

**National Assembly for Wales Health, Social Care and Sport Committee Consultation on an inquiry into the Sustainability of the Health and Social Care Workforce**

1. **Executive Summary**
	1. The Royal College of Speech and Language Therapists (RCSLT) Wales welcomes the opportunity to comment on the sustainability of the health and social care workforce**.** We are pleased to see that this issue of concern is being prioritized by the committee. Our response below provides brief background on the speech and language therapy (SLT) workforce in Wales and responds to the five key questions posed within the consultation document.
	2. Our key points include;
* The pressing need to consider the impact of increased integration within health and social care on data collected to ensure effective strategic planning.
* The importance of fully utilizing the skills of the Allied Health professions, in particular SLTs.
* Concerns around band 8 posts and roles that support low incidence/high specialty roles.
* Issues with regard to recruitment in Pembrokeshire, Ceredigion, North West Wales and Powys.
	1. We also wish to highlight that we are co-signatories of the ‘One Workforce’ document developed by the Policy Forum.
1. **About the Royal College of Speech and Language Therapists**
	1. The Royal College of Speech and Language Therapists (RCSLT) is the professional body for speech and language therapists (SLTs), SLT students and support workers working in the UK. The RCSLT has 15,000 members in the UK (450 in Wales) representing approximately 95% of SLTs working in the UK (who are registered with the Health & Care Professions Council). We promote excellence in practice and influence health, education, care and justice policies.
2. **About the Speech and Language Therapy Workforce in Wales**
	1. SLTs provide life-improving treatment, support and care for people who have difficulties with speech, language or communication or eating, drinking or swallowing problems. SLTs are central to the provision of safe, value for money healthcare and supporting the delivery of NHS priorities. From helping babies with cleft lip and palate, to supporting people recovering from a stroke or older people living with dementia, speech and language therapy transforms lives.
	2. Recent analysis of the SLT workforce in Wales employed by Local Health Boards (LHBs) across paediatric and adult services indicates 462 full time equivalent SLTs and Assistants. Ratio of the population to SLT and SLTA differ significantly between LHBs. From 1 member of the SLT support team to 8899 persons in Aneurin Bevan University Health Board to 1 member of the SLT support team to 5485 persons in Hywel Dda. SLTs are predominantly a female workforce. Part-time working is widespread and maternity leave cover is an ongoing consideration. The average age of the workforce in Wales is 39.
3. **Do we have an accurate picture of the current health and social care workforce? Are there any data gaps?**
	1. Whilst NHS Workforce Education and Development Services are able to provide useful data on numbers of qualified staff, average age and staff retention figures, we have concerns with regards a number of data gaps which affect the ability of the SLT workforce to plan strategically at a national level. This is particularly an issue in areas of Speech and language therapy where we are working to a social care model. A significant amount of service provision within this area is delivered to ‘care’ staff (Social Services and third sector) e.g. training and support and there is an expectation that intervention is delegated. Due to the current separation of data between health and social services, we currently lack information at a national level on our input into social care which hinders the ability of staff to realistically plan and respond to need. Greater integration of health and social care will require a fundamental review of data collected.
4. **Is there a clear understanding of the Welsh Government’s vision for health and care services and the workforce needed to deliver this?**
	1. RCSLT Wales believes that following the enactment of key legislation to support integration between health and social care such as the Social Services and Wellbeing Act and the Wellbeing of Future Generation Act, there is a pressing need to create a new vision for health and care services in Wales and the changing workforce required to deliver this. Such a vision must be co-designed by both those using the health and care system and those working within it and must address challenges such as sustainable funding, integration and the need to focus on wellbeing and prevention.
5. **How well equipped is the workforce to meet future health and care needs?**
