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Department of Health NI

BY EMAIL

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**RCSLT NI Ministerial Briefing: Speech and Language Therapists (SLTs) in Mental Health Services**

**What is the issue?**

There is a high incidence and prevalence of speech, language, communication and swallowing problems associated with mental health in both children and adults. However SLTs are not part of core mental health services in Northern Ireland and the links between mental health and communication and swallowing often go unrecognised.

* RCSLT NI are calling for:
  + recognition within the new mental health strategy of the links between mental health and communication and swallowing needs
  + a commitment to providing accessible, patient-centred mental health services through early identification and support for communication and swallowing needs
  + SLTs to be core team members in mental health services in NI
  + increased awareness among all mental health professionals about the links between swallowing and communication needs and mental health.

**COMMUNICATION**

There are important links between mental health and speech, language and communication needs. Communication needs increase the risk of people developing mental health problems and those with existing mental health problems may also have communication needs. Being able to communicate is essential in explaining concerns around mental health and accessing talking therapies. Verbal and non-verbal communication skills are a key component of effective de-escalation techniques in mental health services.

• People with a primary communication problem are at greater risk of experiencing mental health problems than their peers, commonly anxiety or depression.

• 84% attendees at area psychiatric services had language impairment and 74% had communication difficulties

• 81% of children with social, emotional and mental health needs (SEMH) had undetected speech, language and communication needs

**SWALLOWING**

People with mental health problems can also have eating, drinking and swallowing difficulties (dysphagia). They may be an intrinsic part of the disorder or a side effect of medication.

• There is a greater prevalence of dysphagia in acute and community mental health settings compared to the general population.

• There is also evidence for an elevated rate of death due to choking in acute mental health settings partly due to the effects of medication.

• The risk of death due to choking in people with schizophrenia has been reported as 30 times more likely than in the general population.

**Speech and language therapy input can:**

1. Identify speech, language, communication difficulties and provide necessary support and training to ensure a patient can understand and express their views as part of their care and treatment.
2. Support patient safety by reducing the risk of swallowing problems which can lead to malnutrition, dehydration, choking, or aspiration pneumonia requiring hospital admission and, in some cases, causing death.
3. Create cost efficiencies in mental health services by avoiding inappropriate language-based treatments and improving access to verbally mediated interventions and talking therapies, which often require significant understanding and expressive language skills.
4. Support other professionals and staff to recognise and understand how to respond to communication needs and dysphagia.

**SOLUTIONS**

Adopting an early identification and intervention approach is essential to recognise and respond to people’s communication and swallowing needs. Ways in which this can be achieved include:

* Commissioning dedicated SLT posts as part of multidisciplinary teams (MDTS) in children and adults mental health services to meet the evidenced need of communication and swallowing difficulties associated with mental health.
* Training – provide MDT training in improve awareness of links between mental health and communication and swallowing utilising scale and spread of existing SLT projects.
* Workforce development – consider undergraduate, post graduate and funded professional development and training opportunities for SLTs to grow and support a sustainable workforce of SLTs specialising in mental health in NI.

**Ruth Sedgewick , Speech & Language Therapy in Mental Health**

**Outline**: Ruth works as a Clinical Lead Speech and Language Therapist within an Acute Mental Health Setting. This is a pilot project to scope the need, value and impact of Speech and Language Therapy in acute adult mental health.

**Outcomes**: SLT is now an integral member of the Multidisciplinary Team. SLT are receiving referrals for patients with acute mental health disorders and other co-morbidities e.g. stroke, learning difficulties, autism, progressive neurological conditions or dementia. These patients have swallowing difficulties and/or communication difficulties as result of their disease or treatment.

**IMPACT:** SLT have provided assessment & treatment, patient advocacy, joint MDT working and consultation, staff education, mealtime experience and embedded Alternative Augmentative Communication Systems as part of communication supports to enable patients to engage in a full range of treatments and therapies.