

The Green Paper for Vulnerable Children  
PO Box 1556  
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New Zealand  
Speech-language  
Therapists' Association  
*Te Kāhui Kaiwhakatikatika Reo Kōrero o Aotearoa*

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To whom it may concern

The New Zealand Speech-Language Therapists' Association (NZSTA) welcomes this opportunity to contribute to the Government's Green Paper for Vulnerable Children (2012). We support the Government's initiative in developing the Green Paper and in recognising the need for wide consultation in this process. A number of the NZSTA members have chosen to respond via their workplace, so this submission reflects the combined views of those members who have opted to use the NZSTA as their means of contributing to the consultation.

Our submission generally supports the views outlined by the Office of the Children's Commissioner. We respond in general to this consultation process indicating our support or otherwise for each of the four broad proposed actions outlined in the Green Paper rather than addressing all 43 of the questions posed in the online survey option.

Speech-language therapists (SLTs) provide a highly specialised service to a large number of children accessing education, health, disability, mental health and social services across a range of settings. As a profession we are in a unique position to be aware of the current frustrations of many students, parents, therapists, schools, education and social service providers. The NZSTA values the relationships we have with the Ministries of Education, Health, Social Development and Justice in maintaining a high quality evidence-based speech and language therapy service which promotes child-centred practice.

The overarching perception of the NZSTA is that the Green Paper fails to adequately define "vulnerable" and fails to consider the specific and oftentimes complex nature of children with communication difficulties. Diagnoses such as intellectual disability, Attention Deficit Hyperactivity Disorder (ADHD), Autistic Spectrum Disorder (ASD), Auditory Processing Disorder (APD), development delay, Specific Language Impairment (SLI), Speech Sound Difficulty (SSD), speech and or language delay/disorder are all areas where specialist speech-language therapy (SLT) input are essential.

In respect of ***Share Responsibility***, we are concerned that the specialist skills and knowledge of highly-educated SLTs will be diminished if too great an emphasis (and funding) is placed on community initiatives. We applaud the intent of the proposed actions but query what is meant by “but there is room for improvement in how services are aligned and delivered” (p8).

In respect of ***Show Leadership***, we fully support the proposed recommendations to develop A Vulnerable Children’s Action Plan, Legislation changes and Working with whānau, hapū, iwi and Māori leaders. It is hoped that the Government would seek to learn from successful schemes already in operation within New Zealand and abroad.

In respect of ***Make child-centred policy changes***, we are concerned that the emphasis on evidence-based practice may outweigh the importance of practice-based evidence (particularly in specialist areas such as speech-language therapy where there is limited or no evidence, which is clearly very different to limited or no benefit). We would encourage the “ongoing process of research, evaluation and monitoring of programmes and services” proposed on p19. Speech-language therapy has a long tradition (both in New Zealand and abroad) of early intervention programmes. It is essential to target services (and funding) to infants and children as early as possible. We would support policy changes that allow this to happen. However, we would NOT support the reduction of services to older children (who, through no fault of their own, will not have benefitted from the newly prioritised early intervention services). There will clearly be a period where priority and funding needs to be given to both groups (early intervention and older children).

We are heartened to see the proposed action of Information sharing and increased inter-professional communication. We would wish to see appropriate training and guidance for all professionals so New Zealand does not fall into the same traps as countries abroad where professionals were overwhelmed “with large volumes of information” thereby inhibiting rather than enabling better service provision.

In respect of ***Make child-centred practice changes***, we are concerned that therapists were not mentioned (on p26) as part of the dedicated professionals who work tirelessly with vulnerable children. SLTs are among the hundreds if not thousands of therapists who appear to be unrecognised by this Green Paper. Interestingly, SLTs are also one of few health professions not included in the Health Professions Competence Assurance Act (2003), despite the best attempts of the profession (and the NZSTA) to have this changed. We agree that minimum standards should be a priority. We would welcome the opportunity to consider mandatory registration and training for the workforce.

To the best of our knowledge, the development of “common principles, standards, assessment frameworks and training” as proposed on p27 has been unsuccessful for SLTs in the UK. It is hoped the Government would seek examples of successful and unsuccessful attempts of this proposed action before embarking on something similar in New Zealand.

We fully support the need for improved service delivery, particularly the possible actions outlined on p29.

Thank you for this opportunity to contribute to The Green Paper for Vulnerable Children. The NZSTA applauds the Government in its attempts to ensure “that every child thrives, belongs and achieves”.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Clare McCann', is centered within a light blue rectangular box.

Clare McCann, PhD  
Professional Standards NZSTA