

January 2025 State of the Nation Report The Speech and Language Therapy Workforce in Wales



SLT advice and reassurance has been invaluable. They provided emotional and practical support. They took time to observe her eating and drinking, it wasn't a rushed assessment. They reassured me and my concerns. They provided me with tools, like a drinking cup and understanding the right thickener levels to support mum. I have a list of practical items that I use as a checklist to support mum thanks to their help.

Daughter and carer of mum with dementia

I had parents evening today and they said about how well he is doing with his speech and stuff I just wanna say thank you so much for what you're doing with him as everyone counting myself can see a big change in his speech and loads of people are understanding him more and not looking at me to ask what did he just say, so again a massive thank you xx

Mum of child with speech sound disorder

...I lost my voice for a prolonged period of time which meant I had to take time off work. This was a particularly difficult time and undoubtedly had a significant negative impact on my general wellbeing as well as being costly for the school. I was fortunate to be supported by members of your teams during this time and am extremely grateful for their help and support which has meant I'm back in work full time with additional confidence that I have the knowledge of how to take better care of my voice which is so essential for us as teachers.

Feedback from a teacher with regards voice service

I just wanted to say Thank
You so much for all your time,
support and expertise, you
have been an integral person
who has helped me understand
my son and ensure he is
supported in all his educational
settings, we will forever be
grateful for the knowledge you
have shared with us.

Mum of child with Developmental Language Disorder

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From our Head of Wales Office



Pippa Cotterill

Head of Wales Office,
Royal College of Speech
and Language
Therapists

It is incredible to know that there was just one person in Wales on the register of the College of Speech Therapists when it was established in 1945 and that there are hundreds of us now. My connection with the Royal College of Speech and Language Therapists (RCSLT) goes back over 25 years. We are a thriving profession because of our professional body members, previous and current, and will, I am sure continue to develop. The passion that links so many of us in the

profession is directly linked with priorities for Welsh Government, those of reducing health inequalities, enabling children in their early years and through their education, working with patients close to their homes.

This report highlights aspects of speech and language therapy in Wales and the high level and increasing demand for our work. The difference that members of the profession make to people at every age and stage of their lives in the areas of speech, language, communication and swallowing means there is much more that we could and should be doing.

I am very proud to be Head of the Wales Office for the RCSLT and the work of the profession in the past, present and look to a future where we continue to transform lives.



From our Chief Executive



Steve Jamieson
Chief Executive,
Royal College of Speech
and Language
Therapists

I warmly welcome the publication of this important report on the occasion of the 80th anniversary of the RCSLT. Since becoming Chief Executive of the RCSLT in 2023, I've been struck by the innovative work of our Welsh members. Wales is leading the way on a number of areas across the UK including the first national speech, language and communication delivery plan and national speech, language and communication coordinator post within Welsh Government and the development of the All

Wales Clinical Pathways. This report represents an important opportunity to reflect on the diversity of the areas in which the profession is now working in Wales, to understand demand and the profile of our current workforce and set out our vision for the future. We are extremely grateful to the members who have given their time as part of the advisory group to shape the content for this report.

Speech and language therapy is central to preventive care and early intervention yet, as across the UK, the speech and language therapy profession in Wales is a profession under pressure. As the report makes clear, we haven't seen the investment needed to support and grow the speech and language therapy workforce to maximise its potential. The report's recommendations provide a blueprint for what needs to happen to drive change. As a matter

of urgency, we need to see investment both in roles and sustained increases in student numbers as part of a more sophisticated approach to workforce planning. We must prioritise achieving greater diversity in routes into the profession and a clear focus on retention of the existing workforce through improving leadership opportunities and protecting time for continuous professional development.

At RCSLT, our mission is to is to enable better lives for people with communication and swallowing needs. I hope that this report can play a key role in achieving the step change needed for the thousands of people in Wales requiring speech and language therapy support.



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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 also provide training and strategies to the wider health and social care, education and justice workforce.

In recent years we have transformed the way we work as a profession, in particular in children's services, to a universal, targeted and specialist model. We are increasingly focussed on working with those closest to the person including their family and their setting (for example, school, nursery, care home) in order to make the most difference.

Who benefits from speech and language therapy?

Speech and language therapy benefits people of all ages;

Babies



Research indicates that babies admitted to neonatal units are at risk of feeding and early communication difficulties.^{1, 2} SLTs support premature babies and infants from very early in life who have difficulties with drinking, swallowing and early play and communication skills, as a result of premature birth, genetic or neurological conditions.

Early years



Over 10% of children and young people have long-term communication needs.³ Research suggests that there is a high incidence of poorer early language skills in socially deprived areas. 32% of children with speech, language and communication needs (SLCN) live in areas of high social disadvantage.⁴

School-aged children



The speech and language therapy workforce works directly with children, young people and their families to develop personalised strategies to support them to communicate to the best of their ability. We also provide training and strategies to the wider workforce such as teachers and teaching assistants so that they can identify the signs of SLCN, improve the communication environment of people with SLCN and reduce the impact of needs whether they are transient or persistent.

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.

Research shows that **50%-90%** of the learning disabled population have communication difficulties.⁵

Research suggests that **64%** of inpatient stroke survivors have some level of communication difficulties following a stroke.⁶

Research has found that dysphagia (swallowing difficulties) affects **50-60%** of head and neck cancer survivors.⁷

The speech and language therapy workforce has a key role to play in supporting the frail, elderly population. 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.

There is a high association between frailty in older adults and eating, drinking and swallowing (EDS) difficulties.⁸ For those over 80, the incidence of EDS during acute admission to hospital is up to **82.4%**.⁹

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

² Gewolb, IH, Vice, FL, Schweitzer, EL, Taciak, VL, Qureshi, M & Bosma, JF (1999). Developmental Patterns of Rhythmic Suckle and Swallow in Preterm Infants. Pediatric Research. Apr 1;45:199A

³ Hartshorne, M (2006). The Cost to the Nation of Children's Poor Communication. ICAN Talk Series, No.2. London: ICAN

⁴ Pupil Level Annual School Census (PLASC), (2023). Speech, Language & Communication Needs Why do they matter and what can we do? https://statswales.gov.wales/Catalogue/Education-and-Skills/Schools-and-Teachers/Schools-Census/Pupil-Level-Annual-School-Census/Special-Educational-Needs

⁵ Enderby, P, and Davies, P, (1989). Communication Disorders: planning a service to meet the needs. BJDC; 24, 151-166.

⁶ 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.

