



**May 2026**

**State of the Nation Report**

**The Speech and Language Therapy  
Workforce in Wales**



“ My brother usually ignores people, especially new people. I was surprised to see how he comfortably engaged with the speech and language therapist, and how intensive interaction can be used to be with him in his world.

“ I wanted to thank you so much for all the help and support you have given me during our sessions. I can finally say I am a new woman and it is all thanks to you. We had a meeting yesterday and I did the shoulder exercise we talked about, wow it was amazing my tension went and my voice eased.

“ It’s been such a pleasure to have you for our therapy sessions, I can see such a big difference in my husband’s communication and also his mood. We communicate so much better together. It’s been a massive boost.

“ The dysphagia training has increased my confidence and competence in managing dysphagia. The speech and language therapist broke down and explained difficult concepts making the training accessible and memorable. I feel more prepared and empowered to apply what I’ve learnt to improve care for our individuals with swallowing difficulties.

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# From our Head of Wales Office



## Pippa Cotterill

Head of Wales Office,  
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and Language  
Therapists

It is my pleasure to introduce this updated State of the Nation report. It builds on our inaugural report of January 2025, offering a refreshed and more detailed picture of the challenges and opportunities facing our profession at a critical time.

Over the past year, we have continued to engage closely with members, partners, and stakeholders across health, education, and social care.

This report reflects those conversations, providing updated data on key issues previously identified—including vacancy rates, student numbers, and Welsh language provision—while also expanding our understanding into new and important areas.

In particular, we examine staffing recommendations across a range of clinical pathways, highlighting the scale of workforce required to deliver safe, effective, and equitable services.

Whilst there are areas of progress, the findings also underline persistent and, in some cases, growing pressures. Demand for speech and language therapy continues to rise across Wales, not only in terms of the number of people who rely on these services, but also in the increasing complexity of their needs. From early years support to adult rehabilitation, our workforce is responding to more diverse and intensive demands than ever before.

Against this backdrop, the reduction in student places across the two universities in Wales is a matter of significant concern.

A sustainable pipeline to a diverse workforce is essential if we are to meet current demand, let alone plan effectively for the future. Without sufficient investment in education and training, we risk exacerbating existing vacancies and placing further strain on an already stretched workforce.

I would like to thank all those who have contributed to this report and to the ongoing work to strengthen speech and language therapy services. The dedication and expertise of our workforce are clear throughout these pages. It is now incumbent on all of us—policy makers, educators, employers, and professional leaders—to respond with ambition and resolve.

Together, we must ensure that speech and language therapy services in Wales are equipped to meet the needs of our population, now and in the years ahead.





# Why does Wales need the speech and language therapy workforce?

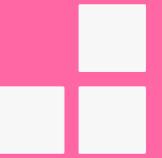
Speech and language therapists (SLTs) and speech and language therapy assistants (SLTAs) provide life-improving treatment, support and care for children and adults who have difficulties with communication, eating, drinking and/or swallowing.

The speech and language therapy workforce plays a key role in reducing health inequalities and improving quality of life. SLTs and SLTAs work directly with people who have communication and/or swallowing needs as well as with families and carers. They provide training and strategies to the wider health and social care, education and justice workforce so that they can identify the signs of speech, language and communication needs (SLCN) or eating, drinking and swallowing difficulties (EDS), improve

the communication environment of people with SLCN and reduce the impact of needs.

In recent years, we have transformed the way we work as a profession. In line with value-based healthcare methodology, there is a strong focus on delivering the best possible outcomes in the most efficient way. SLTs in Wales are leading the way across the UK in terms of the proportion of local health boards utilising the RCSLT's online outcome tool to support the collection of therapy outcome measures (a method of gathering information on the outcomes of therapy and rehabilitation). There is also a focus across the profession on improving skill mix to create a sustainable workforce working at the top of its licence.

# Who benefits from speech and language therapy?



Speech and language therapy benefits people of all ages;



## Babies

Prematurity can significantly increase the likelihood of swallowing and speech, language and communication difficulties compared with infants born full-term. SLTs work with infants and their families receiving care on neonatal units in the areas of both feeding and communication development.<sup>1</sup>



## Early years

The speech and language therapy workforce plays an important role in supporting and promoting children's language development in the early years. Over **10%** of children and young people have long-term communication needs.<sup>2</sup> **32%** of children with speech, language and communication needs (SLCN) live in areas of high social disadvantage.<sup>3</sup>



## School-aged children

The speech and language therapy workforce plays a key role within the additional learning needs (ALN) agenda. SLCN is the most common type of learning need in Wales affecting **36.2%** of children with ALN.<sup>4</sup> Two children in every class of thirty, or **7.58%** of children, start school with Developmental Language Disorder.<sup>5</sup>



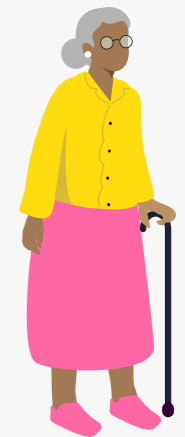
## Young people

The speech and language therapy workforce plays a unique role in supporting vulnerable children and young people. **81%** of children and young people with emotional and behavioural disorders have communication needs not previously identified. **71%** of young people sentenced in the youth justice system in England and Wales (Apr 19 - Mar 20) had SLCN.<sup>6</sup>



## Adults

The speech and language therapy workforce supports adults with learning disabilities and those with communication, voice and/or swallowing difficulties resulting from many conditions such as stroke, head and neck cancer and dementia. **50%-90%** of the learning disabled population have communication difficulties.<sup>7</sup> More than **85%** of people living with dementia experience eating, drinking and swallowing difficulties.<sup>8</sup>



## Frail adults

The speech and language therapy workforce supports the frail, older population who are at high risk of eating, drinking and swallowing difficulties (EDS). They enable people to live well at home and prevent hospital admissions by reducing risks when eating and drinking and aiding communication with family and health and care professionals. For those over 80, the incidence of EDS is up to **82.4%**.<sup>9</sup> **79%** of people at end of life have EDS.<sup>10</sup>

1 Jadcherla, S R (2016). Dysphagia in the high-risk infant: potential factors and mechanisms. *The American journal of clinical nutrition*. 103(2), 622S-628S

2 Hartshorne, M (2006). *The Cost to the Nation of Children's Poor Communication*. ICAN Talk Series, No.2. London: ICAN

3 Welsh Government (2025). Pupil Level Annual School Census (PLASC), Schools' census results: January 2025 [HTML] | GOV.WALES and Welsh Government (2025) Index of Multiple Deprivation Welsh Index of Multiple Deprivation 2025 | GOV.WALES

4 Welsh Government (2025). Pupil Level Annual School Census (PLASC), Schools' census results: January 2025 [HTML] | GOV.WALES

5 Norbury, C F, Gooch, D, Wray, C, Baird, G, Charman, T, Simonoff, E, Vamvakas, G & Pickles, A (2016). The impact of nonverbal ability on prevalence and clinical presentation of language disorder: evidence from a population study. *Journal of Child Psychology and Psychiatry*, 57(11), 1247-1257

6 UK Government (2020). *Assessing the needs of sentenced children in the Youth Justice System* - <https://www.gov.uk/government/statistics/assessing-the-needs-of-sentenced-children-in-the-youth-justice-system>

7 Enderby, P, and Davies, P, (1989). *Communication Disorders: planning a service to meet the needs*. *BJDC*; 24, 151-166.

8 Espinosa-Val, M C, Martin-Martínez, A, Graupera, M, Arias, O, Elvira, A, Cabré, M, Palomera, E, Bolívar-Prados, M, Clavé, P, and Prtega, O (2020) Prevalence, Risk Factors, and Complications of Oropharyngeal Dysphagia in Older Patients with Dementia. *Nutrients*. 12, 863. <https://doi.org/10.3390/nu12030863>

9 Mateos-Nozal, J, Montero-Erassquin, B, Sanchez Garcia, E, Romero Rodriguez, E, Cruz-Jentoft, A, (2020). High prevalence of oropharyngeal dysphagia in acutely hospitalised patients aged 80 years and older. *Journal of the American Medical Directors Association*. (12):2008-2011. <https://pubmed.ncbi.nlm.nih.gov/32499182/>

10 Bogaardt, H, Veerbeek, L, Kelly, K et al, (2015). Swallowing Problems at the End of the Palliative Phase: Incidence and Severity in 164 Unsedated Patients. *Dysphagia* 30, 145-151. <https://doi.org/10.1007/s00455-014-9590-1>



# What is the demand for the speech and language therapy workforce in Wales and how is it changing?

Demand for speech and language therapy has grown significantly over the last decade for children and adults, including those with learning disabilities. There are calls for speech and language therapists (SLTs) to expand into areas where there is significant unmet need.