	1. RCSLT Wales believes that in order to respond to the dual challenge of budget pressures and a rising population with complex needs, it is vital that the skills of allied health professionals, and in particular SLTs are used more fully. As highlighted by the Nuffield Trust, there is a need to reshape the health workforce to deliver the care that patients need and alleviate pressures on the health system[[1]](#footnote-1). SLT as a profession has developed considerably over recent years to adopt a more consultative, collaborative approach. The profession has a vital role to play in the delivery of new models of care and shifting care from hospitals to community settings. The SLT workforce already provides preventative health care in local communities and is skilled in multidisciplinary team working and the delivery of integrated care. This is an increasing focus within the undergraduate training course.
	2. SLTs are engaged in a number of roles as part of primary care teams, for example, SLTs provide telephone triage to care homes managing the communication and swallowing problems of those in their care, removing the need for a GP visit. They provide training to care home staff and others in the community to manage decline in swallowing performance from age and disease, which reduces morbidity, mortality and prevent hospital admissions. SLT has been developing efficient and effective telehealth solutions in this regard. Published evidence already indicates that interventions delivered by SLTs can provide economic benefits. For example, social return on investment research has highlighted the value of the provision of speech and language therapy for post-acute stroke patients.[[1]](http://data.parliament.uk/writtenevidence/committeeevidence.svc/evidencedocument/health-committee/primary-care/written/20320.html#_ftn2) Evidence from a telehealth project in care homes has indicating savings of £60 on each tele swallowing assessment[[2]](#footnote-2).
	3. Our members have informed us that due to budgetary pressures, many band 8 specialist roles are under threat. Given the importance of these roles both to the preventative agenda and to the development of career progression routes for the profession in Wales, we would be keen to see acknowledgement of the key role of SLTs in the NHS workforce of the future. There is also a clear need to acknowledge the importance of development roles and building in research capacity to ensure the sustainability of services and effective succession planning.
	4. We also have concerns about the current ability of the profession to respond to the need to provide 7 day services, given the relatively small SLT workforce across Wales and future recruitment of staff to low incidence, high speciality posts e.g. paediatric dysphagia
6. **What are the factors that influence recruitment and retention of staff across Wales?**
	1. Feedback from our membership suggests that the following factors are key to the recruitment and retention of staff.
* Evidence that the workforce is valued and well supported by the employer. For example, posts banded appropriately, realistic capacity/demand, continuous professional development supported, robust personal appraisal development reviews and supervision processes, flexibility.
* Opportunities for varied clinical placements for students undertaking the speech and language therapy undergraduate course, including experience of multi-disciplinary team working to ensure education and training appropriately prepares students for the workplace.
* Appropriate skill mix.
* Good use of career fairs etc., particularly at the time when students are choosing A level subjects and seriously thinking about future careers.
* Pay and terms of employment.
1. **Are there particular issues in some geographic areas, rural or urban areas, or areas of deprivation?**
	1. The rurality of Wales presents a number of challenges to the delivery of high quality health and care services. SLTs in Wales are currently developing a range of telehealth projects to support access to specialist services within more rural communities. As an example, the Macmillan Telemedicine project is a joint project between Abertawe Bro Morgannwg University Health Board and Hywel Dda University Health Board which enables people affected by head and neck cancers in sites across Hywel Dda University Health Board to access consultations via videoconference removing the need to travel to Singleton Hospital for appointments.
	2. We have particular issues with regards recruitment to posts within Ceredigion, Pembrokeshire, and North Powys and Welsh speaking posts within North West Wales.
2. **Further Information**
	1. We would be happy to provide any additional information required to support the Committee’s decision making and scrutiny. For further information, please contact:

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1. Nuffield Trust (2016) Reshaping the workforce to deliver the care patients need: <http://www.nuffieldtrust.org.uk/sites/files/nuffield/publication/reshaping_the_workforce_web_0.pdf> [↑](#footnote-ref-1)
2. University College London (2016) London Speech and Language Therapy workforce scoping project, phase 2: modelling workforce transformation example, report available upon request. [↑](#footnote-ref-2)