Royal College of Speech and Language Therapists (RCSLT) NI

Response to the Consultation on the Draft Northern Ireland Fostering Services Minimum Standards: A Speech, Language, and Communication Needs (SLCN) Perspective

Executive Summary

This response critically examines the Draft Northern Ireland Fostering Services Minimum Standards (NI Fostering Standards) through the lens of Speech, Language, and Communication Needs (SLCN) among children and young people (CYP) in foster care. While the draft standards promote trauma-informed, child-centred care, they omit explicit recognition of SLCN and the role of Speech and Language Therapists (SLT). Addressing these omissions is essential for safeguarding, well-being, and educational attainment for looked-after children.

Research consistently demonstrates a high prevalence of SLCN among looked-after children (LAC), with many needs masked, undiagnosed, or misinterpreted as behavioural difficulties. When left unidentified, SLCN significantly undermine therapeutic engagement, emotional regulation, educational outcomes, and relationships with carers and peers. Explicit integration of SLCN into the NI Fostering Services Minimum Standards would ensure children receive equitable access to vital support.

The broad and implicit nature of current provisions risks failing children with SLCN. Explicit integration of SLCN screening, SLT referral pathways, and training for foster carers and staff is essential. Investment in SLT provision also generates cost savings by supporting placement stability; preventing breakdown avoids further trauma for children while reducing the significant financial costs associated with multiple placements.

Recommendations:

1. Mandatory universal SLCN screening for all children entering care.

2. Integration of SLCN awareness and support training for all foster carers and staff.

3. Systematic inclusion of SLCN in care plans, Personal Education Plans, and therapeutic interventions.

4. Creation of additional SLT roles within fostering services to support children, carers, schools, and educational, social, emotional, and lifelong outcomes.

RCSLT NI has focused this consultation on Standards 1, 2, 3, 8, and 11, where SLCN is most directly relevant. Embedding SLT roles within fostering services aligns with the Northern Ireland Framework for Integrated Therapeutic Care, supporting multi-disciplinary, trauma-informed provision for looked-after children.

We welcome the opportunity to collaborate with the Department of Health on practical, evidence-based strategies to embed SLCN across all standards, ensuring equitable access to communication support for every child in foster care.

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Category	Statistic / Evidence	Implication for Foster Care	Relevant Standard(s)
Prevalence	Up to 90% of care leavers show below-average language ability; >60% meet criteria for Developmental Language Disorder (DLD) (Clegg et al., 2021; RCSLT, 2023).	Highlights the high prevalence of SLCN and the need for early identification.	Standard 2: Needs of Each Child Understood and Met
Identification Challenges	Many looked-after children mask or adapt to SLCN; needs are often misattributed to behaviour and remain unidentified until SLT assessment (McCool & Stevens, 2011; Maguire, 2021).	Without explicit screening and SLT input, children risk being unsupported and misunderstood, undermining outcomes.	Standard 2: Needs of Each Child Understood and Met
Undiagnosed / Hidden Needs	SLCN frequently remain undetected prior to specialist assessment; many children fall through gaps (RCSLT, 2023).	Emphasises importance of explicit screening, referral pathways, and awareness training for carers and staff.	Standard 2: Needs of Each Child Understood and Met
Educational Attainment	Children with poor language at age 5 are 6x less likely to meet English standards and 11x less likely in Maths by age 11 (Law et al., 2017).	SLCN directly impacts school readiness, academic achievement, and engagement.	Standard 2: Needs of Each Child Understood and Met
Social / Emotional	Unmet SLCN contributes to peer rejection, poor emotional regulation, and mental health difficulties (Lindsay & Dockrell, 2012; Hancock et al., 2022; Hobson et al., 2022; Tamayo et al., 2023; Spratt et al., 2012).	Effective SLT and carer support can improve relationships, emotional wellbeing, and behaviour.	Standard 3: Foster Parents, Staff, and Other Caregivers Have Skills and Support
Behaviour / Criminal Justice	Over 60% of young offenders have communication needs; young people with DLD are twice as likely to reoffend (Clegg et al., 2021).	Highlights risk of antisocial behaviour and underscores need for early intervention and SLT support.	Standard 2: Needs of Each Child Understood and Met