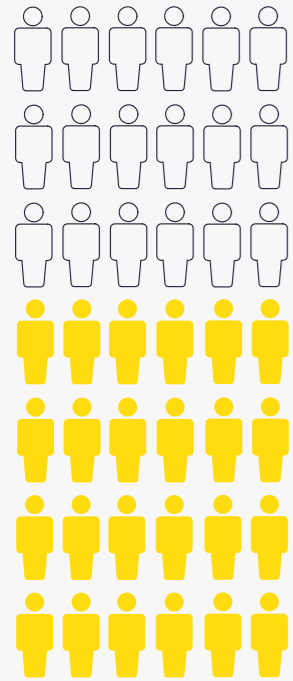
# Graduates

# Waiting Lists



- In the 2025 State of the Nation report, we reported widespread acknowledgement by Welsh Government of a shortage of SLTs in Wales.<sup>1</sup>

Only **24/42** graduates had jobs



In 2026, we are concerned that despite clear evidence of need and increasing demand for speech and language therapy services, only **24/42 (57%)** of graduates from speech and language therapy courses in summer 2025, who were in receipt of the NHS Wales bursary, had jobs as of March 2026. Our understanding is that this unacceptable situation is due to financial pressures facing local health boards. **Six of the seven** local health boards in Wales reported in the January 2026 RCSLT workforce survey that the existing number of SLTs is insufficient to meet the needs of the service and **four of the seven** services revealed that qualified speech and language therapy posts had been frozen in the last year.<sup>2</sup>

This is hugely concerning. Students undertaking the undergraduate speech and language therapy course in Wales are entitled to apply for the NHS Wales bursary. Under the bursary terms and conditions, students need to commit to work in Wales for two years on completion of their studies.

Speech and language therapy students have studied in Wales, contributed to patient care, and were assured that their skills would be in demand. If we are serious about meeting the needs of people with communication and swallowing needs in Wales, immediate, coordinated action between local health boards and the government is required to find sustainable solutions.

<sup>1</sup> Royal College of Speech and Language Therapists (2025). State of the nation report – the speech and language therapy workforce in Wales. [https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report\\_English-version-January-2025.pdf](https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report_English-version-January-2025.pdf)

<sup>2</sup> Royal College of Speech and Language Therapists (2026). Data collected for this report and for the RCSLT's forthcoming 2026 survey of vacancies and retention

## Waiting Lists

- In the 2025 State of the Nation report, we reported on the number of people on waiting lists for speech and language therapy services. We compared the August 2024 Stats Wales waiting list data with the 2019 data from the same source and highlighted the **33%** increase in the average number of people on waiting lists for speech and language therapy in Wales in this period.<sup>3</sup>

In August 2024, there were 3,336 people on waiting lists for speech and language therapy. In August 2025, there were 3,052 people on waiting lists for speech and language therapy – an **8%** decrease, which is a positive development.

Local health board teams have been working creatively to address long waiting lists through interventions such as early support clinics and preventative work with nursery settings and schools, as demonstrated in the case studies on the next page.

However, our members report to us that whilst there has been a decrease in the overall number of individuals on waiting lists for speech and language therapy, the complexity of those on the lists has increased significantly. As we discuss later in this report, it is essential that we train and recruit enough SLTs and SLTAs to deliver new models of care and meet the needs of a population with increasingly complex needs.

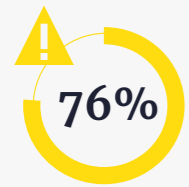
<sup>3</sup> Stats Wales (2026). Therapy services: Pathway waiting times August 2024 onwards <https://stats.gov.wales/en-GB/337263f7-58ac-42a4-ab99-9fa5126057f9>

# Waiting Lists



## Best practice example

### Swansea Bay University Health Board (SBUHB) Pre-School Service



reduction in children with delayed language being added to waiting lists for follow up

In January 2025, the paediatric speech and language therapy team changed the pre-school referral process to ensure one point of entry and timely access to support. This change gave families the ability to self-refer to speech and language therapy. Crucial to the development of the new service is the creation of new pre-school groups, offering a hybrid of parent information and child-led play sessions.

This change has led to decreases in waiting lists for intervention with most families now accessing intervention within a month, when they were previously waiting up to 52 weeks and fewer children being added to waiting lists. For example, there has been a **76%** reduction in children with delayed language being added to waiting lists for follow up intervention, instead they have accessed this immediately. The self-referral, single point of access service has also led to increased attendance at appointments by families in deprived areas, with missed/cancelled appointments reduced by approximately **22%**, as families are requesting support when they are motivated and activated to engage.

Since January 2026, the open access service has now been extended across paediatric services meaning that families no longer need to be referred via school or health care professionals but can self-refer when they are concerned.

## Best practice example

### Aneurin Bevan University Health Board (ABUHB) and Communication Intervention Team (ComIT)

Pupils in mainstream classes can present with significant language and communication needs impacting learning, participation and confidence. Through collaboration, the ComIT (regional local authority support service) and ABUHB speech and language therapy service implement a coordinated, child-centred programme of support.

Joint planning ensures consistent priorities and approaches across education and health. Targeted intervention includes modelling and coaching for school staff, enabling strategies to be embedded in classroom practice. Regular communication between professionals supports timely review and adjustment of targets with parental involvement through observation and shared resources strengthening consistency between home and school.

Pupils can make clear progress in attention and listening, receptive and expressive language, narrative skills and social interaction, with increased confidence and participation noted by staff and family. At one speech and language therapy review, the SLT reported being highly impressed with the pupil's progress, highlighting increased confidence and communication skills and the significant impact of the support undertaken by ComIT working alongside school staff.

The structure and approach strengthens workforce capability, reduces duplication and increases system capacity, demonstrating how integrated education-health working delivers sustainable impact beyond individual intervention.



## Babies



average shortfall between the recommended SLT staffing levels for units in Wales and actual levels

- In the 2025 report<sup>4</sup> we discussed how survival rates for premature babies and those with low birthweights have risen significantly in the last 30 years due to advances in specialist neonatal care<sup>5</sup> and how prematurity can significantly increase the likelihood of swallowing and speech, language and communication difficulties compared with infants born full-term.<sup>6</sup>

As recommended by the British Association of Perinatal Medicine's (BAPM) standards for neonatal care, SLTs support premature babies and infants from very early in life who have difficulties with drinking, swallowing, early play and communication skills, as a result of premature birth, genetic or neurological conditions. The service specification for neonatal services recognises the essential role that Allied Health Professionals (AHPs) including SLTs play in the multi-disciplinary team (MDT) and the positive impacts they have on length of stay, family experiences, neurodevelopmental and health outcomes.<sup>7</sup>

Speech and language therapy staffing recommendations exist both for neonatal units<sup>8</sup> and follow up provision.<sup>9</sup> In February 2026, we benchmarked provision in local health boards in Wales against recommended staffing ratios. Only two local health boards met the recommendations for speech and language therapy provision in neonatal units. Concerningly, in the remaining four local health boards (Powys is excluded given the absence of a neonatal unit), the average shortfall against the recommendations was **80%**. Furthermore, **no local health board meets the NHS Wales perinatal workforce service specification recommendations for follow up.**

This is consistent with findings from Bliss's recent report on AHPs within neonatal services across the UK which highlighted a **62%** average shortfall between the recommended AHP staffing levels for units in Wales and the staffing levels currently

being achieved.<sup>10</sup> These concerns were also echoed in the 2026 National Assurance Assessment of Maternity and Neonatal Care and Services in Wales which highlighted that 'there is an overall shortage of all staff groups, including ...allied health professionals'.<sup>11</sup> Given evidence around the key role of AHPs and SLTs in optimising care to and improving outcomes of high-risk neonates, the situation in Wales is hugely concerning and requires urgent action.