⁷ Zebralla, V, Wichmann, G, Pirlich, M, Hammermuller, C, Berger, T, Zimmermann, K, Neumuth, T, Mehnert-Theuerkauf, K, Dietz, A, Hinz, A & Wiegand, S, (2021). Dysphagia, voice problems, and pain in head and neck cancer patients. Eur Arch Otorhinolaryngol 278, 3985–3994 https://doi.org/10.1007/s00405-020-06584-6

⁸ Bahat, G, Yilmaz, O, Durmazoglu, S, Kilic, C, Tasgioglu, C, Karan, MA, (2019). Association between dysphagia and frailty in community dwelling older adults. The Journal of Nutrition, Health and Ageing;23(6):571-577.doi: 10.1007/s12603-019-1191-0 https://pubmed.ncbi.nlm.nih.gov/31233080/

⁹ Mateos-Nozal, J, Montero-Errasquin, 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/

Who benefits from speech and language therapy?

SLTs work with people of all ages from birth to end of life. They also work across multiple, different clinical areas including;

Neurodevelopmental services

SLTs have a unique role in identifying the social communication characteristics of importance to diagnosis, contributing to differential diagnosis and facilitating identification of abilities and co-morbidities. They also have a key role in educating/training others involved in the care of those with neurodevelopmental conditions.

Justice

■ 71% of children sentenced in the youth justice system in England and Wales (Apr 19 - Mar 20) had SLCN.¹¹ SLTs work directly with young people with SLCN and/or support the staff and wider workforce around them.

Mental health

Research suggests that 81% of children and young people with emotional and behavioural disorders have communication needs not previously identified.¹¹

Research indicates that **80%** of adults with mental health disorders have impairment in language.¹²

SLTs have a unique role to play as members of multidisciplinary mental health teams in identifying communication difficulties and swallowing disorders, in their support and in the management and reduction of associated harm and risk.

10 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

11 Hollo, A, Wehby, J & Oliver, R M, (2014). Unidentified Language Deficits in Children with Emotional and Behavioral Disorders: A Meta-Analysis. Exceptional Children

12 Walsh, I, Regan, J, Sownman, R, Parsons, B, McKay, A P, (2007). A needs analysis for the provision of a speech and language therapy service to adults with mental health disorders. Ir J Psych Med 24(3): 89-93

Gender services

■ Voice and communication are repeatedly reported to be critical factors in achieving congruence. 13 As part of a multidisciplinary team (MDT), SLTs have an essential role to play in ensuring the best possible gender outcomes for trans and non-binary people.

Intensive care

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. 14 SLTs are integral members of the MDT and play a key role in the assessment and management of this complex patient cohort. Due to the growing awareness of the value of the speech and language therapy role in this setting, there is an increasing workforce of SLTs working in this clinical area within Wales.

13 Nygren et al. (2016) Cited in: Adler, R. K., Hirsch, S. and Pickering, J (2019). Voice and communication therapy for the transgender/gender diverse client: a comprehensive clinical guide Third edition. | San Diego, CA: Plural Publishing

14 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/s13054-019-2400-2



of children sentenced in the youth justice system in England and Wales (April 19 - March 20) had speech, language & communication needs.



of children and young people with emotional and behavioural disorders have communication needs not previously identified.



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.



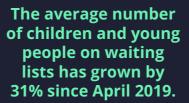
It is acknowledged by Welsh Government that there is a shortage of SLTs in Wales, as indicated by their response to a 2023 Senedd report and during First Minister's questions in October 2024.

'The benefits for young people arising from this recommendation are recognised. However, there are only around 800 registered speech and language therapists in Wales. There are insufficient NHS employed SLTs to meet this additional workload to NHS services. This would require additional training places and workforce supply.'

'The issue is, actually, finding enough speech therapists to support that, and that's not straightforward because, actually, it takes quite a while to train each speech therapist. The demand is increasing constantly, and, obviously, the NHS is very keen to take advantage of those skills as well. So, there's more to do in that space, but we're very aware that there is a need.'2

Overall, the average number of people on waiting lists for speech and language therapy has grown by **33%** since April 2019.³







The average number of adults on waiting lists has grown by 37% since April 2019.



The average number of people on learning disability waiting lists has grown by 43% since April 2019.

¹ Welsh Government (2023). Written response from the Welsh Government to the report by the Equality and Social Justice Committee entitled 60% - Giving them a voice - Speech, Language and Communication Needs in the Youth Justice System, https://sepedd.wales/media/ooth?hpi/gep-ld15904-e.pdf

² First Minister of Wales (2024). First Minister's Questions, Plenary, Senedd Record of Proceedings 8 October 2024. https://record.senedd.wales/Plenary/14139

³ Stats Wales. Data derived from: Diagnostic and Therapy services waiting times by grouped weeks waiting, health board, hospital site and age group, from October 2009 onwards (reviewed August 2024).

Children and young people

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Babies

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. Prematurity can significantly increase the likelihood of swallowing and speech, language and communication difficulties compared with infants born full-term.

Specialist neonatal care capacity needs to keep pace with these advances to improve short and long-term outcomes for these babies. Successive audits of neonatal provision in Wales have highlighted Allied Health Professional (AHP) shortages including SLTs within teams and lack of ring-fenced funding for therapies as a significant concern.

Children's services

35% of children in Wales with Additional Learning Needs (ALN) have speech, language, and communication needs (SLCN). SLCN is the most common type of learning need in Wales. This figure has increased by **17%** since 2022.⁷

In recent years, there has been a consistent increase in the percentage of children with ALN attending special schools rising from **4%** of pupils in 2013/14 to **12%** of pupils in 2023/24.8 Speech and language therapy input to support special school provision has not kept pace with these changes.

It is widely acknowledged that Covid 19 and the subsequent lockdowns have had a significant impact on children's speech, language and communication (SLC) skills. The ICAN report 'Speaking Up for the COVID Generation' revealed that the majority of teachers surveyed across the UK had serious concerns about the impact of the pandemic on children's speaking and understanding. The 2022/23 Estyn report also revealed concerns from teachers in Wales about the impact of the pandemic on children's communication skills.



of children in Wales with additional learning needs have speech, language, and communication needs The 2024 Senedd Children, Young People and Education Committee report on access to childcare and education for disabled children¹¹ included a number of comments on shortages of AHPs, including SLTs and a key recommendation that;

The Welsh Government reviews the current numbers of key allied health professionals, identifies where there are current gaps, how these gaps will be addressed and the numbers needed to support future likely level of need, including the number of training places needed. This should then be supported by a clear delivery plan.'

