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Mr Franck David Assistant Clerk Public Petitions Committee TG.01 The Scottish Parliament Edinburgh EH99 1SP

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Dear Mr David

Consideration of PE1384

Petition by Kim Harley on behalf of the Royal College of Speech and Language Therapists calling on the Scottish Parliament to urge the Scottish Government to demonstrate how its policies and guidelines ensure local authorities and NHS Boards protect the provision of quality speech and language therapy services for all people with speech/language communication support needs and/or swallowing difficulties.

Thank you for your letter of 26 January 2011 to Roy Sturrock, Office of DG Health and Social Care, seeking views on Petition PE1384.

The Scottish Government has a range of policies to support the inclusion, preventative/self-managed care and health improvement agendas. These include *Getting it right for every child*, *Curriculum for Excellence*, *The Early Years Framework*, *Equally Well*, *Shifting the Balance of Care* and the *Healthcare Quality Strategy*. These policies impact on services providing support for people with communications difficulties. In response, Allied Health Professionals (AHPs), including Speech and Language Therapists (SLTs), have broadened their roles to provide more flexible ways of working and enhance their contribution to the delivery of safe, effective and person centred services. New models of service delivery build on a strong partnership approach and enable existing resources to impact more effectively through close working within the team around the patient, thus building capacity in the wider workforce. For children specifically, enriching learning through embedding therapy approaches within the curriculum alongside teaching and learning ensures early impact which has the benefit of supporting parents in helping their children.

The Education (Additional Support for Learning) (Scotland) Act 2004 places duties on appropriate agencies, including NHS Boards, to help education authorities deliver their duties for children and young people. In practical terms, these services are most often provided by Allied Health Professionals (AHPs), including SLTs. The statutory duties afford some protection to services. The recent publication, *Guidance on Partnership Working between Allied Health Professionals and Education*, clearly demonstrates the benefits of







multi-agency working to deliver positive outcomes for children and young people. The guidance sets out practice models which evidence this.

Additional evidence is provided by Her Majesty's Inspectorate of Education, through routine inspection of schools and educational services, and through specific enquiries and reports such as the report on the implementation of the Education (Additional Support for Learning) (Scotland) Act 2004 (2007) and the Review of the Additional Support for Learning Act: Adding Benefits for Learners (2010). The Early Years Framework contains a national indicator on speech and language development skills which will be reported against and reporting on national indicators and outcomes for children and young people will also provide evidence.

In addition, the Scottish Government has recently appointed an AHP National Lead for Children & Young People who will provide national leadership and advice for AHPs who work with this client group. She will be contacting lead SLTs working with children and young people, to discuss how best to support the profession in local authorities and NHS Boards and at a national level.

The specific points raised by the petitioner are addressed below:

A: The Scottish Government should act to encourage NHS Boards and local Authorities to protect access to Speech and Language Therapy (SLT) services for people with communication support needs and/or swallowing difficulties to at least current (December 2010) levels.

I can assure you that the Scottish Government is committed to ensuring that all patients have appropriate and timeous access to the services they need in NHS Scotland. It is, however, for NHS Boards and local authorities to determine the level of service provision required for speech and language therapy based on local needs.

The latest available statistics show that there were 980.3 whole time equivalent Speech & Language Therapists in NHS Scotland at September 2010, a small decrease of 2.3% from September 2009. However, since 2007 the number of Speech and Language Therapists has increased by 4.1% and vacancies are low at only 1% of the establishment.

B: The Scottish Government should develop and implement a communication action plan for Scotland's children and young people.

Adam Ingram, Minister for Children and Early Years met with representatives from Afasic Scotland (an organisation which supports parents of children and young people with speech, language and communication needs), I CAN (a children's communication charity) and the Royal College of Speech and Language Therapy (RCSLT) in December 2009 and agreed to consider the development of a Communication Action Plan. In addition, the Literacy Action Plan - a national plan which sets out the approach to enabling children, young people and adults to have literacy skills was published in November 2010. This provides a solid context for the development of the Communications Action Plan bringing together key policies and models of practice which support the development of literacy skills. It is anticipated that a communication plan will be produced in early 2011.