4 Royal College of Speech and Language Therapists (2025). State of the nation report – the speech and language therapy workforce in Wales. [https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report\\_English-version-January-2025.pdf](https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report_English-version-January-2025.pdf)

5 British Association of Perinatal Medicine (2019). Perinatal Management of Extreme Preterm Birth before 27 weeks of gestation: A Framework for Practice. [https://hubble-live.assets.s3.amazonaws.com/bapm/attachment/file/182/Extreme\\_Preterm\\_28-11-19\\_FINAL.pdf](https://hubble-live.assets.s3.amazonaws.com/bapm/attachment/file/182/Extreme_Preterm_28-11-19_FINAL.pdf)

6 Jadcherla, S R (2016). Dysphagia in the high-risk infant: potential factors and mechanisms. *The American journal of clinical nutrition*. 103(2), 622S-628S

7 British Association of Perinatal Medicine (2022). Service and Quality Standards for the Provision of Neonatal Care in the UK – a BAPM Framework for Practice. [Service and Quality Standards for Provision of Neonatal Care in the UK | British Association of Perinatal Medicine](https://www.bapm.org.uk/standards-for-provision-of-neonatal-care-in-the-uk)

8 Royal College of Speech and Language Therapists (2025). Speech and language therapy staffing recommendations for neonatal units. <https://www.rcslt.org/wp-content/uploads/2023/03/Neonatal-staffing-levels-2025-Final.pdf>

9 NHS Wales Executive National Strategic Clinical Network for Maternity and Neonatal Services (2025) Draft Perinatal Workforce Service Specification

10 Bliss (2025). Filling the Gaps: A spotlight on Allied Health Professional, Psychological and Pharmacy roles in Neonatal Care. [https://sr-bliss.s3.amazonaws.com/documents/Filling-the-gaps\\_final-1-2.pdf](https://sr-bliss.s3.amazonaws.com/documents/Filling-the-gaps_final-1-2.pdf)

11 Welsh Government (2026). The path to safer beginnings: a national assurance assessment of maternity and neonatal care and services. <https://www.gov.wales/sites/default/files/publications/2026-03/the-path-to-safer-beginnings-in-wales.pdf>

# Babies, Children and Young People



## Children's services

- In 2025, we highlighted significant concerns around an increase in speech, language and communication needs (SLCN) following the pandemic.<sup>12</sup> This is consistent with both national and international evidence from educators<sup>13</sup> with the greatest concern being that children are failing to meet typical developmental milestones that may affect their emotional wellbeing, communication and learning development.

In September 2025, Welsh Government published research<sup>14</sup> which they had commissioned from Bangor University and the University of South Wales on the impact of the COVID-19 pandemic on the SLCN of children aged 5 to 8 years old and living in Wales. As part of the research, two surveys were conducted with practitioners and parents.

- Around a **third** of all parents (n=68/196) reported that they had concerns about their child's speech, language and communication since the pandemic.
- Almost **9 in 10** practitioners, including teachers (n=88/99) reported that in recent years that they have seen an increase in the complexity of children's needs.
- Around **two thirds** of practitioners (n=67/99) reported that they have seen an increase in the number of children requiring support
- **Over half** of practitioners (n=55/99) reported seeing changes to the SLCN being presented.

The research concluded that 'overall, the responses indicate a growing concern among practitioners about the increasing number and complexity of children's speech, language and communication needs.'<sup>15</sup>

These concerns are echoed in anecdotal evidence from childcare practitioners. One service in South Wales shared evidence that out of all the children starting in early years childcare (term after 2nd birthday) from 1 January 2025, only **33%** presented with speech, language and communication skills within normal limits.



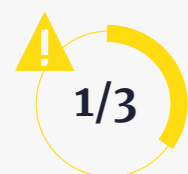
**36.2%**  
of children in Wales with additional learning needs have speech, language, and communication needs

In our 2025 report,<sup>16</sup> we noted that **35%** of children in Wales with Additional Learning Needs (ALN) had SLCN, based on the 2024 annual school census data. The 2025 school census data revealed that **36.2%** of children in Wales with ALN have SLCN. SLCN remains the most common type of learning need in Wales.<sup>17</sup>

The full implementation of the Additional Learning Needs and Education Tribunal (Wales) Act in September 2025 has significantly increased the workload for SLTs. NHS services report extra pressures in both clinical work—such as assessing needs and providing support—and administrative tasks, including sharing information and recording data. These additional responsibilities have not been matched with extra funding or resources. Further pressure comes from local authority requests linked to Education Tribunal for Wales cases, including providing information and acting as expert witnesses.

Independent SLTs have reported that they are not always included in the ALN process. As a result, their clinical input is sometimes missing from discussions and from Individual Development Plans for children and young people.

Despite the evidence presented above of a picture of growing need and a 2024 Senedd Children, Young People and Education Committee recommendation that Welsh Government should review gaps in the number of AHPs (including SLTs) needed to support anticipated future need<sup>18</sup>, we are currently witnessing a significant shortage of jobs for Welsh graduates and a decrease of **31%** (from 55 to 38 ) in the number of training places available.



**Around a third of all parents reported that they had concerns about their child's speech, language and communication since the pandemic**

12 Royal College of Speech and Language Therapists (2025). State of the nation report – the speech and language therapy workforce in Wales. [https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report\\_English-version-January-2025.pdf](https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report_English-version-January-2025.pdf)

13 Fox, L, Bowyer-Crane, C, Lambrechts, A A, Manzoni, C, Nielsen, D, & Tracey, L, (2021). Mitigating Impacts of COVID-19 in the Early Years – Rapid Evidence Review UoY mitigating-impacts-of-covid19-in-early-years-rapid-evidence-review.pdf

14 Welsh Government (2025). Post-pandemic speech, language and communication needs for pandemic era babies and toddlers now aged 5-8 in full-time schooling in Wales. <https://www.gov.wales/sites/default/files/statistics-and-research/2025-09/post-pandemic-speech-language-and-communication-needs-for-pandemic-era-babies-and-toddlers-now-aged-5-to-8-in-full-time-schooling-in-wales.pdf>

15 Ibid

16 Royal College of Speech and Language Therapists (2025). State of the nation report – the speech and language therapy workforce in Wales. [https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report\\_English-version-January-2025.pdf](https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report_English-version-January-2025.pdf)

17 Stats Wales (2025) Pupil Level Annual School Census Results: January 2025 <https://www.gov.wales/schools-census-results-january-2025.html>

18 Senedd Children, Young People and Education Committee (2024). Do disabled children and young people have equal access to education and childcare? <https://senedd.wales/media/3zzhhref/cr-ld16592-e.pdf>

# Welsh language provision

## Welsh language provision

- The Welsh Government plan for providing health and care services through the medium of Welsh, 'More than just words', includes speech and language therapy as a priority group.<sup>19</sup> This is also reflected in individual local health board plans in response to standard 110 of the Welsh language standards – 'increasing the ability to offer clinical consultation through the medium of Welsh.'

Despite the strategic context, we remain concerned that workforce planning is insufficient to understand the need for bilingual services across local health boards and clinical specialisms. Such planning is essential in order to deliver on the ambitions of the 'More than just words' plan and Cymraeg 2050.<sup>20</sup> This view is supported by the Welsh Language Commissioner who has highlighted that 'although the Welsh language standards and 'More than just words' provide the foundations for increasing the care available through the medium of Welsh, the position of the Welsh language in the sector has remained unchanged and Welsh speakers cannot be guaranteed to receive clinical care through the medium of Welsh.'<sup>21</sup>

<sup>19</sup> Welsh Government (2022). More than just words five year plan 2022-27. [www.gov.wales/sites/default/files/publications/2022-07/more-than-just-words-action-plan-2022-2027.pdf](http://www.gov.wales/sites/default/files/publications/2022-07/more-than-just-words-action-plan-2022-2027.pdf)

<sup>20</sup> Welsh Government (2017). Cymraeg 2050 – a million welsh speakers. <https://www.gov.wales/sites/default/files/publications/2018-12/cymraeg-2050-welsh-language-strategy.pdf>

<sup>21</sup> Welsh Language Commissioner (2026). Manifesto 2026: the Welsh Language Commissioner's proposals for the 2026 Senedd election. <https://www.welshlanguagecommissioner.wales/media/1rpbdr5g/maniifesto-2026-comisiynydd-y-gymraeg-saesneg.pdf>

<sup>22</sup> Royal College of Speech and Language Therapists (2025). State of the nation report – the speech and language therapy workforce in Wales. [https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report\\_English-version-January-2025.pdf](https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report_English-version-January-2025.pdf)

# Adult population

## Adult population

- In the 2025 State of the Nation report, we discussed conclusions from a number of reports by third sector partners that speech and language therapy provision for adults was patchy and postcode dependent.<sup>22</sup> For this iteration of the report, we have looked in detail at clinical areas for which there are specific staffing ratios and benchmarked provision against the recommended levels. We have also considered demand in other key areas and looked at best practice in responding to growing complexity of needs.





## Stroke

- In the 2025 report, we highlighted particular concerns around speech and language therapy in stroke services. The speech and language therapy workforce plays a key role in the stroke pathway. Research suggests that **64%** of inpatient stroke<sup>23</sup> survivors have some level of communication difficulty following a stroke and at least **40%** of stroke survivors will initially experience some difficulty swallowing.<sup>24</sup>

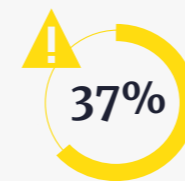
The NHS Wales National Stroke Service Standards<sup>25</sup> include staffing recommendations for speech and language therapy at the three main stages of the pathway – acute phase, recovery and rehabilitation and integrated community stroke care. We benchmarked services across Wales from January to March 2026 by requesting data from local health board speech and language therapy teams to better understand whether we are meeting these recommendations. We are very concerned about the results of this benchmarking exercise.

<sup>23</sup> Mitchell, M, Tyson, S, Vail, A, Conroy, P, Paley, L, & Bowen, A, (2021). Prevalence of aphasia and dysarthria among inpatient stroke survivors: describing the population, therapy provision and outcomes on discharge, *Aphasiology*, 35:7, 950-960.

