

The NHS England Long Term Plan: what it means for speech & language therapy

Chapter One: A new service model for the 21st century

Headlines – relevant sections for speech and language therapy

- **The NHS will roll out Enhanced Health in Care Homes (EHCH) Vanguard** (pp.15-16 of the plan; §1.13.-1.15.):
 - NHS support will be upgraded to all care home residents who would benefit by this
 - All care homes to be supported by a consistent team of healthcare professionals, including GP-based community MDTs
 - Individuals will be supported to have good oral health, stay well-hydrated and well-nourished and that they are supported by therapists and other professionals in rehabilitating when they have been unwell
 - Primary care networks will work with emergency services to provide emergency support is needed, including out of office hours
 - Care home staff will have access to NHSmail to communicate effectively and securely with NHS teams involved in the care of their service users
- **The NHS will support people to age well** (pp.16-18; §1.16.-1.20.)
 - Primary care networks to use a proactive health approach focused on moderate frailty to ensure earlier detection and intervention to treat undiagnosed disorders, and by working with local community services, making support available to those who need it the most
 - Increased focus on what the service user wants to ensure appropriate, personalised end of life care
 - Provide better support for people with dementia through a more active focus on supporting people in the community through the enhanced community MDTs and the application of the NHS Comprehensive Model of Personalised Care
- **The NHS will reform hospital emergency care** (pp.19, 23; §1.25, 1.32.-1.33.)
 - Improve services for pre-hospital urgent care
 - Every acute hospital with a type 1 A&E department will move to a comprehensive model of Same Day Emergency Care (SDEC) to increase the proportion of acute admissions discharged on the day of attendance to a third
 - A standard model of delivery in smaller acute hospitals who serve rural populations will be developed
 - The new Emergency Care Data Set (ECDS) will be embedded into Urgent Treatment Centres (UTCs) and SDEC services and an equivalent ambulance data set will be developed to bring together data to follow and understand patient journeys from the ambulance service into other urgent and emergency healthcare settings
- **The NHS will cut delays in patients being able to go home** (pp.23-24; §1.34.)
 - Goal is to reduce the Delayed Transfer of Care (DTC) figure which is currently on average at 4,000 or fewer delays. This will be achieved through measures such as
 - a) placing therapy and social work teams at the beginning of the acute hospital pathway
 - b) setting an expectation that patients will have an agreed clinical care plan within 14 hours of admissions, including an expected date of discharge,

implementation of the SAFER patient flow bundle and MDT reviews on hospital wards every morning

- **The NHS will allow people to have more control over their own health and more personalised care when they need it** (pp.24-25; §1.35.-1.37.)
 - More person-centred care will be delivered
 - More NHS support for people to manage their own health
 - NHS Comprehensive Model of Personalised Care will be rolled out across the country
 - Everyone who has been identified to be in their last year of life will receive proactive and personalised care planning to reduce avoidable emergency admissions and more people being able to die in a place they have chosen
- **The NHS will devise provide mainstreamed digitally-enabled primary and outpatient care across the NHS** (pp.25-28; §1.44., 1.48.)
 - Digital-first primary care will become a new option
 - Fewer face-to-face outpatient visits

Implications – what does this mean for speech and language therapy?

The NHS will roll out Enhance Health in Care Homes (EHCH) Vanguards

With the increased focus on individuals being supported to have good oral health, stay well-hydrated and well-nourished, speech and language therapy services may receive more referrals for dysphagia screenings.

This offers opportunity to promote the importance of appropriate dysphagia management for people in care homes experiencing difficulties with eating, drinking and swallowing. This includes upskilling the wider healthcare team supporting these individuals so that speech and language therapy services only assess where appropriate. The RCSLT is leading the update of the Inter-professional Dysphagia Framework (IDF) which outlines the competences required to manage dysphagia appropriately and aims to allow other members of the team other than speech and language therapists (SLTs) to manage the early stages of it, including screening.

As care home staff will be able to communicate more effectively and securely with the teams involved with their service users, SLTs can advise or intervene as and when appropriate to avoid unnecessary hospital admissions.

The NHS will support people to age well

Speech and language therapy has the opportunity to play a more prominent role in people's end of life care, as this become more appropriate and personalised. The expertise SLTs have in communication and dysphagia in relation to mental capacity assessments and major health conditions that can occur towards the end of life, including dementia, should be highlighted. The RCSLT is developing new guidance in this area.

The NHS will reform hospital emergency care

The Plan acknowledges that demand for acute services will continue to increase at roughly its current speed and therefore avoids the mistake of assuming that investing in primary and community services will result in reduced demand for hospital care.

Embedding the ECDS into UTCs and SDEC services will see an improvement for SLTs as data on patients will improve.

SLTs who work in rural areas could benefit from the development of a standard model of delivery in smaller acute hospitals who serve rural populations.

The NHS will cut delays in patients being able to go home

By focusing on placing therapy and social work teams at the beginning of the acute hospital pathways, speech and language therapy can contribute to patients going home sooner than they currently do.

The NHS will allow people to have more control over their own health and more personalised care when they need it

Speech and language therapy may play a more central role in terms of delivering personalised care, especially towards the end of life or in palliative care.

The NHS will devise provide mainstreamed digitally-enabled primary and outpatient care across the NHS

Speech and language therapy services may see fewer outpatients face-to-face.

RESOURCES

- The NHS Long Term Plan is accessible via: <https://www.longtermplan.nhs.uk/>
- The RCSLT analysis of the plan (Feb 2019) is accessible via: <https://bit.ly/2RTUoGr>
- The RCSLT response to the plan (Jan 2019) is accessible via: <https://bit.ly/2DKI7AI>
- The RCSLT consultation response (Sept 2018) is accessible via: <https://bit.ly/2C4dcqm>

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