



## House of Commons Education Committee: Special educational needs and disabilities RCSLT response

The Education Select Committee has today published [Special educational needs and disabilities](#). The report follows an 18 month inquiry into Government reforms to the system of support for children and young people with special educational needs and disabilities (SEND).

The Committee conclude that while the reforms were the right ones, poor implementation has resulted in a system of unmet need, creating poor experiences for children, young people and their families. The report highlights the impact of overstretched therapy services, including speech and language therapy, on local authorities, schools, therapists themselves, and ultimately the children and young people who need their support.

*“Speech and language therapy (SALT) in particular seemed to be a particular challenge”  
(Education Committee, para 183)*

### **Recommendations**

The RCSLT supports the Committee’s recommendations listed below which we believe have the potential to improve access to speech and language therapy for those children and young people who need it.

#### **A strategy to improve access to therapies**

- The Government should map therapy provision across the country – and that this should be a priority and published as soon as it is completed.
- The Government should set out a clear strategy to address the problem.

#### **Needs-led provision:**

- The Department for Education’s SEND review should fundamentally address the relationship between need and available provision.

#### **Children on SEN support**

- The Department for Education should strengthen the guidance in the Code of Practice on SEN Support to provide greater clarity over how children should be supported.
- Ofsted must deliver a clear judgement on whether schools are delivering for individual children with SEND, with a particular focus on pupils on SEN support.

#### **Increased accountability:**

- The Department for Health and Social Care, NHS England, and the Department for Education should design an outcomes framework that local authorities and CCGs are held jointly responsible for, to measure the health-related delivery of support for children and young people with SEND.
- Ofsted and CQC should clearly set out the consequences for local authorities and health bodies that fail their SEND inspection.

The Department for Education’s SEND review urgently needs to address the challenges set out in the report; to do this it must be conducted jointly with the Department of Health and Social Care. We stand ready to work alongside both departments to bring about the changes needed to improve access to speech and language therapy for children and young people with SEND.

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## Evidence from the Royal College of Speech and Language Therapists

The report cites evidence provided by the RCSLT, through both our [written submission](#) and [oral evidence provided by Michelle Morris](#), Consultant Speech and Language Therapist / Designated Clinical Officer at Salford CCG, who represented the RCSLT as a witness. Relevant extracts are included below, with RCSLT contributions highlighted in bold.

175. We were told that pupils with SEND who did not have an EHCP were not benefiting from the reforms. **The Royal College of Speech and Language Therapists said that before the reforms were implemented, it had predicted that the weaknesses in the joint commissioning duty would impact on services for those without EHCPs.** This appears to have been borne out, as we heard that there were children known to occupational therapists who did not have an EHCP and did not benefit from co-ordinated support, **while there were therapists who did not have the time to work with pupils who did not have an EHCP.**

176. **Therapists reported being overstretched and having long waiting lists, either because there were not sufficient therapists, or because there was not adequate provision in an area due to reduced budgets and growing caseloads. Although we heard that every plan in Greater Manchester that required it had health input, it was acknowledged more broadly that a shortage of therapists would impact on the quality of plans that were being written.**

178. The Department for Health and Social Care told us that it did not tell Clinical Commissioning Groups how they should spend their budgets. It did however, set clear messages about what its priority is, through its long term plan and the four clinical priorities, of which learning disability and autism is one. The Department said that the expectation in the legislation was for partnership working and where there were arguments about who pays, this indicated a failure of partnership working. **The Royal College of Speech and Language Therapists told us that there was a lack of joint commissioning in many areas, and a lack of a common definition of what joint commissioning was.**

181. **We heard about the benefits and importance of multidisciplinary working, and how that helped to break down barriers. Unfortunately, we were told it required strong leadership, time and effort, and ultimately was only happening in some areas of the country.**

197. **We heard from therapists that many young people struggled to access therapies, particularly occupational therapy and speech and language therapy, because they were not commissioned post-18.**

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