<sup>24</sup> Banda, K.J., Chu, H., Kang, X.L. et al. Prevalence of dysphagia and risk of pneumonia and mortality in acute stroke patients: a meta-analysis. *BMC Geriatr* 22, 420

<sup>25</sup> NHS Wales Performance and Improvement (2025). NHS Wales National Stroke Service Standards. [performanceandimprovement.nhs.wales/functions/networks-and-planning/stroke/stroke-docs/nhs-wales-national-stroke-service-standards/](https://performanceandimprovement.nhs.wales/functions/networks-and-planning/stroke/stroke-docs/nhs-wales-national-stroke-service-standards/)

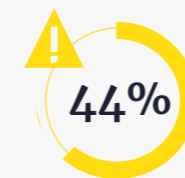
### Acute phase from arrival in hospital



Average shortfall for speech and language therapy provision in the acute phase

- The NHS Wales National Stroke Service Standards recommend a minimum staffing level of 0.48 full time equivalent (FTE) SLTs per 5 beds in a seven-day model of delivery. Currently across Wales, **only one out of the six local health boards which provide a speech and language therapy service in the acute phase of stroke met the FTE recommendation** (Powys Teaching Health Board is not included as it does not have a district general hospital). In the remaining five local health boards, there was an average shortfall of **37%**. **No services offered a seven-day model of delivery.**

### Recovery and Rehabilitation



Average shortfall across local health boards

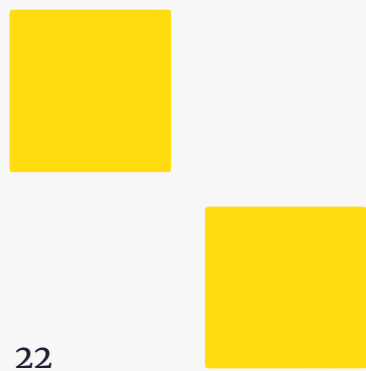
- The NHS Wales National Stroke Service Standards recommend that there should be a minimum staffing level of 0.56 FTE SLTs per 5 beds in a seven-day model of delivery. Currently across Wales, there is an average shortfall of **44%** across all seven local health boards with **no services offering a seven-day model of delivery.**

### Integrated Community Stroke Care



Average shortfall in speech and language therapy provision within integrated community stroke care

- The NHS Wales National Stroke Service Standards recommend that there should be a minimum staffing level of 0.4 FTE per 100 patients per year in a seven-day model of delivery for the Early Supported Discharge pathway. Currently across Wales, **only three of the seven local health boards meet the recommended staffing levels.** In the remaining four local health boards, there is an average shortfall of **50%**. **No services in Wales offer a seven-day model of delivery.**





## Intensive care



Average shortfall in speech and language therapy provision across all six of the local health boards that have an intensive care unit

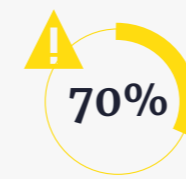
- People admitted to critical care units often experience communication, voice and swallowing difficulties as part of their underlying diagnosis and/or associated with a prolonged Intensive Care Unit (ICU) stay. Up to **62%** of patients experience swallowing difficulties post-extubation in the ICU setting.<sup>26</sup>

The Faculty for Intensive Care Medicine and Intensive Care Society guidelines<sup>27</sup> for the provision of intensive care services set out that critical care units must have access to an SLT five days a week during working hours. The standards recommend a minimum staffing level of 0.1 FTE (full-time equivalent) is required in order to deliver a critical care speech and language therapy service. When we benchmarked speech and language therapy in critical care units across Wales against the standards, we were concerned to find an average shortfall of **57%** in provision across the six local health boards that have an intensive care unit.

26 Zuercher, P, Moret, C S, Dziewas, R and Schefold, J C (2019). Dysphagia in the intensive care unit: epidemiology, mechanisms, and clinical management. Crit Care 23, 103 (2019). <https://doi.org/10.1186/s13054-019-2400>

27 The Faculty for Intensive Care Medicine and Intensive Care Society (2026). Guidelines for the Provision of Intensive Care Services Guidelines for the Provision of Intensive Care Services | The Faculty of Intensive Care Medicine

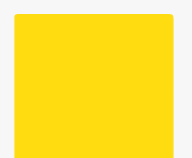
## Neurorehabilitation



Average shortfall across the four local health boards offering speech and language therapy provision within community specialist rehabilitation

- Speech and Language Therapists (SLTs) in neurorehabilitation are critical for assessing, treating, and managing swallowing (dysphagia), speech, language, and cognitive-communication disorders resulting from brain injury, stroke, or neurodegenerative conditions. The British Society of Rehabilitation Medicine recommend that minimum staffing provision for a district specialist in-patient rehabilitation service should be 2-2.5 FTE SLTs (dependent on whether tracheostomy patients are accepted) and minimum staffing provision for community specialist rehab services to support people with long term neurological conditions should be 4 FTE per population of 1 million.

We benchmarked local health board speech and language therapy services against these recommendations and found an average shortfall of **70%** across the four local health boards that offer specialist community rehabilitation provision. Only two health boards have a specialist inpatient rehabilitation unit, one of which is meeting the recommended staffing level, the other is not, with a shortfall of **43%**.





## Justice



of youth justice services have speech and language therapists embedded in their teams

- It is now three years on from the 2023 Senedd Equality and Social Justice report, 60% Giving them a voice.<sup>28</sup> The committee made a key recommendation 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’, which was rejected by Welsh Government.

Following the publication of the report<sup>29</sup>, youth justice inspection reports<sup>30</sup> have consistently flagged speech and language therapy provision as a gap and have included key recommendations to address this issue. RCSLT Wales continue to work with youth justice service managers to push for more speech and language therapy posts within youth justice. On the next page, we have captured data on the current state of play of speech and language therapy provision within youth justice services in Wales. The data reveals that only **50%** of services have speech and language therapists embedded in their teams. This is an area that continues to require urgent investment and long term workforce planning to end the postcode lottery of services across Wales.

Looking beyond youth justice to the wider criminal justice system, we are aware of growing requests from prisons for speech and language therapist support around communication, eating, drinking and swallowing needs. HMS Berwyn is the only prison in Wales which has a commissioned speech and language therapy service. There is **no commissioned speech and language therapy service in HMP Cardiff, HMP Swansea, HMP Usk and Prescoed or HMP Parc.**

<sup>28</sup> Senedd Equality and Social Justice Committee (2023). 60% Giving them a voice – speech, language and communication needs in the youth justice system. <https://senedd.wales/media/excbag12/cr-ld15786-e.pdf>

<sup>29</sup> Ibid

<sup>30</sup> HMIP (2024). An inspection of youth justice services in Conwy and Denbighshire. [www.justiceinspectorates.gov.uk/hmiprobation/wp-content/uploads/sites/5/2024/03/An-inspection-of-youth-justice-services-in-Conwy-and-Denbighshire.pdf](http://www.justiceinspectorates.gov.uk/hmiprobation/wp-content/uploads/sites/5/2024/03/An-inspection-of-youth-justice-services-in-Conwy-and-Denbighshire.pdf)

HMIP (2024). An inspection of youth justice services in Gwynedd and Mon. [www.justiceinspectorates.gov.uk/hmiprobation/wp-content/uploads/sites/5/2023/08/An-inspection-of-youth-justice-services-in-Gwynedd-Ynys-Mon.pdf](http://www.justiceinspectorates.gov.uk/hmiprobation/wp-content/uploads/sites/5/2023/08/An-inspection-of-youth-justice-services-in-Gwynedd-Ynys-Mon.pdf)

Youth justice service	Whole time equivalent (wte) speech and language therapists (SLTs) as of August 2025	Contract and Funding such as service level agreement (SLA) with youth justice service (YJS)
Blaenau Gwent and Caerphilly	0.4	SLA with YJS
Bridgend	0.4	SLA with YJS
Cardiff	1	SLA with YJS
Carmarthenshire	0.6	SLA with YJS
Ceredigion	0	
Conwy and Denbighshire	0	
Cwm Taf (Merthyr and Rhondda Cynon Taf)	0.6	SLA with YJS
Flintshire	0	
Gwynedd and Ynys Môn	0	
Monmouthshire and Torfaen	0.2	SLA with YJS
Newport	0.6 + 0.2 with pupil referral unit	SLA with YJS
Pembrokeshire	0	
Powys	0	
Swansea and Neath Port Talbot (NPT) (incl Hillside Secure Home) (combined arrangements)	1.9 SLT and 1.0 SLTA	SLA with YJS
Vale of Glamorgan	0	
Wrexham	0	

# Mental health

## Mental health

- As we reported in the 2025 report<sup>31</sup>, SLTs have a unique role to play as members of multidisciplinary mental health teams in identifying communication difficulties and swallowing disorders and in their support and in the management and reduction of associated harm and risk.