4 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

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

6 NICE (2017). Developmental follow up of children and born pre-term – NICE guideline [NG72]. https://www.nice.org.uk/guidance/ng72

7 Stats Wales (2024). Pupil level annual school census. https://statswales.gov.wales/ Catalogue/Education-and-Skills/Schools-and-Teachers/Schools-Census/Pupil-Level-Annual-School-Census/Special-Educational-Needs

8 Ibid.

9 ICAN (2021). Speaking Up for the COVID Generation. <u>https://speechandlanguage.org.uk/wp-content/uploads/2023/12/speaking-up-for-the-covid-generation-i-can-report.pdf</u>

10 Estyn (2023). HMCI Annual report 2022-23. https://estyn.gov.wales/app/uploads/2024/10/ Estyn-Annual-Report-2022.23.pdf

11 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

Neurodevelopmental services

Welsh language provision



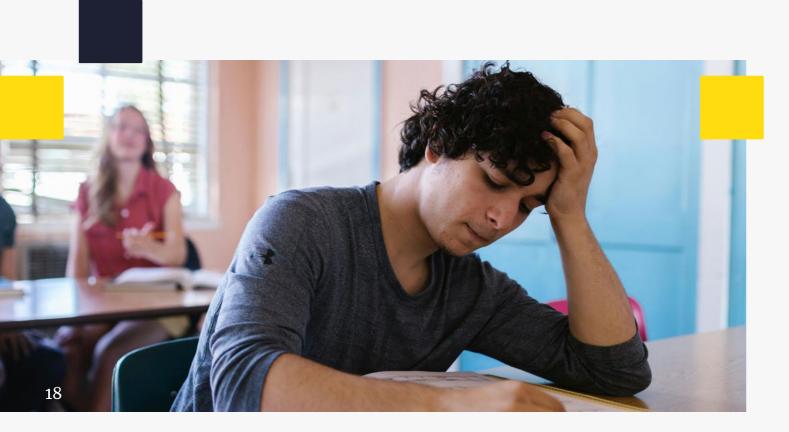
Neurodevelopmental services

A 2022 Welsh Government review of neurodevelopmental services¹² found that growing numbers of children and adults in Wales are seeking a diagnosis of ADHD or autism. In December 2023, there were **16,812** children and young people in Wales waiting for an ADHD or autism neurodevelopment assessment.

In June 2023, **67%** of children and young people waiting for an ADHD or autism neurodevelopmental assessment in Wales had been waiting for 26 weeks or longer.¹³ Demand for SLTs working within neurodevelopmental services continues to grow.

12 Welsh Government (2022). Review of the Demand, Capacity and Design of Neurodevelopmental Services: Full Report https://www.gov.wales/sites/default/files/statistics-and-research/2022-10/review-of-the-demand-capacity-and-design-of-neurodevelopmental-services-full-report-485.pdf

13 Senedd Research (2024). The growing demand for autism and ADHD assessments in Wales. https://research.senedd.wales/research-articles/the-growing-demand-for-adhd-and-autism-assessments-in-wales/#:~:text=Long%20wait%20times,children%20facing%20long%20wait%20times.



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. 14 RCSLT guidelines clearly state that speech and language therapy intervention should be provided in the individual's home language and SLTs should support the family in their use of the home language when necessary/appropriate. 15

Ensuring an adequate supply of Welsh speaking practitioners is a priority in ensuring the availability of Welsh language services. Recent research¹⁶ commissioned by the Stroke Association highlights concerns about the availability of Welsh language speech and language therapy provision for people with aphasia (a disorder in talking, writing and understanding spoken and written language resulting from neurological damage). This area remains an important issue requiring investment. We discuss this further in the current workforce chapter.

14 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

15 Pert, S., & Bradley, B. (2018). Clinical Guidelines for Speech and Language Therapists: Bilingualism: Working with bilingual clients/patients with speech, language and communication needs. Royal College of Speech and Language Therapists. https://www.rcslt.org/clinical_resources/bilingualism/bilingualism_overview

16 Broomfield, K and Williams, C (2024). Experiences of Welsh speaking people with aphasia – Stroke Association/ Cardiff Metropolitan University project 2023.

Adult population





of stroke survivors in Wales reported that they did not receive enough support after a stroke Wales has an older population than the other UK nations and a high proportion of the population living with long term conditions including frailty, dementia, cancer, and poor mental health. There are growing numbers of older people with swallowing and communication needs in our communities requiring rehabilitation support. This support is essential to enable people to remain independent and reduce admissions to emergency units. Yet often we hear from services that they are not putting forward bids for funding streams, which would improve primary and community provision, because of the concerns that there is insufficient speech and language therapist availability to expand into new roles and project work.

We welcome recent, recurrent investment in AHP roles in the community but have longstanding concerns about the existing provision of rehabilitation in Wales. These concerns are reinforced by findings of the SSNAP (Sentinel Stroke National Audit Programme) Therapy Spotlight Report 2024¹⁸ which highlighted that whilst 'there has been a small increase in 2023/24 in the proportion of inpatient days on which therapy was received across therapy disciplines...there has been a decline in the standard of receiving 45 minutes of therapy five days per week since 2022/23 in speech and language therapy'. This suggests that many stroke survivors are not receiving the recommended intensity of therapy.

These concerns are echoed in reports by Senedd cross party groups. A 2020 report from the Stroke Association, based on evidence collated as part of the Stroke Cross Party Group inquiry, revealed that **21%** of stroke survivors in Wales reported that they did not receive enough support after a stroke¹⁹ with only a minority of stroke survivors receiving therapies at guideline levels.²⁰

The Wales Neurological Alliance inquiry into the impact of the Welsh Government's neurological delivery plan highlighted that there remain low levels of availability of community services stating;

'Many poor experiences were described by contributors, in particular in relation to a lack of availability of community based services such as physiotherapy, speech and language therapy, occupational therapy, continence advice and support, services that help people to be physically active, mental health services and emotional support.'21

Adults with learning disabilities

Around 1.5 million people in the UK have a learning disability. Up to 350,000 people have a severe learning disability. Those numbers are increasing, with a predicted **34%** increase of people with severe learning disabilities by 2027.²² Research shows that **89%** of people with learning disabilities need speech and language therapy intervention.²³ The increase in the number of people with learning disabilities will have a significant impact on demand for speech and language therapy provision for this population.

17 Welsh Government (2023). Science Evidence Advice (SEA): NHS in 10+ years An examination of the projected impact of Long-Term Conditions and Risk Factors in Wales. https://www.gov.wales/sites/default/files/publications/2023-09/science-evidence-advice.pdf

18 Sentinel Stroke National Audit Programme (2024). SSNAP spotlight report: stroke rehabilitation. https://www.strokeaudit.org/SupportFiles/Documents/Annual-report/2024/SSNAP-Annual-Report-2024-Therapy-Spotlight-Report.aspx

19 Stroke Association (2020). Stroke recoveries at risk – how COVID 19 has affected stroke survivors in Wales. https://www.stroke.org.uk/sites/default/files/campaigning/jn_2021-121.5_-covid_report_wales.pdf

20 Ibid.

21 Senedd Cross Party Group on Neurological Conditions (2020). Building the foundations for change: The impact of the Welsh Government's Neurological Delivery Plan A Cross Party Group on Neurological Conditions Inquiry Report. https://business.senedd.wales/documents/s103521/Neurological%20Conditions%20Inquiry%20Report.pdf

22 Idriss, O, Allen, L, Alderwick, H (2020). Social care for adults aged 18–64. The Health Foundation. Intensive Interaction Institute. [online] Available at: https://www.intensiveinteraction.org/ [Accessed 18 August 2022].