Life Skills / Transitions	Children in foster care often have delayed independence and life skills, with transition to adulthood relying on effective communication (Department of Health, 2025, p.44).	Integrating SLT support during transitions enhances functional life skills, participation in education/employment, and overall independence.	Standard 2: Needs of Each Child Understood and Met
Trauma / Co-occurring Conditions	Many looked-after children experience abuse, neglect, disrupted attachments, and co-occurring conditions such as ASD, ADHD, and learning difficulties (Chambers et al., 2010; Clegg et al., 2021).	SLT interventions should be trauma-informed and integrated with multi-disciplinary care to address complex needs.	Standard 8: Recognising and Responding to Trauma; Standard 11: Complex Needs and Specialist Interventions
Placement Stability / Cost Savings	SLT support strengthens communication between children and carers, reducing behaviours that can trigger placement breakdown; preventing breakdown avoids significant costs and further trauma (NAO, 2019; RCSLT, 2022).	Investment in SLT reduces placement instability, minimises re-traumatisation, and generates long-term cost savings for health, education, and justice systems.	Standard 2: Needs of Each Child Understood and Met; Standard 3: Foster Parents, Staff, and Other Caregivers Have Skills and Support
Value of SLT Roles	Targeted SLT support improves engagement in school, home, and therapy settings; reduces placement instability and behavioural challenges (RCSLT, 2023; Bercow: Ten Years On, 2018; RCSLT, 2022; NAO, 2019; Ofsted, 2022).	Expansion of SLT roles is recommended to enhance outcomes across all aspects of the child's life, supporting carers, families, and schools.	Standard 3: Foster Parents, Staff, and Other Caregivers Have Skills and Support

Table 1: Links Between SLCN, LAC and the Minimum Standards

Introduction

Context: Foster Care in Northern Ireland

As of March 2024, Northern Ireland has over 4,000 looked-after children (LAC), a 40% increase over the past decade. Approximately 84% are in foster care, split between kinship (50%) and non-kinship/independent placements (34%). This escalating need underscores the importance of a robust regulatory framework to ensure high-quality placements.

Importance of Communication

Communication is a fundamental human right and central to children's development, relationships and life chances. For looked-after children, many of whom have experienced early adversity, neglect and trauma, speech, language and communication needs (SLCN) are highly prevalent yet often remain unidentified (McCool & Stevens, 2011; Maguire, 2021). When SLCN go unrecognised, children's vulnerability is compounded: difficulties with language limit their ability to understand and express emotions, engage in therapeutic support, and form secure relationships with carers and peers (Hancock et al., 2022; Hobson et al., 2022).

Despite evidence that rates of SLCN among children in care are at least as high as emotional and behavioural difficulties (Clegg et al., 2021; RCSLT, 2024), professional attention often focuses more on visible behaviour or mental health symptoms. This risks overlooking the underlying role of language in emotional wellbeing, attachment, and resilience (Tamayo et al., 2023; Spratt et al., 2012). Addressing SLCN is therefore essential not only for educational progress but also for improving relationships, supporting mental health, and reducing long-term disadvantage (Bercow: Ten Years On, 2018; RCSLT, 2022).

Scope of This Response

RCSLT NI has focused this consultation response on the standards most relevant to SLCN:

- Standard 1: Integrated Care Supporting Wellbeing

- Standard 2: Needs of Each Child Understood and Met

- Standard 3: Foster Parents, Staff, and Other Caregivers Have Skills and Support

- Standard 8: Recognising and Responding to Trauma

- Standard 11: Complex Needs and Specialist Interventions

The consultation draws upon the evidence presented in Table 1.

Review of NI Fostering Standards and SLCN Considerations

Standard 1: Integrated Care Supporting Wellbeing

- Emphasises collaborative assessment and delivery of support.

- **Observation:** SLCN is not explicitly addressed, risking overlooked communication needs.

- **Recommendation:** Include SLCN in multi-disciplinary care planning and information sharing.

Standard 2: Needs of Each Child Understood and Met

- Central to individualised care; SLCN is not explicitly referenced.

- **Evidence:**

  - Poor early language → 6x less likely to meet English standards, 11x less likely in Maths by age 11 (Law et al., 2017).

  - Unmet SLCN impedes emotional regulation, peer relationships, and mental well-being (Lindsay & Dockrell, 2012).

  - 90% of care leavers have below-average language ability; 60%+ meet criteria for DLD (Clegg et al., 2021; RCSLT, 2023).

