

Speech and language therapists (SLTs) are key members of the neonatal multidisciplinary team (MDT) alongside physiotherapists, occupational therapists, psychologists and dietitians. When embedded in neonatal care, a SLT's knowledge and skills can help with early identification and support of infants with communication and feeding difficulties.



THE SITUATION

- Premature infants are at high risk of developing feeding and swallowing problems (Lee, 2011, Uhm, 2015). Recent studies suggest that feeding difficulties occur in approximately 42% of children under 4 years of age who were born prematurely (<37/40) (Pados et al. 2021).
- Typical parent-infant interaction can be impacted by long hospital stays, and infants born early are at high risk of developing speech, language and communication needs (Rabie et al. 2015).

- The number of babies admitted to neonatal units has increased due to advances in health care expertise and technology (RCPCH, 2015).
- Specialist neonatal care capacity needs to keep pace with these advances to improve short and long-term outcomes for these babies (NICE, 2017).

THE ROLE OF SPEECH AND LANGUAGE THERAPISTS

As supported by the British Association of Perinatal Medicine's (BAPM) publication 'Service Standards for Hospitals Providing Neonatal Care', the speech and language therapist (SLT) plays an important role on the neonatal unit in:

- Identifying infants who are at risk of feeding and/or swallowing and communication difficulties.
- Providing developmentally appropriate clinical assessment of the infant and family for these difficulties.
- Helping infants to establish safe and positive oral feeding. Babies with feeding difficulties are at risk of aspirating; this is when milk penetrates their airway and goes onto their lungs, which can lead to pneumonia and the need for continued breathing support. Speech and language therapy input includes providing assessment and treatment for babies who have difficulties suck feeding and transitioning from tube feeding and supporting caregivers and the nursing team with the skills and knowledge of how to optimise the baby's oral motor co-ordination and development, needed for safe feeding.



on the unit.

- Supporting families to maximise language development potential through understanding the infant's early communication and becoming confident communication partners, enriching the communication environment, and using interaction strategies that support language development.
- Supporting developmental care, as part of the wider multidisciplinary team (MDT) to support optimal neurodevelopment of the preterm infants on the unit.

THERAPYDDION LLEFERYDD AC IAITH MEWN GOFAL NEWYDDENEDIGOL



Mae therapyddion lleferydd ac iaith yn aelodau allweddol o'r tîm amlddisgyblaeth newyddenedigol ynghyd â ffisiotherapyddion, therapyddion galwedigaethol, seicolegwyr a dietegwyr. Pan fyddant wedi'u sefydlu mewn gofal newyddenedigol, gall gwybodaeth a sgiliau therapydd lleferydd ac iaith helpu gydag adnabyddiaeth gynnar a chefnogi babanod sydd ag anawsterau cyfathrebu a bwydo.

Y SEFYLLFA

- Mae nifer y babanod a gaiff eu derbyn i unedau newyddenedigol wedi cynyddu oherwydd datblygiadau mewn arbenigedd a thechnoleg gofal iechyd (RCPCH, 2010).
- Mae angen i gapasiti gofal arbenigol newyddenedigol gadw'n gydwastad gyda'r datblygiadau hyn i wella deilliannau tymor byr a hirdymor ar gyfer y babanod hyn (NICE, 2017).
- Mae babanod a anwyd yn gynnar mewn risg uchel o ddatblygu problemau bwydo a llyncu (Lee, 2011, Uhm, 2015). Mae astudiaethau diweddar yn awgrymu bod anawsterau bwydo yn effeithio ar tua 42% o blant o dan 4 oed a anwyd yn gynnar (<37/40) (Pados et al. 2021).
- Gall arosiadau ysbyty hir effeithio ar ryngweithio arferol rhwng rhiant a baban, ac mae babanod a gaiff eu geni yn gynnar mewn risg uchel o ddatblygu anghenion lleferydd, iaith, a chyfathrebu (Rabi et al, 2015).