Following the passage of the 2026 Mental Health Act, the UK Government has committed to ensure that the new Code of Practice offers clear guidance to decision-makers and other professionals involved in a person's care and treatment on how to support individuals with speech, language and communication needs. In parallel to updating the Code, the necessary secondary legislation will also be developed. As part of this development, the statutory instructions under Section 12ZA, which set out who can and cannot be approved as an approved clinician will be expanded. Consideration is being given to extending the criteria to include SLTs. This change will have significant workforce implications.

31 Royal College of Speech and Language Therapists (2025). State of the nation report – the speech and language therapy workforce in Wales. [https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report\\_English-version-January-2025.pdf](https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report_English-version-January-2025.pdf)



# Changing trends



## Changing trends

- Local health board adult speech and language therapy services are reporting significant growth in demand from new clinical areas. These include selective mutism, neurodivergent presentations (e.g. autism) and adults in the justice system. There is also a growing demand for SLTs to support individuals with functional neurological disorders - a complex condition that requires a specialist skillset and a joined up multi-disciplinary team provision (which is currently lacking in most health boards).

Traditionally, adult SLTs are skilled in supporting people with acquired neurological disorders but services are increasingly reporting high numbers of referrals for developmental disorders which require a different skills set.

Against this backdrop of growing demand and changing needs, adult services are increasingly looking at service redesign in order to improve care.



## Best Practice example

### Transforming acute speech and language therapy services through innovation

In response to growing demand and no additional resource, from 2023-2025, the Acute Speech and Language Therapy team in Cwm Taf Morgannwg University Health Board undertook an ambitious and innovative transformation of service delivery across three district general hospitals and two community hospitals.

Central to this transformation has been the adoption of the Kate Malcomess Care Aims Framework. This approach has redefined the way referrals and treatment are managed, introducing a centralised "Request for Help" phone line staffed by senior clinicians on a rota. This system ensures that patients and referrers receive timely advice, education, and signposting, while investigations and treatment are arranged when necessary. When treatment is required, care aims are set and progress is monitored continuously. Cases are reviewed in fortnightly group clinical supervision sessions, reinforcing reflective practice as a cornerstone of service delivery. Clinical impact is measured through goal attainment and Therapy Outcome Measure scores, while key performance indicators such as response times and the proportion of patients requiring specialist intervention provide transparent data for service evaluation and planning.

The innovation has optimised existing capacity and delivered measurable improvements in patient outcomes and system-wide performance. For example, demand for follow up appointments per week has reduced significantly from 125 per week in July 2023 to 50 in July 2024 and the percentage of patients achieving the goals set at the start of care continues to increase (from **60%** to **90%** in 2025). It has also had a huge impact on staff morale. Freed from inefficiencies, clinicians are now actively participating in local and interprofessional quality improvement initiatives and developing advanced clinical skills which further strengthens the service. This shift has created a culture that values professional growth, collaboration, and wellbeing, ensuring that improvements benefit not only patients but also the workforce and the wider health community.



# What does the current speech and language therapy workforce look like?

This chapter builds on last year's report<sup>1</sup>, which reflected whether the speech and language therapy workforce in Wales reflects the population that we serve.

We explore workforce composition changes since 2025 and take a look at vacancy rates. We also include quotes from our membership across Wales.

<sup>1</sup> Royal College of Speech and Language Therapists (2025). State of the nation report – the speech and language therapy workforce in Wales. [https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report\\_English-version-january-2025.pdf](https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report_English-version-january-2025.pdf)



As of March 2025:

 **835**  
SLTs in NHS Wales

 **685.8**  
FTE as of March 2025

Consistent with the rest of the NHS workforce in Wales, the number of SLTs in Wales has grown over the last decade. Analysis of data from the NHS Wales electronic staff record<sup>2</sup> (ESR) reveals that there are **835** SLTs in NHS Wales (headcount), full-time equivalent (FTE) – **685.8** as of March 2025 – a **3%** increase on the 2024 figure.

The recent NHS Wales Workforce Trends report<sup>3</sup> identified that the highest proportional percentage increase in terms of workforce group growth occurred in the Allied Health Professionals (AHPs), with an increase of **30.8%** (between March 2020 and March 2025). Data published by Stats Wales<sup>4</sup> shows only a **16.3%** increase in FTE of SLTs over the same period, implying that speech and language therapy is not keeping up with the growth of the other AHPs. We are also not keeping pace with developments across the border, in England, where our membership data shows that the number of SLTs has increased significantly.

Year (from March)	SLTs (headcount)	Full time equivalent
2020	718	560.0
2021	766	599.4
2022	777	617.6
2023	803	649.8
2024	822	664.3
2025	835	685.8

## Vacancies

  
**5.1%**  
vacancy rate

Based on analysis of data from the RCSLT workforce survey in January 2026, a vacancy rate of **5.1%** was reported for Wales.<sup>5</sup> This compares to the estimated vacancy rate of **3.8%** in scientific, therapeutic and technical staff within the NHS Wales vacancy statistics (March 2025).<sup>6</sup> The rate varies significantly between local health boards with more rural local health boards experiencing vacancy rates of up to **14.5%**. Services revealed that band 6 and 7 posts provided the biggest recruitment challenges.

**Six of the seven** local health boards in Wales reported in the 2026 workforce survey that the existing number of SLTs is insufficient to meet the needs of the service and **four of the seven** services revealed that qualified speech and language therapy posts had been frozen in the last year.<sup>7</sup>

<sup>2</sup> Stats Wales (2026). NHS Wales staff: other non medical staff by job type. <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/NHS-Staff/Non-Medical-Staff/othernonmedicalstaff-by-jobtype-areaofwork-year>

<sup>3</sup> Health, Education and Improvement Wales (2025). NHS Wales workforce trends report (as at 31st March 2025). <https://heiw.nhs.wales/files/workforce-trends-report-march-2025/>

<sup>4</sup> Ibid

<sup>5</sup> Royal College of Speech and Language Therapists (2026). Data collected for this report and for the RCSLT's forthcoming 2026 survey of vacancies and retention

<sup>6</sup> Health, Education and Improvement Wales (2025). NHS Wales workforce trends report (as at 31st March 2025). <https://heiw.nhs.wales/files/workforce-trends-report-march-2025/>

<sup>7</sup> Royal College of Speech and Language Therapists (2026). Data collected for this report and for the RCSLT's forthcoming 2026 survey of vacancies and retention

# Welsh language provision

## Welsh language

22%  
of SLTs can deliver services through the medium of Welsh

31%  
of speech and language therapy assistants can deliver services through the medium of Welsh

■ Under the Welsh Language Standards, local health boards are required to publish 5-year plans setting out proposed steps to improve their ability to conduct clinical consultations in Welsh (standard 110). As part of these plans, local health boards identify those areas of health care that they propose to prioritise. People using speech and language therapy services are included as a priority area in accordance with the areas identified in More than just words<sup>8</sup> - the Welsh Government plan for providing health and care services through the medium of Welsh.

The 2021 census data<sup>9</sup> reported that **18%** of the population can speak Welsh. The NHS Wales Workforce Trends report<sup>10</sup> recognises that analysing the Welsh language competency level of NHS Wales staff is challenging. In our 2025 report<sup>11</sup>, we estimated that **18%** of the speech and language therapy workforce could deliver services through the medium of Welsh, based on freedom of information requests to local health boards. We repeated the freedom of information request to all local health boards in January 2026. The 2026 data showed that **22%** of SLTs and **31%** of SLTAs can deliver services through the medium of Welsh which suggests that our workforce broadly represents the population that it serves.