23 Bradshaw, J (2007). Chapter 6: Between You and Me. Learning Disabilities Today. Carnaby S (Ed). Pavillion: Brighton.

Areas of unmet need: Justice

Areas of unmet need: Mental health



Justice

The 2023 Senedd Equality and Social Justice report, 60% Giving them a voice²⁴ raised the profile of young people with SLCN within the youth justice system in Wales and 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.'

In rejecting this recommendation, Welsh Government has consistently argued that there are insufficient speech and language therapists in Wales to embed the profession within these teams. Recent youth justice inspection reports from HMIP in Conwy and Denbighshire²⁵ and Gwynedd and Môn²⁶ flag SLTs as a gap and include key recommendations to address this issue. We continue to work with youth justice service managers to push for more speech and language therapy posts within youth justice. This is an area that requires urgent investment and long-term workforce planning to end the postcode lottery of services across Wales.

24 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

25 HMIP (2024). An inspection of youth justice services in Conwy and Denbighshire. https://www.justiceinspectorates.gov.uk/hmiprobation/wp-content/uploads/sites/5/2024/03/An-inspection-of-youth-justice-services-in-Conwy-and-Denbighshire.pdf

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



Mental health

Recent evidence shows a concerning picture about children and young people's mental health. The School Health Research Network found, from their survey of secondary school-aged young people in 2021/22, that **24%** reported "very high" mental health symptoms.²⁷

The Welsh Government Science Evidence Advice: NHS in 10+ years report concludes that 'an ageing population will mean a higher proportion of the population living with poor mental health'²⁸ and thus greater demand for communication and swallowing support.

The HEIW Strategic Mental Health Workforce plan²⁹ makes a number of recommendations on new AHP roles and pathfinders. A number of speech and language therapy roles have been funded under the AHP pathfinders strand within the report and we anticipate growth in this area.

We have also been involved in influencing the draft Mental Health bill at a UK level and have been calling for the responsible/approved clinician role to be extended to SLTs. This development has potential significant workforce implications if taken forward by the UK Government.

27 The School Health Research Network (2023). Student Health and Wellbeing in Wales: Report of the 2021/22 Health Behaviour in School-aged Children Survey and School Health Research Network Student Health and Wellbeing Survey. https://www.shrn.org.uk/national-data/

28 Welsh Government (2023). Science Evidence Advice (SEA): NHS in 10+ years An examination of the projected impact of Long-Term Conditions and Risk Factors in Wales. https://www.gov.wales/sites/default/files/publications/2023-09/science-evidence-advice.pdf

29 Health Education and Improvement Wales/ Social Care Wales (2022). A strategic mental health workforce plan for health and social care. https://heiw.nhs.wales/files/strategic-mental-health-workforce-plan/

Areas of unmet need: Gender services



Gender services

Since the establishment of Local Gender Teams (LGT) consisting of a doctor and a SLT in each local health board, there has been an expectation that the speech and language therapy needs of this client group would be met by the existing core speech and language therapy service in each Health Board. Crucially, speech and language therapy provision for this population is not specifically commissioned.

There has been a highly significant increase in referral numbers to speech and language therapy services since the establishment of the Welsh Gender Service, as indicated by the table on page 25, with no indication that this trend is set to change.

Wales Trans and Gender Diverse/Gender-affirming voice and communication speech and language therapy referral rates 2019 - 2024

Health Board	2019/2020	2020/2021	2021/2022	2022/2023	2023/2024
Aneurin Bevan	29	41	45	60	55
Betsi Cadwaladr	14	- 11	40	76	106
Cardiff & Vale	11	37	57	85	116
Cwm Taf Morgannwg	1	18	40	47	68
Hywel Dda	5	18	36	38	56
Powys	4	7	10	13	11
Swansea Bay	4	11	17	36	63

In response to the increased need, several teams have now highlighted that they have reached a stage where it will no longer be possible to continue to provide a safe and effective speech and language therapy service.



We are keen to understand whether the speech and language therapy workforce in Wales reflects the population that we serve.

In this chapter we consider data gathered from Stats Wales, the RCSLT membership records, our regulator – the Health and Care Professions Council (HCPC) and Freedom of Information (FOI) requests sent to all local health boards in August 2024. We have also considered the independent speech and language therapy workforce in Wales.





Analysis of data from the NHS Wales electronic staff record¹ (ESR) reveals that there are **808** speech and language therapists (SLTs) in NHS Wales (headcount), full-time equivalent (FTE) – **649** as of June 2024.

FTE as of June 2024

In common with the rest of the NHS workforce in Wales, the number of SLTs in Wales has grown over the last decade. The recent NHS Wales workforce trends² report identified that the highest percentage increase of full time equivalent workforce (FTE) occurred in the Allied Health Professionals (AHPs), with a rise of 1,750 FTE; a percentage increase of **30.8%** (between March 2019 and March 2024). Data published by Stats Wales³ shows only a **21.1%** 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 **doubled** in the last decade.

Year (from March)	SLTs (headcount)	Full time equivalent
2019	696	548.5
2020	718	560.0
2021	766	599.4
2022	777	617.6
2023	803	649.8
2024	822	664.3

Vacancies



■ Based on analysis of the FOI data received (data from 6 health boards and one trust), as of 1st July 2024, a vacancy rate of **4.6%** was reported. This compares to the estimated vacancy rate of **2.8%** in scientific, therapeutic and technical staff within the NHS vacancy statistics (March 2024).⁴ Members have highlighted that the vacancy rate is skewed by the number of service level agreements with partners, within and outside of the health boards and may not reflect the true picture.

We know from conversations with members that more rural areas, in particular, face specific challenges around recruitment and vacancy rates are much higher in these areas. In one rural area in 2023, there was a **51%** vacancy rate for registered paediatric SLTs and **24%** vacancy rate for registered adult SLTs. Members have highlighted that bands 6 and 7 have been the most challenging clinical posts to fill in recent years and services are considering innovative options such as preceptorships to meet recruitment challenges.

¹ Stats Wales (2024). 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

² Health, Education and Improvement Wales (2024). NHS Wales workforce trends report (as at 31st March 2024). https://heiw.nhs.wales/files/nhs-wales-workforce-trends-2024

³ Stats Wales (2024). 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

⁴ Welsh Government (2024). NHS vacancy statistics 31 March 2024 (official statistics in development).

https://www.gov.wales/nhs-vacancy-statistics-31-march-2024-official-statistics-development-html#149040



Working patterns



full-time equivalent per headcount rate ■ The Stats Wales⁵ data reveals that the FTE per headcount rate for SLTs in Wales is 0.8 which compares to 0.9 for the AHP staff group.⁶ This rate has not changed significantly over the past 15 years, implying there has neither been a great shift towards nor away from part-time working. Conversations with members in Wales suggests a greater requirement for more flexible working patterns such as condensed hours over fewer days.

Gender

Q95%

UK speech and language therapy workforce is female

■ Speech and language therapy is a female dominated profession. **75%** of the AHP workforce is female. The HCPC registration statistics⁷ reveal that **95%** of the UK speech and language therapy workforce is female and analysis of RCSLT members confirms this is representative of Wales.

