

# Schools Management Forum

## Briefing paper

12<sup>th</sup> September 2018

**Subject:** The future commissioning of Speech and Language Therapy Services

### 1. Purpose of the report:

- 1.1. To inform SMF of future joint commissioning arrangements for Speech and Language Therapy Services across South Tees.

### 2. Background Information:

#### 2.1. National Context

A statutory responsibility for Local Authority, Education, Health and Social Care to work in partnership to commission support for children and young people with Special Educational Needs and Disability (SEND) was mandated by the Children and Families Act 2014. The Act however specifies that Speech and Language Therapy should be regarded as an educational provision as communication is fundamental in terms of accessing the curriculum.

The SEND Code of Practice states that since communication is so fundamental in education, addressing speech and language impairment should normally be recorded as special educational provision unless there are exceptional reasons for not doing so. This places ultimate responsibility for SaLT on Education however it should be noted that the current SaLT service receives significant funding from health, without which the service could not be provided in its current form.

More than 1.4 million children and young people in the UK have speech, language and communication needs (SLCN). Speech, Language and Communication are critical to children and young people's development. The 'Bercow Report – 10 years on' states that there is a lack of awareness and strategy at both a local and national level and, whilst this has improved through the last decade, there are still significant failings with systemic change needed.

Also stating that identifying and supporting children and young people's speech, language and communication needs accurately and early results in fewer issues later, with early identification being a well evidenced and cost effective approach resulting in long terms economic benefits. Speech, language and communication needs must form part of national and local plans.

## **2.2. Local Context**

### **2.2.1. Sth Tees Speech Language and Communication Needs Assessment**

A SLCN Needs Assessment for Sth Tees was completed in February 2018. This identified that in Sth Tees up to 6,460 Children and Young People aged 19 and under are estimated to experience long-term persistent speech and language difficulties.

Evidence collected for this Needs Assessment indicates that Speech Language and Communication Needs:-

- Affect school readiness, literacy and school performance.
- Put children at risk of a wide range of long term consequences in terms of literacy, mental health and employment.

Research cited in the Needs Assessment found that:-

- Just 26% of young children with SLCN made expected academic progress in the Early Years Foundation Stage compared with 69% of all children.
- Just 15% of pupils with identified SLCN achieved the expected standard in reading, writing and mathematics at the end of their primary school years compared to 61% of all pupils
- 81% of children with emotional and behavioural disorders have unidentified language difficulties
- Young people referred to mental health services are three times more likely to have SLCN than those not referred.
- 60% of young offenders have low language skills.

Areas of Sth Tees, particularly Middlesbrough, have very high levels of deprivation and evidence suggests that approximately 50 per cent of children and young people in socio-economically disadvantaged populations have speech and language skills that are significantly lower than those of other children of the same age.

These children need access to early year's provision which is specifically designed to meet their language learning needs and they may also benefit from specific targeted intervention at key points in their development.

In addition to the high levels of deprivation throughout the area there are also large numbers of children with safeguarding issues or vulnerable children. These cases are often complex and require a significant amount of time and resources to be allocated to the cases as required by the local Safeguarding procedures

The SaLT service receives referrals from a wide variety of professionals and services. The caseload for the Middlesbrough Council contract over the preceding five years is illustrated below.

Locality	2013	2014	2015	2016	2017
East	295	306	326	413	385
North	274	306	315	320	317
South	271	314	348	371	397
<b>Totals</b>	<b>840</b>	<b>926</b>	<b>989</b>	<b>1104</b>	<b>1099</b>

Referrals to the service have been increasing in complexity during the last few years, with more children requiring longer or more intensive input from the SALT service.

The referral pathways accessing the specialist SALT services are inclusive, so that referrals are accepted from a wide variety of sources, including self-referrals.

Senco's and Early Years staff, whilst stating that the current service is very good, identified that there is a need for:-

- Further training on SLCN, preferably face to face training sessions either through team meetings, CPD days or twilight sessions after school hours. These sessions available to all staff to support greater understanding of SLCN.
- Access to specialist SaLT staff through telephone advice or drop in sessions.
- The availability of a bank of resources they could use with children, young people and families.