RÔL THERAPYDDION LLEFERYDD AC IAITH

Fel y cefnogir gan gyhoeddiad 'Service Standards for Hospitals Providing Neonatal Care' a gyhoeddwyd gan Gymdeithas Brydeinig Meddygaeth Amenedigol (BAPM), mae gan y therapydd lleferydd ac iaith rôl bwysig yn yr uned newyddenedigol wrth:

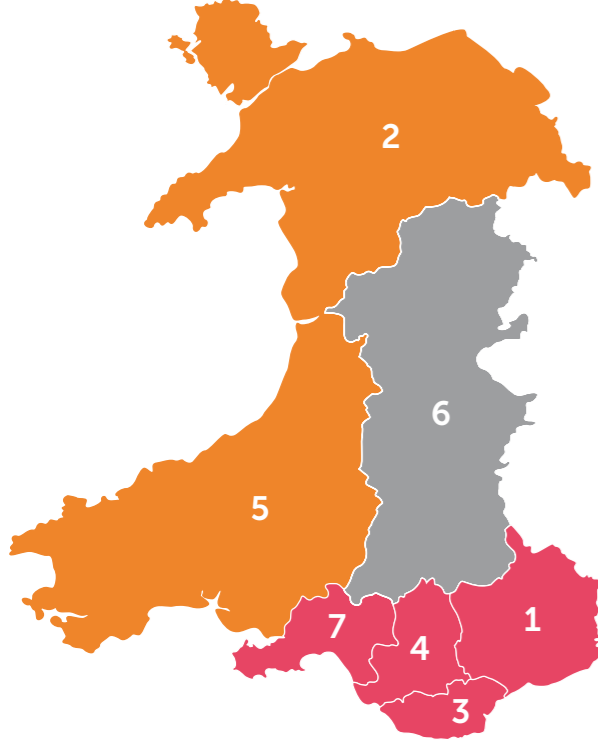
- Adnabod babanod sydd mewn risg o anawsterau bwydo a/neu llyncu a chyfathrebu.
- Darparu asesiad clinigol datblygiadol briodol o'r baban a'r teulu ar gyfer yr anawsterau hyn.
- Helpu babanod i sefydlu bwydo drwy'r geg yn ddiogel a chadarnhaol ac wrth weithio i ostwng effeithiau annymunol ond angenrheidiol ymyriadau meddygol yn y cwrs newyddenedigol.
- Cefnogi teuluoedd i gynyddu potensial datblygu iaith drwy ddeall cyfathrebu cynnar y baban a dod yn bartneriaid cyfathrebu hyderus, gan gyfoethogi'r amgylchedd cyfathrebu a defnyddio strategaethau rhyngweithio sy'n cefnogi datblygiad iaith.
- Cefnogi gofal datblygiadol, fel rhan o'r tîm aml-ddisgyblaeth ehangach i gefnogi'r niwroddatblygiad gorau ar gyfer babanod a anwyd yn gynnar yn yr uned.



DARPARIAETH THERAPI LLEFERYDD AC IAITH NEWYDDENEDIGOL YNG NGHYMRU

ALLWEDD I'R MAP

- Dim yn cyrraedd safonau BAPM
- Cyrraedd safonau BAPM
- Yn rhannol yn cyrraedd safonau BAPM
- Dim unedau newyddenedigol



	Bwrdd Iechyd Lleol	Darpariaeth Therapi Lleferydd ac iaith mewn unedau newyddenedigol	Darpariaeth gymunedol/ olynol Therapi Lleferydd ac iaith newyddenedigol	A yw'r ddarpariaeth yn cyrraedd safonau BAPM?
1	Bwrdd Iechyd Prifysgol Aneurin Bevan	0.2 cyfwerth llawn-amser mewngymorth i Ysbyty'r Faenor	Na	Na
2	Bwrdd Iechyd Prifysgol Betsi Cadwaladr	Gwasanaeth mewngymorth mewn tair uned	Darpariaeth olynol yn y gymuned ar gyfer babanod gydag anawsterau bwydo ar ôl dychwelyd adref – gwasanaeth ddim yn rhedeg ar hyn o bryd oherwydd heriau llenwi swydd.	Ydi ond heriau llenwi swydd
3	Bwrdd Iechyd Prifysgol Caerdydd a'r Fro	Swydd 0.6 cyfwerth llawn-amser ar gyfer gwaith cleifion mewnol newyddenedigol	Na	Na
4	Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg	Na	Na	Na
5	Bwrdd Iechyd Prifysgol Hywel Dda	0.46 cyfwerth amser llawn yn Ysbyty Glangwili, Caerfyrddin	Tim amlddisgyblaeth rhithiol ar 12 wythnos ac asesiad datblygu ar 2 oed	Na
6	Bwrdd Iechyd Addysgu Powys	Dim unedau newyddenedigol	-	Dim gwasanaeth oherwydd dim ysbyty cyffredinol dosbarth
7	Bwrdd Iechyd Prifysgol Bae Abertawe	0.5 cyfwerth llawn-amser	Dim amser penodol	Na