5 Stats Wales (2024). 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

6 Health, Education and Improvement Wales (2024). NHS Wales workforce trends report (as at 31st March 2024). https://heiw.nhs.wales/files/nhs-wales-workforce-trends-2024

7 Health and Care Professions Council (2023). Diversity data: speech and language therapists November 2023. https://www.hcpc-uk.org/resources/data/2023/diversity-data-speech-and-language-therapists-2023/

Welsh language competency

can deliver services through the medium of Welsh

The most recent census data⁸ reports that **18%** of the population are able to speak Welsh. As evidenced in the NHS Wales Workforce Trends report,⁹ it is challenging to analyse the Welsh language competency level of NHS Wales staff. Based on our analysis of FOI request data, we estimate that **19%** of the speech and language therapy workforce can deliver services through the medium of Welsh.

This figure suggests that across Wales, our workforce represents the workforce that it serves. However, it is essential that we understand capacity to deliver bilingual services in far greater detail within local areas and across clinical specialisms to deliver on the ambitions of the 'More than just words' plan¹⁰ and Cymraeg 2050.¹¹

⁸ 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-wales-census-2021.pdf

⁹ Health, Education and Improvement Wales (2024). NHS Wales workforce trends report (as at 31st March 2024). https://heiw.nhs.wales/files/nhs-wales-workforce-trends-2024

¹⁰ 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

¹¹ 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



Ethnic background



of the UK speech and language therapy workforce are of white ethnic background ■ ESR data provides information on the ethnic background of NHS Wales staff by professional group level. **88%** of AHPs state they are of a white ethnic background. ¹² HCPC registration statistics ¹³ reveal that **87%** of the UK SLTs are of white ethnic background. We have been unable to gain further detail on the diversity of the speech and language therapy workforce in Wales. This significantly impacts our ability to understand to what degree our workforce represents the population that it serves.

Age



of our practicing members in Wales are aged 55+ ■ Between 2019 and 2024, the NHS Wales workforce trends report¹⁴ reveals that there has been an increase in the percentage of staff in the age bands from 21-40, and a reduction in the percentage of staff aged between 46-60. The AHPs group largely follows this pattern and has seen a reduction of **0.3%** in the number of staff aged 55 and over. RCSLT membership data shows that **9%** of our practicing members in Wales are aged 55+. This appears lower than the percentage for the AHP group.

12 Ibid.

13 Health and Care Professions Council (2023). Diversity data: speech and language therapists November 2023. https://www.hcpc-uk.org/resources/data/2023/ diversity-data-speech-and-language-therapists-2023/

14 Health, Education and Improvement Wales (2024). NHS Wales workforce trends report (as at 31st March 2024). https://heiw.nhs.wales/files/nhs-wales-workforce-trends-2024

Disability



of SLTs in the UK identify as having a disability

■ ESR data provides information on the percentage of staff, by staff group who have indicated that they have some form of disability. 15 AHPs have the highest percentage of **7%** indicating they have some form of disability of all NHS Wales staff groups. HCPC diversity data 16 suggests that **6%** of SLTs in the UK identify as having a disability. We have been unable to gain further detail on the percentage of the speech and language therapy workforce in Wales who have indicated that they have some form of disability.

Sexual orientation



of SLTs in the UK identify as heterosexual

■ ESR data provides information on the breakdown of sexual orientation for staff by staff group. **15%** of staff within the AHP group have not disclosed or stated their sexual orientation. **81%** have recorded that they are heterosexual or straight. HCPC diversity data suggests that **87%** of SLTs in the UK identify as heterosexual. We do not have the breakdown of the sexual orientation of the speech and language therapy workforce in Wales.

15 Health, Education and Improvement Wales (2024). NHS Wales workforce trends report (as at 31st March 2024). https://heiw.nhs.wales/files/nhs-wales-workforce-trends-2024

16 Health and Care Professions Council (2023). Diversity data: speech and language therapists November 2023. https://www.hcpc-uk.org/resources/data/2023/ diversity-data-speech-and-language-therapists-2023/

17 Health, Education and Improvement Wales (2024). NHS Wales workforce trends report (as at 31st March 2024). https://heiw.nhs.wales/files/nhs-wales-workforce-trends-2024

18 Health and Care Professions Council (2023). Diversity data: speech and language therapists November 2023. https://www.hcpc-uk.org/resources/data/2023/ diversity-data-speech-and-language-therapists-2023/



Setting



We have struggled to obtain data on the settings in which SLTs and assistants work. 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.



Independent speech and language therapists

■ The Association of Speech and Language Therapists in Independent Practice (ASLTIP) database for SLTs working in independent practice¹⁹ notes 28 practitioners working in Wales. 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 (this figure includes **5%** who work in both NHS and independent practice).

Skill mix in speech and language therapy



■ We have seen significant progress in recent years in improving the skill mix within speech and language therapy, as witnessed by the anecdotal increases in support worker numbers across children's and adults services. There are now **139 FTE** of speech and language therapy assistants (SLTAs) working in NHS Wales. As a profession we aspire to create a sustainable workforce working to the top of its licence. Current data on SLTAs is patchy in terms of understanding headcount, age and diversity profile and change over time. It is essential we have high quality data to inform the best use of workforce.

We are also concerned that we are not fully maximising the opportunity presented by the SLTA workforce due to the lack of ring fenced and funded capacity to support SLTA qualifications and lack of routes for this workforce to become registered practitioners. We discuss this issue further in the next chapter.



¹⁹ The Association of Speech and Language Therapists in Independent Practice (2024). Find a speech and language therapist. https://asltip.com/find-a-speech-therapist/

...

Wider workforce trends

In reviewing our vacancy rate, we are conscious that more work is needed with regards retention and support for continuous professional development (CPD) at all levels. The current paucity of advanced practice roles and consultant SLT roles are a significant matter of concern. We are also very aware from conversations with members about the difficulties experienced by teams in ensuring protected time and resources for CPD. The barriers to engaging in CPD are multiple including high clinical demand on services and the financial climate within health boards, despite clear evidence in the literature that having a strong culture of supervision, amongst other CPD activities, has a positive impact on staff retention and wellbeing.²⁰

It is vital in order to retain the speech and language therapy workforce that we include the requirement to complete CPD within workforce and job planning. We have welcomed funding by Health Education and Improvement Wales (HEIW) in postgraduate level training for SLTs and urge for this investment to continue.

We also welcome new opportunities for SLTs to develop leadership skills such as the HEIW leadership fellows scheme. We carefully consider how our leadership offer, as RCSLT, can complement existing Welsh initiatives. We have seen a number of SLTs moving into multi-professional and wider leadership roles in Welsh Government and local health boards in recent years, making full use of their transferable skills. As an example, ¾ of Designated Education Clinical Lead Officers within local health boards are SLTs. There are increasing opportunities for all AHPs, including SLTs, to work in skill-based rather than profession-based practitioner roles. This development will require a different approach to workforce planning and a need to look beyond individual profession commissioning numbers.