Case Study – Child J

Background: Child J, a 7-year-old girl, has been in foster care since age 3, after removal from her birth parents due to neglect and domestic violence. She experienced multiple placement moves due to behavioural challenges.

Assessment & Intervention:

- SLT assessment identified previously undetected receptive and expressive language difficulties.

- Direct SLT intervention was provided, targeting J's underlying receptive and expressive difficulties.

- Holistic multi-disciplinary support alongside SLT included psychology and OT to address trauma and sensory regulation.

- Foster carers and school staff received SLT-led training and strategies to support communication development.

Outcomes:

- Improved understanding of J's communication needs, which were previously undetected and had been contributing to her behaviour challenges.

- Following SLT assessment and intervention, there was a noticeable reduction in behavioural challenges at home and school.

- After SLT involvement and recognition of unidentified communication challenges, J was supported to build safe and nurturing relationships. These relationships facilitate her recovery from the impacts of developmental trauma.

Recommendation: SLCN should be explicitly integrated into assessment, care planning, intervention and educational support, with SLT as a core contributor.

Standard 3: Foster Parents, Staff and Other Caregivers Have Skills and Support

- Draft emphasises trauma-informed training but omits SLCN awareness.

- **Recommendation:** SLT-led training should be mandatory with ongoing professional development for carers and staff.

Standard 8: Recognising and Responding to Trauma

- Behaviour is highlighted as communication of distress.

- **Recommendation:** Integrate SLCN into trauma-informed frameworks to interpret behaviour alongside communication needs.

Standard 11: Complex Needs and Specialist Interventions

- Access to specialist care is mandated but does not explicitly include SLT.

- **Recommendation:** SLT should be a core component of specialist interventions, particularly for children with complex trauma or co-occurring conditions. Additional SLT roles are needed to support children, carers, schools, and families, enhancing educational, social, emotional, and lifelong outcomes.

Expanded Research and Policy Evidence

- Up to 90% of care leavers show below-average language ability; 60% meet DLD criteria (Clegg et al., 2021; RCSLT, 2023).

- Children with SLCN are at greater risk of exclusion, mental health problems, poor attainment, and criminal justice involvement.

- NAO and Ofsted highlight that failing to address communication needs early leads to placement instability, higher SEN rates, and lifelong disadvantage.

- NAO (2019) further reported that placement breakdowns incur high direct costs to fostering services, alongside indirect costs to health, education, and justice. Evidence indicates that SLT support, by reducing behavioural escalation and improving relationships, can mitigate these costs

- Northern Ireland Executive's Children and Young People's Strategy and SEN Code of Practice recognise communication as fundamental to safeguarding and positive outcomes.

Combined Recommendations and Strategic Alignment

1. **Strengthen Standards through Explicit SLT Inclusion**

   o Include SLCN in all relevant standards (2, 3, 8, 11).

   o Mandate SLT input in care planning, assessment, and intervention.

   o Ensure timely referral pathways to SLT services.

2. **Workforce Development**

   o Expand SLT roles in fostering services.

   o Designate 'SLCN champions' or named SLT liaisons in each region.

   o Include SLCN in statutory, induction, and refresher training for carers and staff.

3. **Policy and Rights Alignment**

   o Supports the **Northern Ireland Framework for Integrated Therapeutic Care**.

   o Upholds **UNCRC Article 12**, enabling children to communicate views and wishes.

   o Promotes holistic outcomes in education, social relationships, emotional regulation, and life skills.

Conclusion

RCSLT NI welcomes the ambition of the Draft NI Fostering Standards and its vision for trauma-informed, child-centred care. We are disappointed that SLCN and SLT are not explicitly included. The prevalence, hidden nature, and profound impact of SLCN on children in care require targeted attention.

Embedding SLT roles within fostering services aligns with the Northern Ireland Framework for Integrated Therapeutic Care, supporting multi-disciplinary, trauma-informed provision for looked-after children.

Key points:

- Investment in SLT reduces long-term financial costs by preventing placement breakdowns and mitigating escalation into more expensive specialist or out-of-area placements

- Early identification and intervention prevent behavioural escalation and mental health challenges.

- Training foster carers and staff enhances capacity to provide trauma-informed, child-centred care.

- Creation of specific SLT roles in foster care to improve outcomes for children, families, schools, and communities.

Integrating these recommendations will ensure every looked-after child in Northern Ireland has the communication support necessary to thrive, achieve their potential, and participate fully in society.

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