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Speech and Language Therapy Service

Briefing Note 08.05.2024



Speech and Language Therapy Service Context

CYP Speech and Language Therapy Service - provides support for CYP who have speech, language, and communication difficulties. This includes difficulties with:

- Understanding language
- Using language
- Communication and interaction
- Dysfluency (stammering)
- Speech sounds
- Social skills
- Eating and drinking difficulties (dysphagia) – a key contributor for premature deaths for Learning Disabilities

Some children supported may have identified needs such as cleft palate, hearing impairment and special educational needs and disability (SEND).

The service offering - comprises assessment, management planning, training for parents and education staff, direct therapy provision where required and outcomes evaluation.

Commissioning Arrangements - the Children's Speech and Language Therapy Service is at present commissioned by the ICB on a countywide basis from Northamptonshire Healthcare Foundation Trust (NHFT). The service provides support for children and young people from the age of 0-19 years. The service continues to deliver excellent outcomes for children in Northants but struggles to achieve the wait times it would like. This reflects the national position for CYP SALT. An Improvement Plan with mitigating actions is in place and being implemented.

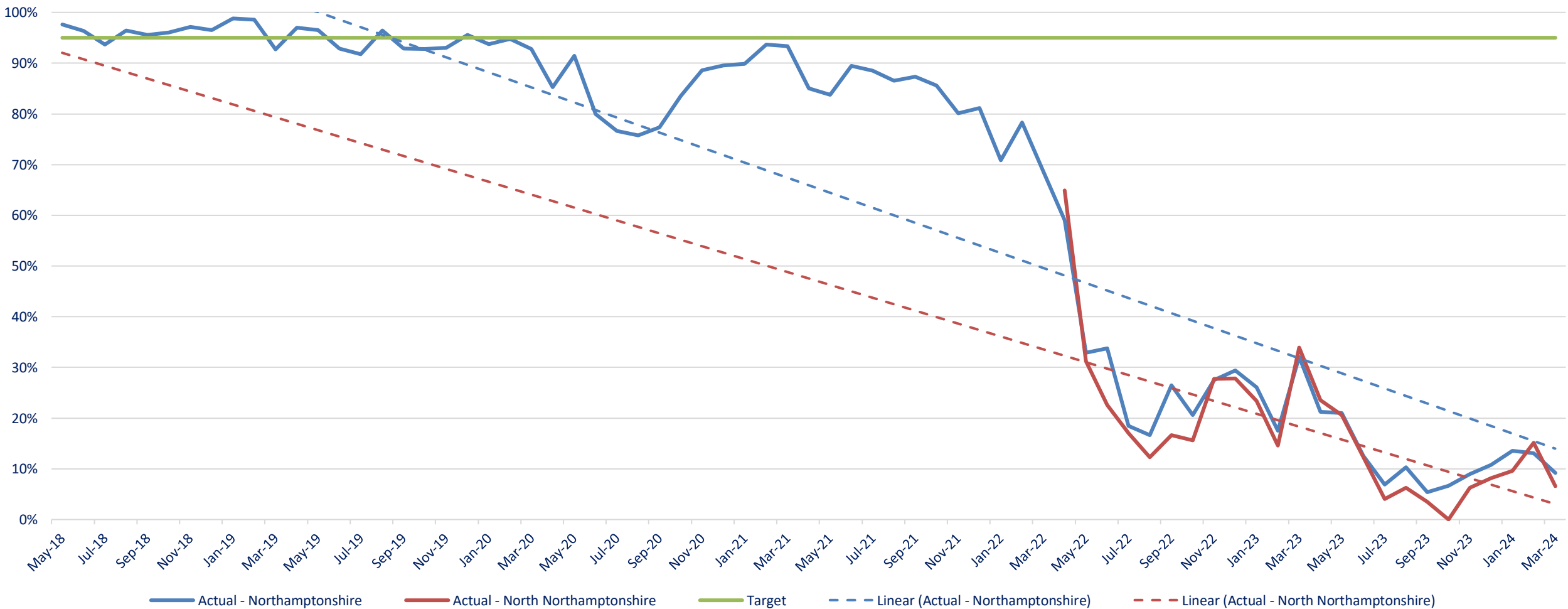
SALT Service Performance



Northamptonshire
Integrated Care Board

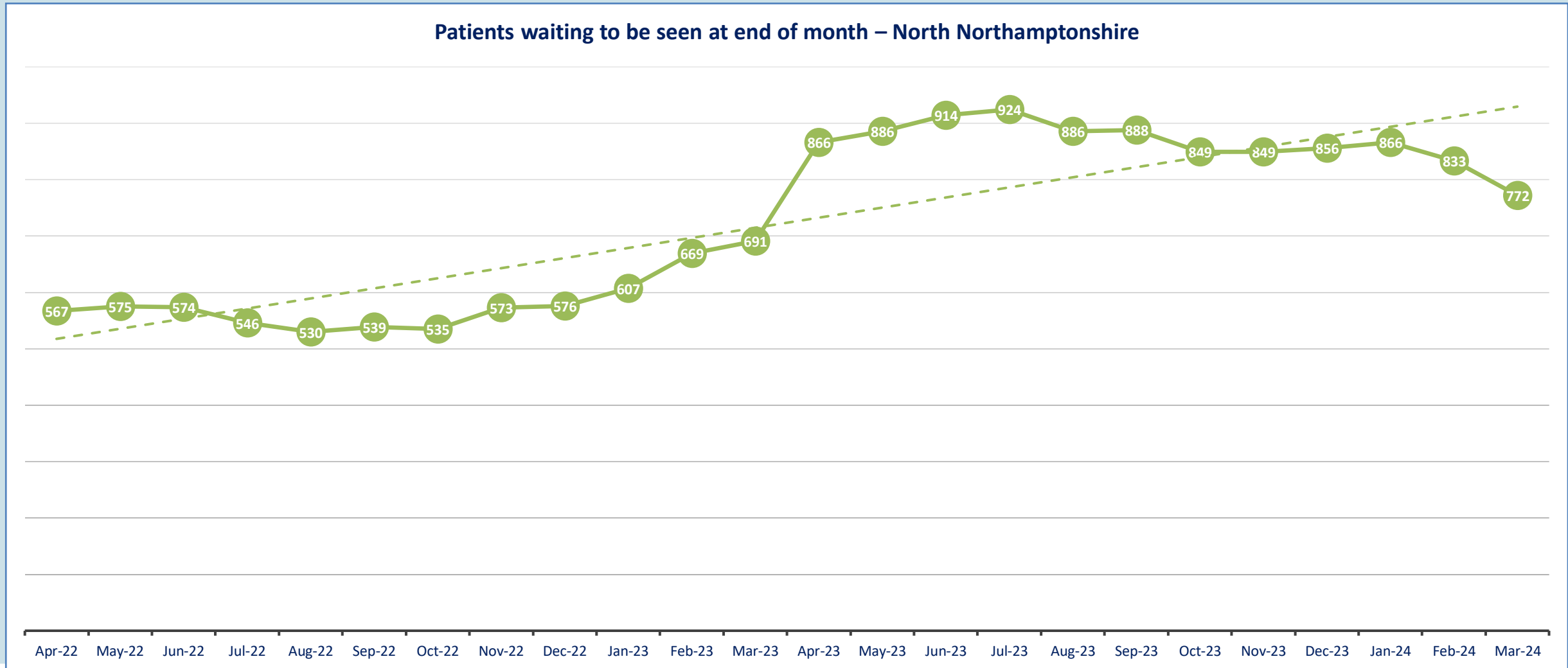
- Trend in weeks for average Referral to Treatment time is gradually increasing