20 Martin, P., Baldock, K., Kumar, S., & Lizarondo, L. (2019). Factors that contribute to high-quality clinical supervision of the rural allied health workforce: Lessons from the coalface. Australian Health Review: A Publication of the Australian Hospital Association, 43(6), 682-688. doi:10.1071/AH17258

During the pandemic, the speech and language therapy workforce responded rapidly to changing circumstances and adopted new ways of working, including greater utilisation of technology and digital in-service delivery.

A focus on developing high quality services



of people improved in at least one area in association with speech and language therapy

There is a strong commitment across the profession to all Wales working and continuous improvement. All Wales Clinical Excellence Networks exist across multiple, clinical areas. Highly effective collaboration has led to the development of All Wales, evidence-based pathways for speech and language therapy, unique to Wales, for clinical conditions.

The measurement of outcomes associated with speech and language therapy is an essential component of delivering effective and high-quality services. The profession in Wales has invested heavily in outcome measurement. Therapy Outcome Measures (TOMs)²¹ are a method for gathering information on the outcomes of therapy and rehabilitation. TOMs are used to monitor changes in a client's abilities and difficulties over time in four areas: impairment, activity, participation, and well-being. Wales is leading the way across the UK in terms of the proportion of health boards utilising the RCSLT's online outcome tool (ROOT) to support the collection of TOMs, with this number continuing to grow. ROOT data from four local health boards suggests that **80.3%** of people improved in at least one area in association with speech and language therapy.

There is also a growing research culture with a Wales Research Champions Network and developed partnerships across clinical services and academic partners such as Cardiff Metropolitan, Wrexham and Bangor Universities and the Bristol Speech and Language Therapy Research Unit.

²¹ Enderby, P, and John, A, (2019). Therapy Outcome Measures User Guide. Croydon, J&R Press Ltd.

Recommendations

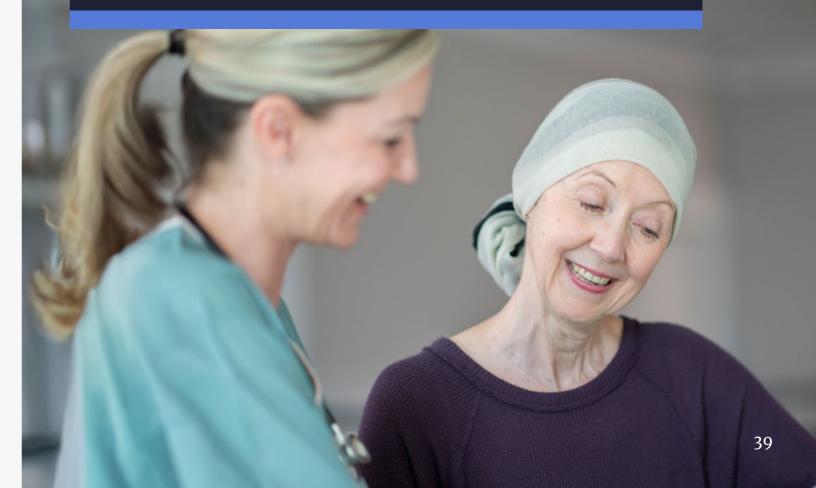
We are calling for:

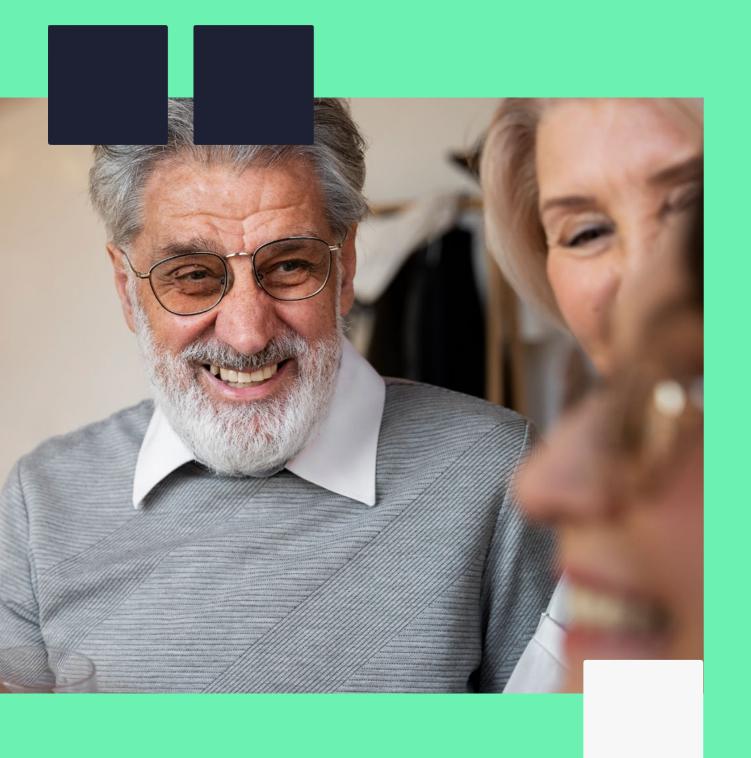
- Improved data collection on the composition of the profession to allow us to better reflect the communities that we serve.
- Support to improve our understanding of the Welsh language skills of our existing workforce and requirements for the future.
- Development of an equity, diversity and belonging action plan for Wales.
- Qualifications for SLTAs to be appropriately resourced to include assessors, trainers and verifiers.
- Recognition of the importance of continuous professional development and protected time and resources as part of established job planning.



I had a very brief idea of the role of SLT before working in the head and neck department, but these last 2 years have been an absolute education in the breadth of work you do with our patients. I have gained such an immense respect for not only the profession but for you all as individual practitioners. I have learned so much about my own speciality but most of all I have learned so much about holistically treating and LISTENING to patients. I have worked in a lot of head and neck departments in my 5 years since qualifying but I have never worked so intrinsically with a SLT team who are so absolutely essential to departmental practice. Thank you for all the advice, input and for seamlessly navigating patient's needs and wishes, family's input and surgical/treatment progress. Most of all thank you for always encouraging us as surgeons to step back and see the bigger picture. The level and quality of care you provide is absolutely evident in the trust our patients have in you and the rapport you have with them. Specifically, your commitment to patient centred care is unlike any ethic I've ever seen, and you are absolutely advocates for them at all times.

Ear, nose and throat doctor feedback to head and neck cancer & critical care speech and language therapy team





What is our vision for the speech and language therapy workforce in Wales?

As we have highlighted in the previous chapters, speech and language therapists (SLTs) have a huge role to play in tackling health inequalities in Wales. A key aim of the Healthier Wales workforce strategy¹ is to 'have a workforce in sufficient numbers to be able to deliver responsive health and social care that meets the needs of the people of Wales.'

