



Reducing pressures on urgent and emergency care: the role of speech and language therapists

peech and language therapists play an important role in supporting effective urgent and emergency care. From preventing admissions to accident and emergency (A&E) departments to supporting early discharge and patient recovery, they provide comprehensive support across emergency care pathways. Working within integrated care teams, their unique skills and expertise help to improve patient care, create financial savings and reduce pressures on A&E services.

Preventing A&E admissions

Speech and language therapists treat, support and care for children and adults in community settings who have difficulties with speech, language and communication, and/ or eating, drinking and swallowing. Managing swallowing problems at home or in residential care reduces the risks of choking, chest infections, aspiration pneumonia, dehydration and malnutrition, and decreases the need for crisis management that often results in unnecessary hospital admissions. Speech and language therapists plan, review and monitor patient care to prevent unnecessary admissions and develop personalised strategies for individuals to support effective self-care at home.





The scale of the problem

▶ In 2013–2014, 18.5 million people attended UK A&E units.

Of these, more than **13%** had conditions that commonly require speech and language therapy support – for example, respiratory conditions (**4.6%**), head injuries (**3.8%**) and ear, nose and throat conditions (**2.4%**).

Supporting patients in A&E

Speech and language therapists attend A&E to assess and treat speech, language, communication and swallowing problems (dysphagia). Examples of the client groups they can support are:

- **Older people** Swallowing problems can be part of the ageing process and are associated with conditions such as dementia. Speech and language therapists develop care plans to prevent choking and aspiration pneumonia (both potentially fatal problems). Although older people may initially be admitted to A&E following a fall or urine infection, subsequent investigations often identify malnutrition and dehydration caused by swallowing problems as a major underlying factor.
- **End of life care** Speech and language therapists provide expert advice around feeding and swallowing in end of life conditions. They work closely with medical teams and the patient and their family where risk feeding may be the best option for the individual. With speech and language therapy input the patient can return to the community with an end of life plan that will enable them to die in their preferred place of care, rather than being admitted to hospital as emergency cases as their condition deteriorates.



Supporting early discharge and preventing readmissions

As part of emergency care and discharge planning, SLTs work closely with other services, such as physiotherapists and occupational therapists, to assess and support patients' needs. They help to prevent a cycle of emergency readmissions by working with individuals and their families to develop personalised strategies to manage their speech, language, communication and swallowing difficulties. For example, they develop feeding plans and daily exercises that patients can follow at home and that community-based staff can supervise. By developing personalised care plans, speech and language therapists can help patients to understand their own health needs and support them to feel safe and confident when they return home.

Supporting financial savings and delivering improved care

Case study: Sandwell and West Birmingham NHS Trust

Speech and language therapists play a crucial role in Sandwell and West Birmingham Trust's 'rapid response therapy team'. They work alongside other allied health professionals and attend A&E to:

- ▶ Prevent unnecessary hospital admissions, via a highlyresponsive service that operates 12 hours a day, 365 days a year to assess patient needs.
- ► Work collaboratively with social work colleagues to support the patient to return home.
- ➤ Deliver urgent speech and language therapy assessment within three hours in community, to ensure patients' swallowing can be managed at home by community staff.

Speech and language therapists have helped to reduce costs and improve patient outcomes at the Trust by providing intensive therapy to ensure patients start eating and drinking as soon as possible to avoid the use of tube feeding and allow a safe return home with community speech and language therapy support. As part of an integrated care approach, they also work closely with the discharging and community teams to ensure patients identified as at risk of readmission receive appropriate support in the home setting, and are psychologically and physically prepared to return home.

The Trust's integrated care service has helped to relieve winter pressures on A&E services and create financial savings and improved outcomes for patients. As a consequence, it has reduced hospital admissions by 2,478 per year, reduced length of stay in hospital from 10 days to seven days, and saved approximately 17,000 bed days, which has the potential to reduce costs by more than £7 million.

REFERENCES AND RESOURCES

SOURCE: Health and Social Care Information Centre (2015) Table 14: Number of A&E attendances, A&E primary diagnosis '2 character description field', 2012-13 and 2013-14