Complete Pathways, Percentage seen within 18 weeks: Target vs Actual



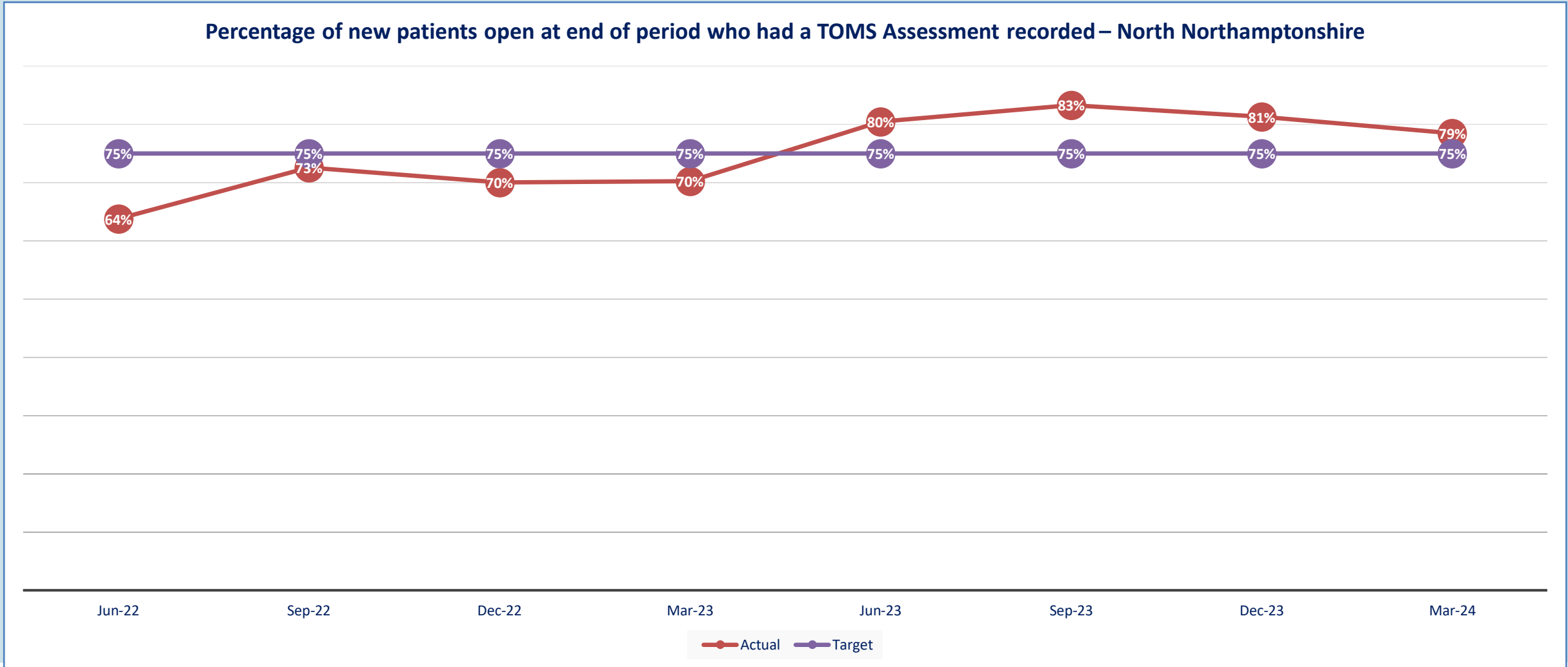
SALT Service Performance

- The trend for number of cases open is gradually decreasing



SALT Service Performance

- Therapy Outcome Measure data

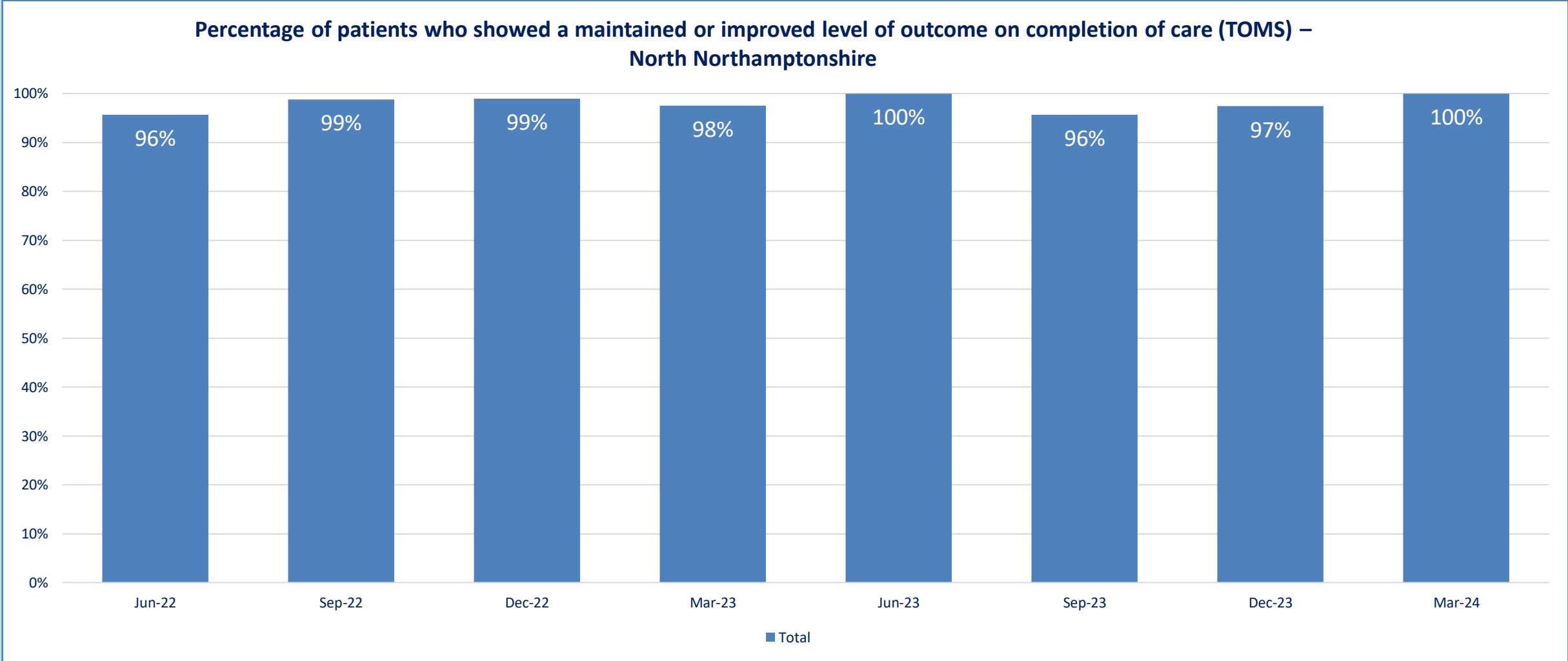


SALT Service Performance



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- Therapy Outcome Measure data



Speech and Language Therapy Service - Mitigations



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Key challenge	Causes	Mitigations
<p>The SALT service is experiencing challenges in meeting the 18-week RTT core internal performance requirement leading to delays in CYP getting the right support</p>	<ul style="list-style-type: none">• Significant workforce capacity challenges• Current staffing resource per 1000 CYP lowest in region• Lack of Joint Commissioning for SALT• Increased caseload size and increased number of EHCP assessment requests• Limited early intervention and targeted support in SLCN system	<ul style="list-style-type: none">• Improvement Action Plan in place• Improvements to NHFT internal processes have helped reduce the numbers waiting in recent months – see graphs• Joint commissioning for SALT provision in EHCP part F - agreed with ICB, NNC and WNC to commence April 2024• The Better Communication CIC has been jointly commissioned to undertake a SLCN gap analysis using the Balanced System approach to understand population needs and make transformation recommendations. The final report has recently been released end of Feb 2024.

SALT Improvement Plan: Key Areas

Area for Development	Progress	Output
<p>Joint Commissioning of SALT provision for EHCP Part F</p>	<ul style="list-style-type: none"> • Paper outlining intention of ICB to cease Part F provision from April 24 signed off by CYP Transformation Partnership Board. • Proposal developed and agreed with WNC and NNC to jointly commission NHFT to deliver SALT provision in EHCP Part F from April 24. Legal agreements are currently being drawn up. 	<ul style="list-style-type: none"> • SALT provision outlined in EHCP Part F is jointly commissioned by ICB, WNC and NNC from April 2024.