However, as we highlighted in our 2025 report<sup>12</sup>, there is a pressing need to better understand capacity to deliver bilingual services within local areas and across clinical specialisms. Despite the prioritisation of speech and language therapy, we have thus far seen little focussed workforce planning to ensure the profession is able to deliver on the ambitions of the 'More than just words' plan and Cymraeg 2050.<sup>13</sup>

8 Welsh Government (2022). More than just words five-year plan 2022-27. [www.gov.wales/sites/default/files/publications/2022-07/more-than-just-words-action-plan-2022-2027.pdf](http://www.gov.wales/sites/default/files/publications/2022-07/more-than-just-words-action-plan-2022-2027.pdf)

9 Welsh Government (2022). Statistics - Welsh language in Wales (Census 2021). <https://www.gov.wales/sites/default/files/pdf-versions/2022/12/3/1671609478/welsh-language-walescensus-2021.pdf>

10 Health, Education and Improvement Wales (2025). NHS Wales workforce trends report (as at 31st March 2025). <https://heiw.nhs.wales/files/workforce-trends-report-march-2025/>

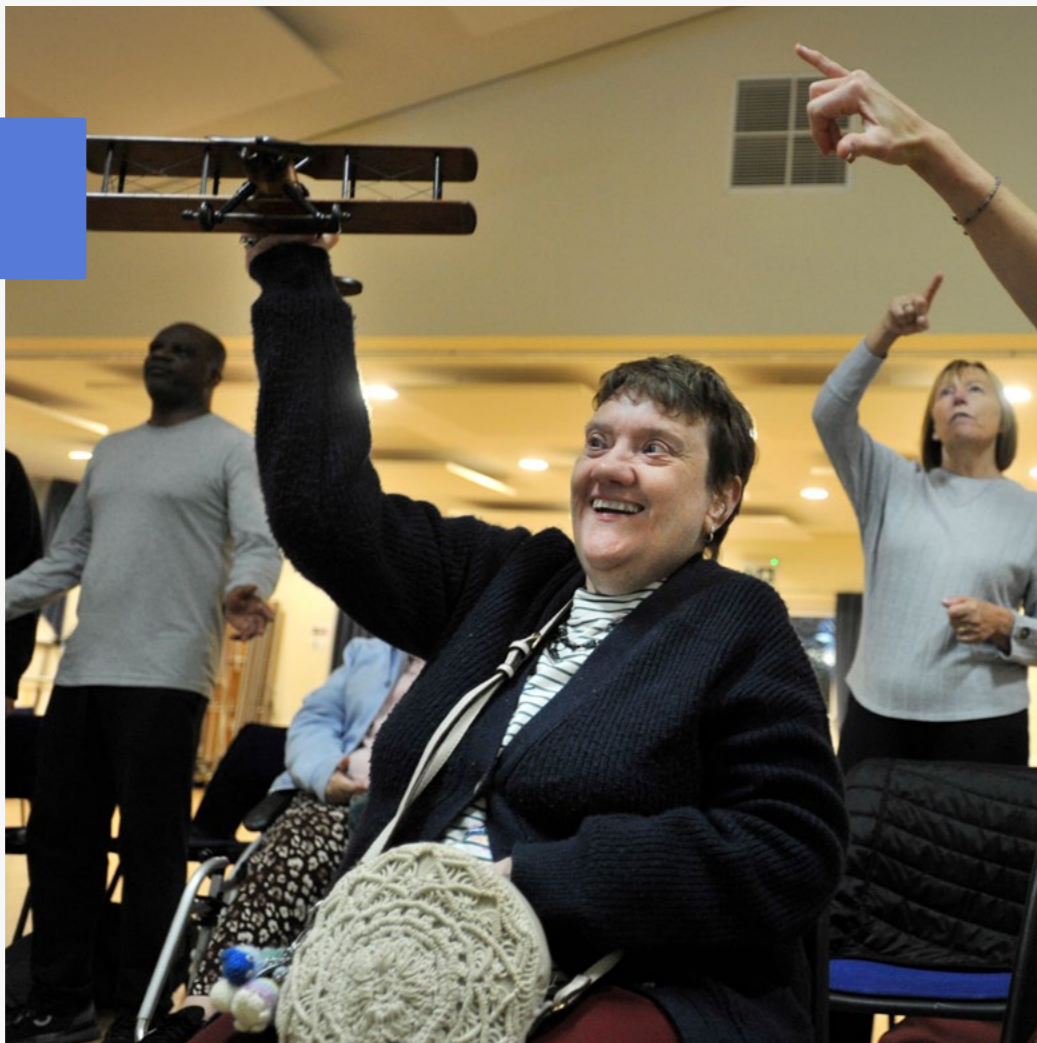
11 Royal College of Speech and Language Therapists (2025). State of the nation report - the speech and language therapy workforce in Wales. [https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report\\_English-version-January-2025.pdf](https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report_English-version-January-2025.pdf)

12 Ibid

13 Welsh Government (2017). Cymraeg 2050 - a million Welsh speakers. <https://www.gov.wales/sites/default/files/publications/2018-12/cymraeg-2050-welsh-language-strategy.pdf>



- There is also a clear need for research to explore and compare normative and impaired development, in order to increase the capacity of SLTs to assess, diagnose, and treat disorders. We warmly welcome the development of Prosiect Pengwin – Welsh Government funded research which is developing bilingual tools and resources that will support health, education and childcare practitioners to identify and support speech, language and communication skills in the early years. This is a critical development and we urge consideration of validated Welsh language assessments for adults to ensure equity of provision. For example, we are conscious that there are currently no formal Welsh language assessments for people living with dementia or stroke survivors.



## Best practice example

### Betsi Cadwaladr University Health Board – Transforming Welsh language provision

The speech and language therapy service in Betsi Cadwaladr University Health Board West (BCUHB) considers the provision of bilingual speech and language therapy to be a critical priority, in order to serve the Welsh Language needs of the local population. The service covers Gwynedd and Ynys Môn, where the highest concentrations of Welsh speakers in Wales reside. Over recent years, service leaders have actively developed the Welsh language skills of the team. More than **80%** of the staff are fluent Welsh speakers, and the rest of the team has varying Welsh language ability. In the last 2 years, the service has been able to employ 8 Welsh-speaking newly qualified practitioners, which is a huge part of their 'grow your own' approach and is very encouraging.

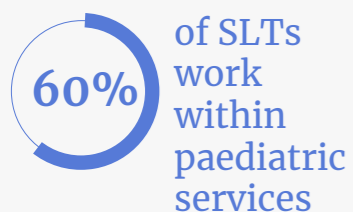
Staff whose first language is not Welsh are actively encouraged and supported to attend health board courses to improve their Welsh skills and develop their confidence in using Welsh in the workplace. Many learners have developed their proficiency to a level where they can deliver services directly through the medium of Welsh. The team also collaborates with Bangor University and Nant Gwrtheyrn, where staff are completing Welsh in the Workplace courses to further strengthen their skills.

In 2025, the team were awarded the BCUHB Achievement Award for the Welsh Language in recognition of their ability to provide services to people in Welsh, and for their supportive and nurturing team approach to encouraging all staff to develop their Welsh. One of the team, who is originally from Ireland also recently won the BCUHB Welsh Learner of the Year award.

# What does the current speech and language therapy workforce look like?



## Setting



- Obtaining data on the settings in which SLTs and assistants work poses an ongoing challenge. Our UK-wide membership data indicates that roughly **60%** of SLTs work within paediatric services and **40%** work within adult services. It is essential that we fully understand the nature of the profession and how it is changing over time in order to effectively workforce plan for the future. We welcome the recent work by Health Education and Improvement Wales on data cleansing and are keen to work with the organisation to further refine available data to supportive effective workforce planning.

## Independent practice



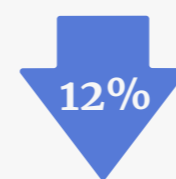
- The Association of Speech and Language Therapists in Independent Practice (ASLTIP) database for SLTs working in independent practice<sup>14</sup> notes 32 practitioners working in Wales which is an increase of **14%** since the 2025 report (28 independent practitioners)<sup>15</sup>. We understand that a number of members practising independently are not members of ASLTIP and that the size of the independent sector in Wales is growing. Our UK-wide membership survey data indicates that **20%** of SLTs work in independent practice (**5%** of whom work in both NHS and independent practice).

Independent members have highlighted to us a number of issues. Some RCSLT members working in independent practice are being refused entry to schools to work with children because there has been a change in school or local authority policy. In addition, the change in criteria for the NHS Electronic Assistive Technology Service (which provides alternative communication aids) means that independent practitioners are no longer able to refer directly to the service where they previously could.

<sup>14</sup> The Association of Speech and Language Therapists in Independent Practice (2024). Find a speech and language therapist. <https://asltip.com/find-a-speech-therapist/>

<sup>15</sup> Royal College of Speech and Language Therapists (2025). State of the nation report – the speech and language therapy workforce in Wales. [https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report\\_English-version-January-2025.pdf](https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report_English-version-January-2025.pdf)

## Skill mix in speech and language therapy



decrease in the number of SLTAs working in NHS Wales

- We have seen significant improvements in the skill mix within speech and language therapy in recent years with a gradual increase in the number of speech and language therapy assistants (SLTAs) working in the NHS. It is disappointing that there has been a reduction in the number of SLTAs this year. There are now **122.7 FTE** SLTAs working in NHS Wales, a decrease of **12%** from 139 FTE in 2025.

As a profession we aspire to create a sustainable workforce working to the top of its licence. We will investigate this issue further and continue to call for better data on the support workforce to inform effective workforce planning. We are also concerned that no progress has been made in terms of routes for this workforce to become registered practitioners. We discuss this issue further in the next chapter.



