RCSLT webinar - Speech and Language Therapist Advanced Practitioners: From opportunity to reality

FAQs

1. **Can you clarify the timeline for this programme, including the 3-year funding period, recruitment, publication of guidance and how learning from the early adopter sites will be shared?**

The funding timeframe for the SaLT AP is linked to SEND Reform and set out in Every child achieving and thriving - GOV.UK and Experts at Hand & Local Authority SEND Transformation Fund: funding for local authorities 2026 to 2027 - GOV.UK. Further, more detailed information was provided in Developing and delivering the Experts at Hand offer in year 1: supporting guidance - GOV.UK. The funding is for three years, with the final year 2028/2029.

Year 1 funding was issued as part of Experts at Hand, paid on the 30th June 2026. This is for the period April 2026 to March 2027.

The recruitment of the SaLT AP will be in two phases, with phase 1 for early adopters starting now and the second phase in the autumn where guidance will be shared with all areas to ensure consistency.

2. **What is the long-term funding and sustainability plan for both the Advanced Practitioner and Experts at Hand programmes, including confirmation of funding beyond Year 1 and options for fixed-term appointments or secondments?**

The indicative national funding for year 2 and 3 has been published on the 15th April 2026 (see Experts at Hand & Local Authority SEND Transformation Fund guidance). While the Department has published an indicative national funding profile for Years 2 and 3 to support planning, individual local authority allocations for those years have not yet been confirmed. The funding methodology and allocations for Years 2 and 3 will be published ahead of those funding periods.

It may be possible for ICBs to offer flexible arrangements such as part time roles, job shares and secondments roles; however, this will need to be locally determined.

3. **What learning can be gained from the SaLT Advanced Practitioner early adopter sites so far?**

There are 12 ICBs who have volunteered to be early adopters across 6 NHSE regions: (North West, North East and Yorkshire, Midlands, South East, South West & East of England). Of those 12 ICBs, 6 have worked with their local authority partners to fund

roles at an equivalent of NHS Agenda for Change 8b, and ten have allocated more than 1 WTE post to the SaLT advanced practitioner role across their ICB footprint.

4. **How will the SaLT Advanced Practitioner (AP) role be positioned within local systems, and how will it work alongside existing structures such as Experts at Hand, Designated Clinical Officers (DCOs), local authority teams, and provider leadership?**

The SaLT AP role is a strategic, population-level, clinical speech and language therapy role focused on strengthening the speech and language therapy workforce for education settings and system improvement. It is not an extension of local service delivery or part of the Experts at Hand service.

There is no mandated host organisation. ICBs will work with their local area SEND partnerships to agree local arrangements for the role which may include positioning in an ICB, a host local authority or a healthcare provider organisation. The SaLT AP will need to connect with universities, local authorities, education settings, ICB colleagues (such as DCOs), local providers and other agencies within their local SEND partnerships to enable them to enhance the pipeline of speech and language therapists working in education settings and support them to understand the needs and services across the ICB footprint.

5. **How will the AP role avoid duplication of provision and support greater consistency across NHS providers, local authorities, schools, and independent practitioners within an ICB footprint?**

Given the SaLT advanced practitioner role will be employed across an ICB footprint, they will be well placed to work with commissioners and system partners to embed evidence-based, scalable solutions which improve access to speech and language expertise in mainstream education settings and consistency of approach.

6. **How will independent, commissioned, school-employed, and non-NHS Speech and Language Therapists be included in the AP pathway and wider workforce development plans?**

The SaLT AP role will require significant experience of and clinical expertise in speech and language therapy practice and working with children and young people in education settings (0–25). That experience can be gained working in a range of contexts, including independent practice or direct education employment, in addition to the NHS.

Once in post the SaLT AP will need to understand the different organisations delivering speech and language therapy across the ICB footprint identifying opportunities to

strengthen the SaLT workforce for education settings and work with a range of different partners such as non NHS provider organisations.

7. **Is there a standardised set of competencies and/or a particular qualification for this role?**

The role is explicitly aligned to the NHSE Multi-professional Framework for Advanced Practice (2025)

In recognition that speech and language therapists have not had equitable access to formal advanced practice routes, employers are encouraged to accept equivalent experiential learning rather than requiring a particular qualification.

The post-holder will be expected to make a commitment to either achieving an MSc Advanced Practice or completing the ePortfolio (supported) Route.

8. **What are the expectations for recruitment, hosting arrangements, governance, and accountability, particularly where the role is hosted by an ICB rather than a provider organisation?**

ICBs and their SEND partnerships are encouraged to promote this opportunity as widely as possible through established professional networks across health and education systems and maximise reach. To further increase visibility and attract candidates with the breadth of experience required for this strategic, system-facing role, ICBs should consider using a wider range of advertising routes. This includes, but should not be limited to, NHS Jobs, alongside promotion through professional networks and platforms such as LinkedIn.

ICBs and their local area partners will need to agree appropriate governance routes making sure they are integrated with existing governance processes for SEND in the ICB and aligned to SEND governance arrangements in the local area SEND partnerships covered by the ICB.

9. **Is there sufficient workforce readiness to implement these roles, and what development pathways, training, supervision, accreditation, Master's-level study, and equivalence routes will be available to support aspiring Advanced Practitioners?**

The speech and language therapists applying for the roles need to have the right clinical experience and have extensive knowledge and skills in delivering services to children and young people in their education settings. We believe that there are speech and

language therapists working in services that have the right level or experience and skills but have had limited opportunities for career development and this offers a fantastic opportunity to do so.

The aim is to use this opportunity to enable colleagues to evidence their 'equivalence' . We are also working with a university to develop a meaningful training programme to support development and identifying funding opportunities for this.

10. **Will there be national guidance and job descriptions to ensure consistency of implementation across England?**

To support consistency, guidance to support ICBs to develop their job descriptions and their approach to recruitment is due to be published in the autumn. This will ensure there are some key commonalities. Given this is a new role, local areas will have some flexibility to adapt to their local context and develop innovative ways of working, contributing to the local, regional and national knowledge base around best practice.

11. **How will the AP role support workforce development across the whole 0–25 pathway, including early years, further education, students, apprentices, qualified clinicians, and part-time staff?**

The SaLT AP will collaborate with Higher Education Institutions (HEIs) and system partners to secure and optimise high-quality clinical placements across education settings and age ranges (0–25), including early years and post-16 provision. They will work with system leaders to develop sustainable workforce pipeline solutions, increasing the flow of therapists into education-based and population-level roles.

12. **How do you anticipate this role will impact the pipeline of SLT? What levers will the ICB have over higher education?**

The role will need to build joint working relationships with HEIs that seek SLT placements and work with education settings to increase the opportunities for student placements in education settings. The SaLT AP will work closely with the Committee of Representatives of Education in Speech and Language Therapy (CREST) which includes representatives from the each of the HEIs that provide accredited SLT courses, as well as the SLT placement network and national government departments such as the Department of Health and Social Care and the Department of Work and Pensions to look at challenges and opportunities in the current pipeline and future needs. It is hoped that with more students having successful placements in education settings we will see more qualified SLTs seeking employment in education, therefore increasing the

pipeline. By using a population health/population needs approach, the focus can be on increasing placement opportunities in areas where children have the highest needs.