



15 June 2020

**Committee Secretariat
Standing Committee on Employment, Education & Training
PO Box 6021
Parliament House
CANBERRA
Canberra ACT 2600**

By email: ee.reps@aph.gov.au

Dear Committee Secretariat,

Speech Pathology Australia welcomes the opportunity to provide further feedback to the Standing Committee on Employment, Education and Training's Inquiry into the Education of Students in Remote and Complex Environments and the impact of COVID-19. As you are aware, Speech Pathology Australia is the national peak body for speech pathologists in Australia, representing over 10,000 members and an active member of the National Rural Health Alliance. Speech pathologists are university-trained allied health professionals with expertise in the diagnosis, assessment, and treatment of speech, language and communication disabilities, and swallowing disorders.

In response to COVID-19, we have seen a rapid and extensive increase in the use of telehealth and remote learning for students. As previously outlined in our most recent submission "this alternative service delivery model has the potential to improve access to SLP services for children living in geographically remote areas, reducing travel time and alleviating the detrimental effects of communication difficulties on education, social participation and employment."¹ Speech pathologists actively seek to achieve workforce optimisation and efficiency by using alternative methods of service delivery such as telepractice, however, previous funding arrangements, such as no Medicare rebate for speech pathology delivered by telepractice, did not facilitate this. With the introduction of Temporary Telehealth Medicare Items for COVID-19, clients and families were able to continue or possibly gain access to speech pathology services when face to face services were not possible.

With the introduction of temporary MBS items for the use of telehealth, as an association we strongly advocate for these funding provisions to remain. We have received positive feedback from families and clinicians on the success during these unprecedented times. With the continued rebates this would allow individuals who are geographically so remote that they are unable to physically visit their nearest provider or, where the market is so thin (or has already failed) there are no service providers near enough to provide a face-to-face consultation to access appropriate and necessary services to support their child's educational needs. Many vulnerable families may now be able to access services with a rebate in place.

Within schools, supports need to be tailored to the needs of individual students, and be developed and implemented in partnership with the school, principal, teachers, parent/family and student. Speech pathologists and teachers have different but complementary roles in education.

Additionally, speech pathologists have a role in identifying and addressing the barriers to participation that students may experience as a result of communication difficulties. Speech pathologists should therefore be considered an essential part of the educational team, working alongside teachers to implement effective teaching practices to support language and literacy development (for whole classes) or to develop adjustments to teaching and assessment for individual students with identified needs.



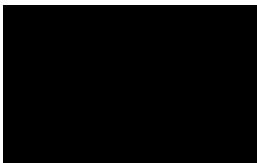


Speech pathologists can provide additional support and professional development to teachers to assist in this area, specifically when differentiating the instruction for children with communication difficulties. This detailed knowledge is particularly important when collaborating with teachers working with any child whose communication disability is impacting on their access and participation in schooling.

During COVID-19 with students learning from home, as an association we received feedback from concerned parents and clinicians about work being set for students with speech, language and communication needs. Specifically, the lack of reasonable adjustments or modifications, resulting in distress for students and their parents during this time. As this remains the role of the teacher to differentiate instructions to account for individual needs, it is vital that they have access to professional development in this area. We continue to advocate for the role of speech pathologists in the provision of professional education to ensure the implementation of reasonable adjustments and appropriate modifications, to assist children with communication disorders to participate in education on the same basis as other students. This applies to metropolitan and rural and remote regions. With speech pathologists working closely and collaboratively with teachers and educators we aim to support all children with speech, language and communication needs. With the lack of access to speech pathologists in rural and remote areas the use of telehealth as an ongoing funded option would be particularly useful in the provision of professional education to educators.

We hope the Committee finds our feedback and recommendations useful. If we can be of any further assistance or if you require additional information please contact Ms Jane Delaney, Senior Advisor Early Childhood and Education at Speech Pathology Australia's National Office on 03 9642 4899 or by email on jdelaney@speechpathologyaustralia.org.au.

Yours faithfully



Tim Kittel
National President

ⁱ Wales, D., Skinner, L., & Hayman, M. (2017) The efficacy of telehealth-delivered speech and language intervention for primary school-aged children: A systematic review. *International Journal of Telerehabilitation*. Vol. 9 No. 1 Spring.