# Workforce comments: Speech and language therapy assistants

## Recommendations

- Ensure sustainable funding for speech and language therapy services to meet growing demand, particularly in clinical areas where our benchmarking analysis shows services are not meeting workforce recommendations.
- Improve data collection on the composition of the profession to allow us to better reflect the communities that we serve including support to improve our understanding of the Welsh language skills of our existing workforce and requirements for the future.
- Introduce better, more sophisticated workforce planning for the profession as part of the preventative agenda, taking account of the need to meet standards and demand from new sectors.
- Prioritise creation of Welsh language assessments in areas such as dementia and stroke.



? Where do you think you have had the greatest impact in 2025?

“ Running communication partner training sessions for parents, carers and teaching staff who support children and young people using alternative augmentative communication (AAC). Communication partners are key to a successful outcome for AAC. By delivering these sessions, we hope to empower those supporting the child’ to confidently use the AAC device.

? What is the biggest challenge you face as an SLTA in Wales?

“ Career progression. I would love the opportunity to progress and become a qualified SLT. Having only one route into the profession, which involves studying full time at university for 3 years, is very limiting. It would mean that I would have to leave my job – something that I am not in a position financially to do. It’s such a shame.

“ Educating and working with care providers – proactive work. Although this work is not often captured as direct patient contact in learning disability services, this is where we can often effect the greatest change.

“ Providing reassurance and building confidence when working on Adult Child Interaction (ACI) strategies with parents/carers in the home environment.

# Workforce comments: Speech and language therapists



? Where do you think you have had the greatest impact in 2025?

- Fast access appointments available for urgent patients.
- E-notes enhancing communication across services and professionals - contributed to holistic and integrated care.
- Increased knowledge, providing education to loved ones and care companies.
- Utilising care aims has meant care is much more patient centered.

? Where do you think you have had the greatest impact in 2025?

- Having our first graduates from North Wales Wrexham University graduating, and filling our vacancies - hurray!  
As a service manager, the publicity work that the RCSLT has done around the State of the Nation report, RCSLT at 80, has provided a real opportunity and platform for us to highlight the role of SLTs across our health board.
- Working within a highly supportive team. Strong leadership from clinical lead has allowed for opportunities to pilot approaches e.g. The summer online group for teens with selective mutism (SM), which achieved positive outcomes.  
Opportunities to introduce and embed more evidence based speech therapy approaches such as multiple oppositions to better target complex speech sound disorders.  
The expansion of our SLT team has had a very positive impact.

? What is the biggest challenge you face as an SLTA in Wales?

- Securing and protecting the budget for SLT services in the current austerity within the NHS. It is great that we are training more SLTs, recognising the rising incidence of SLCN. However, unless there is increased investment in SLT services across the NHS and other organisations such as Youth Justice, we will have a cohort of SLT students who are unable to find work. This is a very real problem, as we are all having to make cost savings, rather than investing in new opportunities. When opportunities do arise, they are often short term funding (eg Cluster funding from the Accelerated Cluster programme/ Talk with Me), which does not allow sustainable service provision.  
Increasing complexity of client needs alongside the growing requirement for specialist evidence-based intervention for those who require our services. Many requiring input from SLTs as opposed to SLTAs given what evidence-based research suggests. This has an impact on managing service demand and maintaining timely access to care.





# What will the future speech and language therapy workforce look like?

The future speech and language therapy workforce needs to reflect the populations that we serve in terms of diversity, Welsh language and cultural identity. Future speech and language therapists (SLTs) and speech and language therapy assistants (SLTAs) need to

possess the skills and competencies to develop new models of care and adapt to a fast-changing environment.



decrease in commissioned places for speech and language therapist training

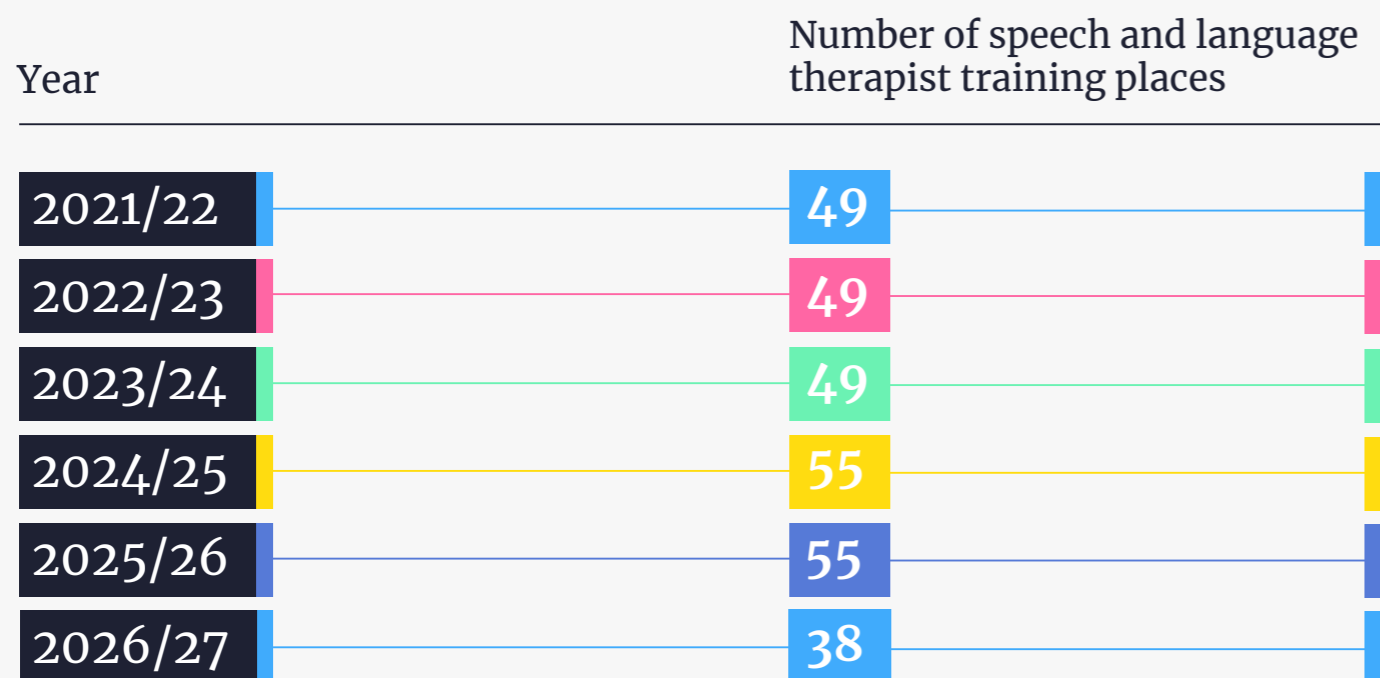
In last year's report<sup>1</sup> we called for sustained growth in speech and language therapy training places at the two universities offering pre-registration courses. It is hugely disappointing that this call has not only been rejected but that the number of speech and language therapy training places has decreased significantly.

Despite evidence in our report of significant growing demand, commissioning numbers for 2026/27 have reduced from **55** to **38** (a **31%** decrease), mirroring trends in other Allied Health Professions. This raises real concerns about the future pipeline for the profession, particularly against a backdrop of growing demand for courses, with 18 high quality applicants for every place at Wrexham University for the 2026/27<sup>2</sup> cohort and 8 applicants for every place at Cardiff Metropolitan University.

In the 2025 report<sup>3</sup>, we also expressed concern that there are no part-time or two-year postgraduate courses available, or more accessible routes into learning such as Earn as you Learn schemes. We are acutely aware that the lack of availability of other routes into the profession beyond the full-time, undergraduate course, is affecting the diversity of the profession and the ability to meet population need.

As a profession in short supply<sup>4</sup>, we believe that the Grow your Own model offers important new opportunities for career progression to those already working in healthcare settings, and to the existing SLTA workforce. In an RCSLT Wales survey of SLTAs in 2024, **47%** of respondents reported that they would consider training to be a speech and language therapist and of those, **95%** expressed a preference for an Earn as you Learn model. There is an opportunity for learning from the introduction of apprenticeships in England, where the number of universities working with employers to offer the apprenticeship continues to grow.

We are disappointed by the lack of progress in Wales on health degree apprenticeships thus far. This formed a key call in our asks for the Senedd elections.<sup>5</sup>



1 Royal College of Speech and Language Therapists (2025). State of the nation report – the speech and language therapy workforce in Wales. [https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report\\_English-version-January-2025.pdf](https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report_English-version-January-2025.pdf)

2 Health Education and Improvement Wales (2026). Education and Training Plan 2026-27. [heiw.nhs.wales/files/etp-plan-final-206-27/](https://heiw.nhs.wales/files/etp-plan-final-206-27/)

3 Royal College of Speech and Language Therapists (2025). State of the nation report – the speech and language therapy workforce in Wales. [https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report\\_English-version-January-2025.pdf](https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report_English-version-January-2025.pdf)

4 UK Government (2024). Skilled worker visa immigration list. <https://www.gov.uk/government/publications/skilled-worker-visa-immigration-salary-list>

5 Royal College of Speech and Language Therapists (2025). RCSLT Senedd Elections Manifesto RCSLT-Senedd-Elections-Manifesto-March-25-English-version.pdf

# Retention of the existing workforce



- Beyond looking to the student population, it is vital to support the health and wellbeing of our existing workforce. As A Healthier Wales workforce strategy<sup>6</sup> noted, 'many of our future workforce are with us today, and retaining our workforce is as important as recruiting.' As part of the 2026 iteration of the state of the nation report, we have focused on available intelligence on retention of the speech and language therapy workforce in Wales.