We envisage that if appropriately resourced, the speech and language therapy profession will drive change across a number of key government agendas.

¹ Health Education and Improvement Wales and Social Care Wales (2020). A Healthier Wales workforce strategy: Our workforce strategy for health and social care, p.11. https://heiw.nhs.wales/workforce/10-year-workforce-strategy-for-health-and-social-care/

What is our vision for the speech and language therapy workforce in Wales?



Early years

Speech, language and communication (SLC) skills are critical for positive health, wellbeing, education and employment outcomes. Promoting SLC in the early years can reduce the impact of social disadvantage across the life course.²

There has been significant progress in this area in recent years following the publication of the Welsh Government Talk With Me: Speech, Language and Communication delivery plan³ and the creation of the National SLC Co-ordinator post within Welsh Government. As part of the Talk With Me programme, we have warmly welcomed the creation of Prosiect Pengwin. The project has been funded to develop screening tools and resources that will support health, education and childcare practitioners both to support SLC development and identify needs in the early years.

As a key element in tackling health inequalities, it is essential that there is sufficient speech and language therapy workforce to support children and families at universal, targeted and specialist levels to ensure timely and appropriate access. Flying Start SLTs are central to this approach and require sustainable funding. This model is entirely consistent with the focus within both the Well-being of Future Generations (Wales) Act 2015 and a Healthier Wales: Welsh Government's long term plan for health and social care⁴ on prevention and taking a long-term focus.

Education

■ At the core of the Additional Learning Needs and Education Tribunal (Wales) Act 2018⁵ is its focus on person-centered planning, outcomes, partnership working between local agencies and the greater participation of children and families in decision-making. Looking to the future, given the high numbers of children and young people with speech, language and communication needs (SLCN) within our schools and colleges, sustainable investment within the speech and language therapy workforce is essential to enable the profession to work in partnership with the education sector to achieve the best outcomes possible for learners. We need to ensure the workforce can offer support to settings at universal and targeted levels to enable best use of specialist resource.

Post pandemic, there is growing concern about pupil absence⁶ and an increase in the number of children and young people experiencing mental health difficulties.⁷ We are beginning to see greater understanding of the impact of unmet SLCN on mental health and school attendance and new roles developing within this space. It is welcome to see references to SLCN within the 2023 Welsh Government guidance on school attendance.⁸ The evidence is clear that more vulnerable groups of young people are far more likely to have unmet SLCN.^{9,10} In the future, we envisage targeted support for key groups such as care-experienced young people, children and young people with mental health difficulties and more roles working directly with young people at risk of exclusion and within Pupil Referral Units.

² Beard, A (2018). Speech, language and communication: a public health issue across the life course. Paediatrics and Child Health, volume 28, issue 3, p126-131, March 2018

³ Welsh Government (2020). Talk With Me: Speech, Language and Communication (SLC) Delivery Plan. https://www.gov.wales/sites/default/files/publications/2020-11/talk-with-me.pdf

⁴ Welsh Government (2018). A Healthier Wales: long term plan for health and social care. https://www.gov.wales/healthier-wales-long-term-plan-health-and-social-care

⁵ Welsh Government (2018). Additional Learning Needs and Education Tribunal (Wales) Act. https://www.legislation.gov.uk/ anaw/2018/2/contents

⁶ Senedd Research (2024). Not in school: pupil absence. https://research.senedd.wales/research-articles/not-in-school-pupil-absence/

⁷ Children's Commissioner for Wales (2024). Annual report and accounts 2023-24. https://www.childcomwales.org.uk/wpcontent/uploads/2024/10/CCfW_ARA23-24_290924.pdf

⁸ Welsh Government (2023). Belonging, engaging and participating: guidance on improving learner engagement and attendance. https://www.gov.wales/sites/default/files/publications/2023-10/improving-school-attendance-guidance_0.pdf

⁹ Hollo A., Wehby J. & Oliver R. M. (2014). Unidentified Language Deficits in Children with Emotional and Behavioral Disorders: A Meta-Analysis. Exceptional Children

¹⁰ Clegg, J, Crawford, E, Spencer, S (2021). 'Developmental Language Disorder (DLD) in Young People Leaving Care in England: A Study Profling the Language, Literacy and Communication Abilities of Young People Transitioning from Care to Independence'.

What is our vision for the speech and language therapy workforce in Wales?



Justice

Given the substantial evidence about the high prevalence of SLCN within justice settings¹¹, we envisage that in the future SLTs will be embedded within youth justice and prison settings both as part of a preventative approach and to help people with SLCN to understand and engage in the justice process.

Care closer to home



The proportion of the population aged 80 and over will have doubled between 2000 and 2038

There are huge challenges facing health and social care in Wales. The proportion of the population aged 80 and over will have doubled between 2000 and 2038. The ageing population and projected increases in the number of people living with long-term conditions and frailty will significantly increase the demand for communication and swallowing support.

Prevalence of stroke will increase over time and it is expected Welsh adults who have had a stroke will increase by **33%** from 2015 to 2035.

There is a projected rise of **70%** between 2019 and 2040 in the number of people living with dementia in Wales.

If current trends continue, the number of people in Wales diagnosed with cancer in Wales will rise from the **19,800** diagnosed per year in 2017-2019, to **24,800** in 2040.¹³

The Welsh Government Science Evidence Advice report recognises that 'making the NHS more efficient will require more investment in primary care and wider workforce,' e.g. Allied Health Professionals (AHPs).¹⁴ SLTs will have a key role to play in preventing deterioration in health and wellbeing which otherwise leads to costly and intensive support later.

In our vision, SLTs will be embedded in all relevant community multidisciplinary teams as part of their standard staffing. Resources will be planned and allocated to ensure speech and language therapy services are available across primary, community and mental health services.

In addition, SLTs will be empowered to work at the top of the licence, offering services which reduce service demand on medical specialities facing long waits such as ENT, reducing emergency admissions and delivering positive outcomes for people and their families. For example;

- front door swallowing assessments as part of frailty services
- taking low priority ENT swallowing and voice referrals off waiting lists and offering direct assessment and management
- advanced and consultant practitioners in head and neck cancer.

Leadership

Beyond the profession, we aspire that SLTs will increasingly bring their unique skills and abilities to broader, strategic roles within government, health boards and key bodies.

13 Ibid.

14 Ibid.

¹¹ 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

¹² Welsh Government (2023). Science Evidence Advice (SEA): NHS in 10+ years An examination of the projected impact of Long-Term Conditions and Risk Factors in Wales. https://www.gov.wales/sites/default/files/publications/2023-09/science-evidence-advice.pdf



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.

Currently in Wales, two, three year, full-time, pre-registration courses for speech and language therapy are commissioned at Cardiff Metropolitan University and Wrexham University. There are no part-time or two-year postgraduate courses available or more accessible routes into learning such as earn as you learn schemes.

