



	The Welsh NHS Confederation response to the Equality and Social Justice Committee's inquiry into the extent of speech, language and communication needs amongst young people who have offended, or are at risk of offending in Wales.
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1. The Welsh NHS Confederation welcomes the opportunity to respond to the Equality and Social Justice Committee's inquiry into the extent of speech, language and communication needs (SLCN) amongst young people who have offended, or are at risk of offending in Wales.
2. The Welsh NHS Confederation represents the seven Local Health Boards, three NHS Trusts, Digital Health and Care Wales and Health Education and Improvement Wales (our Members). We also host NHS Wales Employers.

Introduction

3. Our members have recognised the considerable contributory factor that communication difficulties have when looking at offending. They have highlighted the significant evidence base which shows that moderate to severe difficulties with language and communication is prevalent among young people involved in the youth justice population.
4. It is also worth noting that speech, language and communication difficulties are frequently undiagnosed or misinterpreted as behaviour difficulties within young offenders, especially when a young person is at secondary school age.
5. Many of the verbal programmes provided as interventions, which are included as part of court orders, often disadvantage young people with SLCN, making information and support difficult to access. It also means that the programmes are less likely to be successful in preventing re-offending.
6. While the speech, language and communication needs of young people must be considered, it is also vital that speech and language services work closely and in partnership with Children and Adolescent Mental Health Services (CAMHS) to ensure that children and young people's needs are met.

Add to the evidence base on the prevalence and impact of speech, language and communication needs among young people involved in the youth justice system in Wales.

7. Members suggested that a national agreement and consistent approach to identification is needed to ensure the evidence base is robust and relevant. Once a better understanding of the prevalence is known, this can then inform strategic planning within NHS organisations. Establishing a national group would be beneficial to ensure evidence is gathered and the evidence base can be continually added to.
8. Members have raised the difficulty in adding to the evidence base around prevalence and impact due to the fact that some areas of Wales currently do not have Speech and Language Therapist (SLT) roles embedded within youth justice service (YJS) teams. Therefore, full-time SLTs within YJS teams should be resourced on a sustainable basis, as members have also raised issues around non-recurrent funding sources for initiatives and the difficulties of recruiting into such roles.
9. We are also aware that research on the impact of Flying Start, and other key interventions in early life, need to continue to focus on outcomes in later life.

Consider the effectiveness of existing policies and interventions to support young people in the youth justice system with communication difficulties, including how young people are identified and assessed for speech, language and communication needs.

10. Members indicated that ensuring consistency across policies, services and training would be beneficial. Historically, each local authority would stipulate what it required but this approach could impact on the quality of data being captured and compromise the strategic footprint. Therefore, a national review of existing policies may be required to understand their robustness in the current climate.
11. Some members indicated that there are a low number of referrals into services from YJS teams, suggesting a number of reasons why this may occur. These include;
 - Young people are referred to SLT, but involvement with the YJS is not shared with SLT, so population analysis is unclear.
 - YJS teams currently have a limited understanding of the potential value of SLT to this population, or a limited understanding of how to access the service so do not refer when indicated.
 - Limited identification (screening) tools are used by those teams to identify young people with SLCN.
 - This population is vulnerable and unable to effectively access routine opt-in SLT provision, requiring enhanced support to engage.

12. Due to the strong evidence base which demonstrates the disproportionately high prevalence of SLCN within this population, it is essential to develop YJS teams with specialist SLTs embedded within them. These are not yet developed across Wales, which impacts on the effectiveness of how young people are identified and assessed for SLCN.
13. While members indicated that YJS staff have had some basic training in understanding the difficulties faced by this population, there is a lack of clarity about what to do if needs are identified. The Committee could also consider the availability of SLCN training for all professionals who work with young people, including magistrates, police and teachers.
14. Members suggested that all young people 12 years or younger should be referred for a speech and language assessment when entering YJS.

Help further understanding of what other interventions are needed to support young people in the youth justice system with their communication and language skills.

15. Members recommended a number of actions which could support a better understanding of the interventions needed. These included;
 - more robust screening tools and assessments to improve the understanding of the needs of young people
 - embedding SLTs within all YJS teams as this would facilitate a multi-agency and multi-disciplinary approach to the development of appropriate interventions
 - Speech and Language Therapy Liaison and Diversion posts working with young people in police stations at point of entry to support young people with SLCN, ensuring they are able to make informed choices throughout police and court procedures
 - Ensure SLT services can be accessed across Wales for those accessing YJS. Members have raised that SLT in YJS across Wales is currently patchy
 - SLT work closely with CAMHS services because timely intervention is key to avoiding the development of complex and enduring mental disorder and illness.
16. It was also suggested that young people excluded from school could be given access to practical courses, such as independent living skills, motorbike maintenance, hairdressing and construction tasters. Young people in YJS are often interested in learning these types of skills and they often learn vocabulary around these topics better, as this is what interests them.
17. SLCN should also be identified within Looked After Children as those brought up in disadvantaged environments have a disproportionately greater likelihood of heightened SLCN than their more advantaged peers.

Increase awareness of the prevalence and nature of young people's communication needs amongst professionals and policy makers including, Welsh Government, Health Boards, youth justice practitioners, police officers, magistrates and teachers.

18. Members recognised the importance of being proactive in increasing awareness and of positive relationships with criminal justice agencies and local authorities, with some suggesting that supporting groups under youth offending teams (such as schools) would be beneficial to better identify children with SLCN.
19. Members also suggested that securing funded specialist SLT posts within YJS teams would provide opportunity to increase awareness of the prevalence and nature of young people's communication needs at a local level.
20. Members suggested the development of further strategic roles in Wales to drive greater awareness, with some noting the positive strides taken around awareness of communication needs within early years settings since the development of the National Speech, Language and Communication Coordinators roles within Welsh Government.

Conclusion

21. There is a clear indication that the needs of young people with SLCN would be better met with the correct understanding, awareness and training in place in the settings with which young people come into contact.
22. There is a role for every sector, including health, education and justice, to identify and support the individual. This would allow for a more robust response in supporting young offenders, in tackling re-offending and preventing offending or re-offending taking place.