### 2.2.2. Contractual Position

The current SaLT service across South Tees is delivered through three contracts

- Two Local Authority Education contracts for Middlesbrough and Redcar and Cleveland councils.
- A further contract for South Tees CCG.

All 3 contracts are provided by South Tees Hospitals NHS Foundation Trust with an end date to current of contracts of 31<sup>st</sup> March 2019.

South Tees CCG commissions top tier specialist SaLT services to children with speech, language and communication needs and also those with feeding and swallowing problems. This contract delivers services to children and young people age 0 – 16 (18 with an Education, Health and Care Plan).

The Middlesbrough and Redcar and Cleveland contracts deliver services to children and young people age 0-16 with mild to moderate SLCN

The contract values are as follows:-

South Tees CCG	£931,435 pa
Middlesbrough Council	£218,251 pa
Redcar and Cleveland Council	£215,000 pa

Whilst each contract is separate there are inevitable crossovers, with the larger South Tees CCG contract supporting the smaller Local Authority contracts.

It should be noted that a Tribunal in 2016 (Somerset) brought due to a reduction in a CCG contribution to SaLT found that Speech, Language and Communication needs are an education need except in exceptional circumstances and education cannot delegate this responsibility to health.

At present time the CCG, if a joint commissioning approach is adopted, are not proposing to reduce their financial contribution to the SaLT service, although this is a future risk.

Middlesbrough Councils Joint Commissioning Board (Childrens Services) recommended that a joint commissioning approach should be pursued to meet the requirements of the SEND Written Statement of Action.

South Tees CCG have agreed to move to a new contracting model with South Tees Hospitals NHS Foundation Trust, initially for a three year period. This contracting model allows the development and implementation of new specifications for commissioned services with robust monitoring arrangements without the necessity to go through a costly procurement exercise.

Whilst it would be possible for the Local Authority to commission independently of the CCG Contract this would:-

- Not meet the requirements of the SEND Code of Practice which requires the Local Authority, Education, Health and Social Care to work in partnership to commission support for children and young people with SEND.
- Not meet the requirements of Middlesbrough's SEND Written Statement of Action.
- Potentially not attract a provider willing to deliver a separate contract.
- Continue to place additional management and reporting requirements on the service leading to reductions in face to face delivery.

### **2.3. Benefits of Joint Commissioning**

A number of benefits would be realised by taking a joint commissioning approach, these include:-

- Meeting the SEND Inspection outcome and the requirements of the SEND reforms.
- Improved efficiency and quality through streamlined processes and systems enabling seamless provision of services.
- Ability to deliver flexible and responsive service.

- Ability to reconfigure service to fulfil the recommendations of the needs assessment.
- Cost avoidance through absorbing new growth and increased complexity of need without additional investment.
- Jointly held resources could support innovation and deliver value for money.
- A revised specification for a joint service to support high quality service delivery.
- Agreed joint outcome measures to measure the impact of SaLT for all partners.

To jointly commission the current financial contribution from Middlesbrough and Redcar and Cleveland Councils would need to be maintained. Redcar and Cleveland have already agreed to this commitment.

### **3. Next Steps**

- 3.1. A joint service specification has been developed by the SaLT working group, see Appendix 1.
- 3.2. Robust contract monitoring measures are in development.
- 3.3. Commissioners will work with the SaLT service and South Tees Hospitals Foundation Trust to implement the new specification and monitoring arrangements for 1<sup>st</sup> April 2019.
- 3.4. Middlesbrough Councils Childrens Trust agreed the development of a “Sth Tees Talks” Strategy, linked to the Oracy Project, aimed at promoting speech, language and communication, including early screening, to try to minimise the impact of SCLN in the future, supporting school readiness and achievement. A working group will be put in place to develop this strategy.

### **4. Potential Legal and Financial Implications:**

The current resource envelope to be allocated with any efficiencies gained through joint commissioning returned to the budget or utilised to meet increased demand within resource.

### **5. Recommendation:**

- 5.1. That Middlesbrough Council join Redcar and Cleveland Council in transferring funding for their element of the service to South Tees Clinical Commissioning Group through a Section 76 Agreement to provide a jointly commissioned service.
- 5.2. That SMF agree to receive quarterly monitoring reports on the SaLT service.

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# Appendix 1



SALT draft Spec  
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