EFFAITH THERAPYDDION LLEFERYDD AC IAITH NEWYDDENEDIGOL

'Fel mam baban a gafodd ei geni lawer iawn cyn ei hamser, mae'r help a gawn ar hyn o bryd gan Therapi Lleferydd ac iaith yn werthfawr iawn. Fodd bynnag, teimlaf pe byddai gwasanaeth therapi lleferydd ac iaith wedi bod ar gael yn rhwydd ar yr uned gofal dwys i'r newydd anedig (NICU) y gallem fod wedi dechrau arni i helpu fy merch a chael cymorth ar

yr hyn i edrych amdano am fwydo, llyncu, tagu a mygu fy merch ac, yn bwysicach, sut i drin hynny. Mae ymyriad cynnar a thriniaeth ar y cyd ar y ward ar gyfer babanod cynnar yn allweddol. Fel rhiant, hoffwn weld mwy o therapyddion lleferydd ac iaith ar NICU'.

Lyndsay, Mam Thora

MAE RCSLT CYMRU YN ARGYMELL

- Sefydlu Therapyddion Lleferydd ac iaith ym mhob uned newyddenedigol a darpariaeth gweithwyr proffesiynol perthynol i iechyd (AHP), a amlygir yn adolygiad gwasanaeth cot Gwasanaethau Arbenigol Iechyd Cymru, wedi'i gyllido'n llwyr.
- Cynllun Addysg a Hyfforddiant Addysg a Gwella Iechyd Cymru 2024/25 yn rhoi ystyriaeth i'r angen i gynyddu nifer y therapyddion lleferydd ac iaith ac AHP newyddenedigol.
- Addysg a Gwella Iechyd Cymru yn ymrwymo i ddatblygu cynllun gweithlu AHP i sicrhau fod digon weithwyr AHP i ateb anghenion y boblogaeth.

SPEECH AND LANGUAGE THERAPY NEONATAL PROVISION IN WALES

Local Health Board	Speech and Language Provision in neonatal units	Neonatal Speech and Language Therapy Provision in community/follow up	Does the provision meet BAPM standards?
Aneurin Bevan Health Board	0.2 full-time equivalent in reach into the Grange Hospital	No	No
Betsi Cadwaladr Health Board	In-reach service at three units	Community follow up of babies with ongoing feeding difficulties post discharge home – currently frozen due to staffing challenges	Yes but challenges
Cardiff and Vale University Health Board	0.6 full-time equivalent post for inpatient Neonatal work	No	No
Cwm Taf Morgannwg Health Board	No	No	No
Hywel Dda University Health Board	0.46 full-time equivalent in 12 weeks and Virtual MDT at Glangwili Hospital, Carmarthen	No	No
Powys Teaching Health Board	No neonatal units	-	No service as no District General Hospital
Swansea Bay University Health Board	0.5 full-time equivalent	No specified time	No

- Meets BAPM standards
- Partially meets BAPM standards
- Does not meet the BAPM standards
- No neonatal units

KEY TO MAP

IMPACT OF NEONATAL SPEECH AND LANGUAGE THERAPISTS

my daughter's feeding, swallowing, choking and gagging and more importantly how to deal with it. Early intervention and collaborative treatment on the ward for pre term infants is key. As a parent, I would like to see more Speech and Language Therapy involved on Neonatal Intensive Care Unit,'

Lyndsay, Mum of Thora

As a parent of a very premature baby, I value the input of the Speech and Language Therapy team that we currently receive. The help and support is invaluable, however, I feel that had SALT input been readily available on the Neonatal Intensive Care Unit we could have made a start on helping my daughter and been assisted on what to look out for regarding

RCSLT WALES RECOMMENDS

- Health Education and Improvement Wales Education and Training plan 2024/25 takes account of the need to grow the number of neonatal SLTs and other AHPs.
- Health Education Improvement Wales commits to developing an AHP workforce plan to ensure there are enough AHPs to meet the needs of the population.
- Speech and Language Therapists are embedded in all neonatal units in Wales and AHP provision, highlighted within the Welsh Health Specialised Services Committee cot service review, fully funded.