The petitioner also asked that the Communication Plan addresses specific issues:

- 1. Recent guidance *The New Look at Hall 4* re-introduces a 24-30 month review and states that this should include speech, language and communication. The universal core programme for child health screening and surveillance set out in *Health for All Children 4: Guidance on Implementation in Scotland* states that any physical, developmental or emotional problems that had been missed be identified on entry to primary school and for intervention to be initiated.
- 2. There are no plans to introduce screening of young people as they enter secondary school. There are mechanisms already in place as part of learning to ensure that children and young people's additional support needs, including those arising from communication skills, are identified and addressed throughout their education. Children and young people can be assessed at any time, at the request of their parents or their school. Under the 2009 amendments to the [Additional Support for Learning Act] parents can request specific assessments which must be carried out within specified timescales.
- 3. It is for local authorities and NHS Boards to plan services to meet local needs. The Literacy Action plan sets out the aim for the improvement of literacy skills in Scotland. The Communication Action Plan will show how the national framework of policies and guidelines support children and young people with communication needs, particularly in the early years and supports language development, as a pre-cursor to the development of literacy skills.

C: The Scottish Government should ensure that Speech and Language Therapists are employed as core members of the multi disciplinary teams.

The majority of Speech and Language Therapist's already work in partnership across health, education and social care and are, in many instances, key members of multi disciplinary teams.

On the specific points raised by the petitioner:

- AHP Directors in Scotland have agreed to implement a national data set for AHPs which will be rolled out in 2011/12. Speech and Language Therapists already hold data on patients they see with communication difficulties. They are, therefore, well placed to support NHS Boards to enhance their data collection and needs assessment approach.
- To assist with workforce planning in NHS Boards, a community Allied Health Professions workforce scoping exercise has been commissioned; this will provide benchmark demographic information about AHPs, including SLTs. This project will provide us with data and identify issues which need to be addressed and provide recommendations for future workforce planning.
- Speech and language therapy can be accessed through a variety of routes, including self referral as well as from other professionals such as GPs, teachers or nursery staff.
 SLTs work in a variety of settings such as nurseries, schools, clinics and other locations in the community as well as in hospitals.







D: The Scottish Government should establish Speech and Language Therapy services through out Scotland's justice system.

The responsibility for primary health care services for prisoners is in the process of transferring from the Scottish Prison Service (SPS) to the NHS Boards in which prisons are situated. SLT services have traditionally been delivered to prisoners through contracts with NHS Boards; the resources for these contracts will be transferred to the appropriate NHS Board who will then deliver the services direct. Each NHS Board has produced a plan for SPS which outlines how they plan to deliver and manage the primary health services for prisoners.

The AHP Officer for Primary Care at the Scottish Government has met with the SPS Transfer Team on several occasions and highlighted the need to ensure that AHP services including SLT are included in the plans; they have also briefed the AHP Directors in NHS Boards about the transfer of services and stressed the importance of them being involved in the plans for transfer. In the future there will be opportunity for the Boards to prioritise and plan for any changes to the services based on the identified needs of prisoners. It will be for AHP Directors to continue to be involved in the planning and delivery of prison health care services within their own NHS Board and to highlight any unmet need for AHP services, including SLT. The AHP Officer for Primary Care will continue to act as a conduit between SPS and AHP Directors, but the responsibility for identifying and prioritising the health needs of prisoners, including SLT, lies with NHS Boards.

I hope this re-assures the Petitions Committee that the Scottish Government has policies in place to support the provision of high quality speech and language therapy services for all those with speech, language, communication and/or swallowing difficulties.

Yours sincerely

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Chief Health Professions Officer