<p>CYP on SALT waiting lists are being supported and have access to resources</p>	<ul style="list-style-type: none"> • NNC and NHFT are working on a costed proposal from SALT for a Safer Waiting programme • Planning to identify actions and outcomes of the Safer Waiting pilot - particular focus on parental confidence and experience in parents/carers • Recruitment of peer support worker with lived experience to support parents/carers 	<ul style="list-style-type: none"> • SALT integration with the family hubs to better support children, young people and their families waiting.

SALT Improvement Plan: Key Areas

Area for Development	Progress	Output
<p>Regional business intelligence - NHSE Midlands Commissioned Programme with Balanced System - ‘Achieving Impactful Change for CYP with SLCN’ needs analysis provide recommendations for improvement and transformation; share best practice.</p>	<ul style="list-style-type: none"> • Balanced System data /information collection and three workshops with ICBs, Health Providers and LA colleagues to understand SLCN population needs and gaps in provision. • Shared learning with other ICBs from workshops. 	<ul style="list-style-type: none"> • Regional SLCN comparative statistics shared. Key finding for Northamptonshire is that current SALT staffing resource per 1000 CYP lowest in region and also there is a very low level of jointly commissioned SALT provision. • Further regional workshops planned.
<p>System business intelligence - Northants ICS (WNC, NNC, and ICB) commissioned programme to use the Balanced System® method to analyse SLCN needs countywide and provide recommendations for improvement and transformation</p>	<ul style="list-style-type: none"> • Completed needs analysis in the Northamptonshire footprint using the methodology including quantitative analysis and qualitative mapping of current provision and gaps. • Engagement with parents, education settings, and other key partners via online surveys and focus groups. • Report with key recommendations delivered February 2024 	<p>Report recommendations for consideration:</p> <ul style="list-style-type: none"> • Joint commissioning of resource from ICB and the local authorities should be developed • The need for a strong universal, targeted and specialist (individualised) offer • Early intervention and prevention methodologies should drive joint working across the age ranges • A strategic approach to transformation is required with a transformation plan created and co-produced involving all system partners, with agreed priorities for improvement and shared outcomes