In July 2025, RCSLT published a UK-wide report looking specifically at retention within the profession.<sup>7</sup> Respondents from Wales were over-represented in the survey (11.8% compared to 4.6% HCPC registrants) and there were several positive findings.

SLTs in Wales reported the highest levels of satisfaction in their roles out of the UK nations. **77%** of respondents were satisfied or very satisfied with their current job roles compared to **68%** across the UK. **84%** of respondents in Wales answered that they were proud to be SLTs, which was amongst the highest score across the UK. **93%** of SLTs in Wales either agreed or strongly agreed that their role made a difference to patients/service users, compared to **87%** across the UK. Wales had the highest percentage of SLTs state that they were planning to stay in their current job roles.

<sup>6</sup> Health Education and Improvement Wales and Social Care Wales (2020). A healthier Wales: Our workforce strategy for health and social care. <https://heiw.nhs.wales/workforce/10-year-workforce-strategy-for-health-and-social-care/>

<sup>7</sup> Royal College of Speech and Language Therapists (2025). A profession under pressure – SLT retention and waiting times A-profession-under-pressure-SLT-retention-and-waiting-times.pdf



**93%** of SLTs in Wales either agreed or strongly agreed that their role made a difference



**55%** of Welsh SLTs stated that they had experienced burnout

However, in response to other questions around work life balance and workload, a less positive picture emerged. Only **51%** of respondents in Wales agreed or strongly agreed with the statement 'My organisation is committed to helping me balance my work and home life'. Worryingly, **55%** of Welsh SLTs stated that they had experienced burnout as a result of their work in the last twelve months. Contributing factors to burnout included workload pressures, caseload size/complexity, insufficient staffing levels and administrative burden.



# Retention of the existing workforce



  
**81.1%**  
inclusion  
positivity score

- For the first time this year, we also analysed the results of the NHS Wales Staff Survey with relevance to the profession. The survey provides insights into workforce engagement, morale, and organisational culture across NHS Wales.<sup>8</sup> 319 staff respondents to the 2024 survey selected speech and language therapy as their profession.

The survey data reveals that the positivity score for speech and language therapy staff in Wales was higher across almost all themes than the positivity score for all NHS Wales staff. Of particular note, the inclusion positivity score was **81.1%** of speech and language therapy staff respondents in comparison to **70.3%** of all staff in NHS Wales.

<sup>8</sup> Health Education and Improvement Wales (2025) NHS Wales Staff Survey Results 2024 – National Findings report - [heiw.nhs.wales/files/nhs-wales-staff-survey-2024-national-findings-report/](https://heiw.nhs.wales/files/nhs-wales-staff-survey-2024-national-findings-report/)



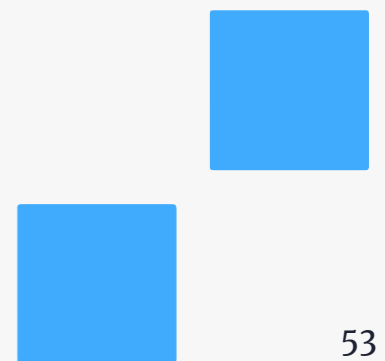
Lower positivity scores were reported for morale (**61.4%** for SLT respondents in comparison to **55.3%** of all NHS Wales staff), patient safety (**63.5%** for SLT respondents in comparison to **59.1%** for all NHS Wales staff) and nurturing healthy working environments which was lower than the all NHS Wales staff figure (**58.6%** for SLT respondents in comparison to **58.9%** of all NHS Wales staff.)

As we argued in the 2025 report<sup>9</sup>, our evidence on retention suggests that further work is required on supporting work life balance and flexible career opportunities to meet changing needs.

In the 2025 report<sup>10</sup>, we called for greater support for continuing professional development (CPD) at all levels including removing barriers preventing AHPs being able to develop their skills – for example, pressing on the UK Government to start the process of extending independent prescribing responsibilities to Allied Health Professionals (AHPs) so they can deliver better care.

<sup>9</sup> Royal College of Speech and Language Therapists (2025). State of the nation report – the speech and language therapy workforce in Wales. [https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report\\_English-version-January-2025.pdf](https://www.rcslt.org/wp-content/uploads/2025/01/RCSLT-Wales-State-of-the-Nation-report_English-version-January-2025.pdf)

<sup>10</sup> Ibid



# Retention of the existing workforce



- We also recommended investment in advanced practice and consultant roles to enable AHPs to work at the top of their licence and transform care pathways. It is disappointing to see little progress on these key areas which remain ongoing priorities for the profession.

Technology continues to transform health and social care. SLTs have been at the forefront of introducing telehealth and engagement with our members indicates a strong appetite for increasing digital capability and harnessing the possibilities of artificial intelligence (AI). RCSLT Wales has been supporting members with professional learning around AI but we continue to call for further support from Digital Health and Care Wales to ensure that SLTs, as part of the wider AHP group, develop the skills and capabilities required to deliver service and digital transformation.

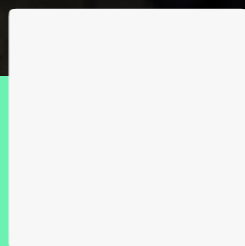


## Recommendations

- As a minimum, restore speech and language therapy training places to 2025/26 levels with a view to increasing places in future years to take account of increased need and new models of care.
- Introduce earn as you learn opportunities for speech and language therapy to maximise the potential to grow the workforce.
- Recognise the importance of continuous professional development and protected time and resources as part of established job planning.
- Ensure the availability of advanced and consultant speech and language therapist roles to support retention.
- A greater focus from Digital Health and Care Wales on increasing the digital literacy of the speech and language therapy workforce, as part of the wider AHP group.

# Recommendations

- 1** As a minimum, restore speech and language therapy training places to 2025/26 levels with a view to increasing places in future years to take account of increased need and new models of care.
- 2** Introduce earn as you learn opportunities for speech and language therapy to maximise the potential to grow the workforce.
- 3** Ensure sustainable funding for speech and language therapy services to meet growing demand, particularly in clinical areas where our benchmarking analysis shows services are not meeting workforce recommendations.
- 4** Improve data collection on the composition of the profession to allow us to better reflect the communities that we serve including support to improve our understanding of the Welsh language skills of our existing workforce and requirements for the future.
- 5** Introduce better, more sophisticated workforce planning for the profession as part of the preventative agenda, taking account of the need to meet standards and demand from new sectors.
- 6** Prioritise creation of Welsh language assessments in areas such as dementia and stroke.
- 7** Recognise the importance of continuous professional development and protected time and resources as part of established job planning.
- 8** Ensure the availability of advanced and consultant speech and language therapist roles to support retention.



“

Just wanted to share with you that my son loves his communication book and it is already part of his daily routines. He enjoys looking at the pictures with me when I'm looking through and using them. Also, this morning, when I was getting him dressed for school he pointed to the glasses picture on personal care to remind me to put his glasses on which helped me remember them. So proud of him. I'm using "Good Boy" frequently, we used "choose" and "fruit pouch". I put them in a row and he picked the one he'd like with his breakfast.



“

It is nice to see you both have fun during the sessions. He has improved so much. It's good you can make it fun for him.



“

I feel my word finding has gotten better. I've enjoyed our sessions together. It's a 10/10 from me.



“

Without my speech and language therapist, I would not have had the skills and knowledge and confidence to speak as I do. The speech and language therapist's input, time, patience and understanding and ability to increase my confidence have been second to none. As one of the most patient people I have ever met, my speech and language therapist has talked me through an arduous process of getting my voice back. Although it doesn't always stay that way, my speech and language therapist has given me lots of exercises, tips and an understanding of how my brain and voice box work. This support has been invaluable and has allowed me to improve my understanding of myself, improve my communication skills within my relationships, friendships, work and social life. Having the confidence to know that even if I can't 'get the word out' or pronounce it properly, I can find another word and practise saying the word I want later in my own time.

“

Thank you for your help and support with my daughter. I truly believe that you have been our saving grace in getting my daughter the support she needs and I'm so grateful for all you have done.

“

Just wanted to share some positive feedback already. After I had recovered from surgery, I had appointments back at the hospital with both speech and language therapy and psychology. This appointment was a lovely way to show where my speech and memory function was after surgery, to hear from the experts on what their thoughts of where function levels were and what I could do to continue to improve my brain function.



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