

## **SPEECH PATHOLOGY SERVICES, PILBARA REGION**

### *Grievance*

**MR RIEBELING** (Burrup) [9.20 am]: I wish to grieve to the Minister for Health about the lack of speech pathology services. I hope the Minister for Education will take on board my comments, although I realise he has had no notice of this issue. However, he may be able to respond or at least take up the issue with his ministerial colleague, although perhaps not in a substantial way in this debate, and I understand that problem.

The issues I bring to the attention of the Minister for Education will not be a surprise to him. The concerns I raise relate to the primary schools in the Pilbara region. The lack of speech pathology and audiology services for children in the Pilbara region is causing some concern. The current speech pathologist, a lady by the name of Kimberly, whose surname unfortunately escapes me, operates from Karratha and has some 300 clients in the Pilbara region. Most of the children she services are either in preschool or grades 1 or 2. As the minister would know, the impact on those children of not having adequate language skills is that they do not get a good grounding in schooling and they fall further behind if the problem remains untreated.

A number of parents have indicated in letters to me that it is 18 months to two years before a child who requires a speech pathologist is treated and a program is put in place. Parents have told me also that after an initial assessment, a follow-up examination that is required for successful therapy does not occur. That is not because Kimberly is not an outstanding speech pathologist, but because of the distance she must travel to service her clients, as she also covers Tom Price and Paraburdoo. It is not possible for one person to meet the workload required to effectively put in place programs and therapy to achieve the desired results. Parents and citizens associations from a number of schools have raised the issue with me. The Tambrey Primary School P&C wrote to me and caused me to initiate a number of inquiries of other P&Cs. Last July, the Tambrey Primary School P&C indicated that 11 children in preschool required speech pathology to lift their language skills and to enable proper development. The P&C was told that those 11 children had waited over 12 months to be seen by a speech pathologist.

I have spoken to officers of the Health Department and the regional office of the Education Department. I suggested that this was not only a health problem, but it was also an educational problem that flows from the Health Department's inability to deal with the situation. The net result is that children in the education system have inadequate language skills that will continue if the problem lingers. The longer this problem continues, the greater the difficulty these children will have developing their language skills. One parent wrote to inform me that her child was noticeably shy and found school difficult as a result of speech therapy failing to have an impact. In the modern age of speech therapy it is unacceptable that this fundamental service is so poorly resourced in the Pilbara region. The State should provide that service to children with learning difficulties.

It is a reasonable proposition that 90 per cent of the allocation for speech pathology currently in the hands of the Health Department should be transferred to the Education Department. Although the children's speech problems may require some health initiatives to rectify, they manifest as educational problems. A degree of frustration is now developing. Speech therapists in the area acknowledge the need for greater resources. Apparently the Health Department has allocated extra resources to this area. The director of health in the area has indicated that a speech pathologist cannot be found. That is not the answer the people of the Pilbara want to hear. If more resources are required for the area, they should be provided. Although my grievance is not directed to the Minister for Education, I thank him for taking it on board.

**MR BARNETT** (Cottesloe - Minister for Education) [9.27 am]: I acknowledge that the issue raised by the member is significant and I thank him for raising it. The ability to provide specialist assistance to treat any issue that impacts on learning is always more difficult in non-metropolitan areas, particularly in the north of the State and the goldfields region. Stating the obvious, speech pathologists are involved in treating a range of problems relating to language and speech; for example, stuttering, articulation, tongue difficulties and the processing of language such as ordering and sequencing. The improvements speech therapy can make to children's skills have always been relatively common knowledge among teachers, but there is now a greater awareness of this among parents and school communities. The point of the grievance is that the Education Department is directly providing speech pathology services only through the language development centres that are located in the metropolitan area. However, speech pathologists who work in the language development centres are funded through both the Disability Services Commission and the Health Department.

Recently I visited Carawatha language development centre and the north east language development centre in Dianella. The Education Department is not directly responsible for the provision of speech pathology, however, in no sense do I shy away from responsibility in that area. It is the responsibility of the Health Department and the Disability Services Commission. The Health Department provides services to children based in the Pilbara.

The Director-General of the Education Department has met recently with the Commissioner of Health, Mr Alan Bansemer, and also the chief executive officer of the Disability Services Commission, Dr Ruth Reid. They are working collaboratively to produce a better plan and method for providing speech pathology services. The Education Department is spearheading a speech and language plan that, hopefully, will address some of the needs. It is critical that children in regional areas be accounted for properly. The plan will look at strategies for prevention and early identification, which is clearly important, and it may also include training and language development for mainstream teachers. If specialists are not available in some areas perhaps some teachers can be given elementary training, so that they can identify and give some level of assistance to students. Officers of the Education Department are establishing this working party with the Health Department, the Disability Services Commission and Family and Children's Services. I hope that will provide a better result for those children.

I will pass the member for Burrup's comments to the Health Department, and I will get back to the member in a written form. I thank the member for raising the issue. It is an important issue and the member has raised it in a constructive way. I recognise that the provision of speech pathology services and other areas of specialist assistance for children outside the metropolitan area is difficult. Recently, we were able to provide additional resources in the Kimberley. Only one specialist was covering the whole of the Kimberley. We had the absurd situation in which the specialist was spending two and a half to three days a week travelling. That was a complete loss of the service that person could provide. A similar situation will apply in the Pilbara, where people spend so much time travelling rather than dealing directly with teachers and children.