are currently undertaking a survey of all SLTs working in justice settings across the UK which will report early next year and provide much needed data on gaps in support.
- 3.14. As we reported when we responded to the Welsh Affairs Select Committee's inquiry on prisons in 2018, we are very concerned that despite steps forward in England that there has been little progress on ensuring speech and language therapy provision within prisons in Wales. HMP Berwyn has employed 1.5 full time equivalent speech and language therapists since 2017 to support prisoners with communication and swallowing difficulties although the service is currently facing recruitment challenges. There is currently no specialist speech and language therapy provision at Cardiff, Swansea, Usk or Prescoed prisons.
- 3.15. In April 2023, the Senedd Equalities and Social Justice committee published its *60% Giving Them a Voice* report which examined the extent of SLCN amongst young people who have offended or are at risk of offending in Wales. The strong report, which highlighted the 'shocking over-representation of young people with SLCN within the youth justice system', makes a number of clear recommendations. These include that;
- the Welsh Government should work with local authorities to develop plans for embedding speech and language therapists within every Youth Offending Team in Wales.
- 3.16. We argue that given the profile of the prison population, the same recommendation should be applied to prisons in Wales.

4. Further information


- 4.1. Please contact Dr Caroline Walters, External Affairs Manager (Wales), Royal College of Speech and Language Therapists.

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