As illustrated below, the number of commissioned places for speech and language therapy is gradually increasing over time. Cardiff Metropolitan University has sought to expand Welsh medium provision since 2018 and y Coleg Cymraeg Cenedlaethol has invested in Welsh medium lecturers at both universities. Stipulations on the number of students on the Welsh medium pathway are a condition of funding from y Coleg Cymraeg Cenedlaethol. Quotas for Welsh speaking students were also introduced by Health Education and Improvement Wales (HEIW) for the 2021 intake and equates to **24%** of places commissioned.

We have long called for sustained increases to speech and language therapy training places to meet growing demand. There is interest from the profession in offering innovative approaches to placements to support the expansion of student places.

Year	Number of speech and language therapy training places
2019/20	44
2020/21	49
2021/22	49
2022/23	49
2023/24	49
2024/25	55

We are also 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. The current workforce is predominantly female and white. The limited routes into the profession also hinder the ability of local health boards to grow their own workforce.

In summer 2024, we undertook a survey with SLTAs across Wales to understand the degree of interest in undertaking training to become a registered SLT and views on current routes into the profession. We had a strong response rate of 92 SLTAs across all health boards in Wales.



of speech and language therapy assistants would consider training as a speech and language therapist.



of assistants who would consider training as a speech and language therapist would intend to work in Wales once qualified.



Respondents
highlighted that
the main barriers to
undertaking courses
were lack of a nearby
course and course costs.



of assistants' preference for completing training would be an apprenticeship/earn as you learn model.

The survey results reveal the huge potential to explore widening access routes into the profession. As a profession in short supply¹, 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.

There is significant learning from the introduction of apprenticeships in England where three universities are so far working with employers to offer the apprenticeship, and more are interested in doing so.

'I love my role as a rehab assistant and I have been inspired by the speech and language therapists I work alongside. I am looking into my options to work in the profession and train to become a Speech and Language therapist but am in a position where I do not feel that I could afford to have no income and return to full time study. I find myself looking longingly at the options available in England for degree apprenticeships in Essex, Birmingham and Sheffield where a paid apprenticeship is possible. I would ideally love to stay working within the NHS, whilst training to become a therapist but at this time, it just does not appear to be an option.'

Rehabilitation Assistant, August 2024

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



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 strategy² noted, 'many of our future workforce are with us today, and retaining our workforce is as important as recruiting.'

From analysing data on current workforce, it is essential that, moving forward, there is a strong focus on work life balance and flexible career opportunities to meet changing needs.

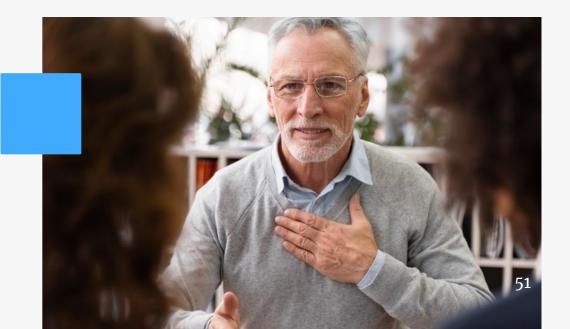
In order to retain SLTs and SLTAs, we need to support their continuing professional development (CPD) at all levels. This includes removing barriers preventing AHPs being able to develop their skills – for example, pressing on the UK Government to start the process of extending independent prescribing responsibilities to Allied Health Professionals (AHPs) so they can deliver better care. We also need to see investment in advanced practice and consultant roles to enable AHPs to work at the top of their licence and transform care pathways.

Digital transformation will play a key role in the future NHS. We need to ensure that SLTs, as part of the wider AHP group, develop the skills and capabilities required to deliver service and digital transformation.

Artificial intelligence (AI) is set to transform healthcare. The future speech and language therapy workforce will need to understand both its possibilities and limitations.

Recommendations

- Sustained increases to speech and language therapy training places, taking account of the need to grow the number of Welsh speakers and introduction of earn as you learn opportunities for speech and language therapy to maximise the potential to grow our own workforce.
- Sustainable funding for speech and language therapy services to meet growing demand.
- 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.
- 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 and developing the digital leadership pipeline.



¹ UK Government (2024). Skilled worker visa immigration list. https://www.gov.uk/government/publications/skilled-worker-visa-immigration-salary-list

² 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/



Recommendations

- Sustained increases to speech and language therapy training places, taking account of the need to grow the number of Welsh speakers and introduction of earn as you learn opportunities for speech and language therapy to maximise the potential to grow the workforce.
- 2 Sustainable funding for speech and language therapy services to meet growing demand.
- Improved data collection on the composition of the profession to allow us to better reflect the communities that we serve.
- Support to improve our understanding of the Welsh language skills of our existing workforce and requirements for the future.
- 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.
- Development of an equity, diversity and belonging action plan for Wales.
- Qualifications for speech and language therapy assistants are appropriately resourced to include assessors, trainers and verifiers.
- Recognition of the importance of continuous professional development and protected time and resources as part of established job planning.
- 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 and developing the digital leadership pipeline.

Thank you so much for seeing the young lady who had a choking phobia with me. Since our session, she has made fantastic progress and is eating pretty much normally now - the first time in nearly two years. She has restored a good amount of weight and this is continuing to go in the right direction. We reflected on your session in our last session yesterday and she still remembered so much of it and how it was such a significant turning point for her. I cannot thank you highly enough for that input as I am not sure we would have been able to move forward with therapy and her testing out her beliefs in the way we did if it hadn't been for increasing our knowledge in the throat anatomy, and education around the sensations in her

Psychologist with regards support for a young person with Avoidant Restrictive Food Intake Disorder (ARFID)

throat.

The first appointment we had with (SLT), and I just, I'm feeling quite emotional now actually. It was just so nice to feel understood in terms of how difficult life would become from how it had been before.

Person with swallowing difficulties



What can we say. Two electronic devices. Loads of appointments. Loads of upset and worry. One of the biggest decisions of our lives. Then Cochlear Implants surgery. AND 1 YEAR LATER we have one happy hearing little boy. Never did we ever imagine you to have climbed over all the obstacles you have in life but for you to be able hear our voices, to be able to talk words/sentences and to be able to communicate with others. We are forever grateful to all involved with our boy's journey. We could never thank the cochlear team enough, and also all the decisions made along the way by all the specialists involved with our little boy since birth. You have given us all as a family the best gift in life that we could have ever imagined as they have changed all our lives. ♥ HAPPY 1 YEAR ANNIVERSARY, COCHLEAR IMPLANTS DAY ♥ Our real life little warrior...You have all helped us as a family that you could never imagine... thank you so so much!!! Xxx

Family of child with deafness

I think the good thing about speech therapy is that they told me before I start my treatment, what exercises I need to do to maintain my jaw opening and speech and being able to eat and all this kind of thing. So I think that early advice was important.

Person with swallowing difficulties





Contact us





3rd Floor, Transport House, 1 Cathedral Road, Cardiff, CF11 9SB



029 2002 5585



