

TECHNICAL BRIEF - SPEECH-LANGUAGE PATHOLOGY & AUDIOLOGY SERVICES IN LONG-TERM CARE SETTINGS

1) OBJECTIVE

- Speech-language pathology and audiology services are essential to the provision of safe, reliable and high-quality long-term care.
- Canada's new national standards for long-term care must include speech-language pathology and audiology services as part of an integrated care approach to address the impact of communication, swallowing, hearing and/or balance difficulties on the function, health, safety and quality of life of residents.

2) ABOUT SPEECH-LANGUAGE & AUDIOLOGY CANADA (SAC)

- SAC is a national professional association representing over 6,000 [speech-language pathologists](#) (S-LPs), [audiologists](#) and [communication health assistants](#).
- Our members and associates are experts in the assessment and rehabilitation of communication, swallowing, hearing and balance disorders.
- We advocate for communication as a fundamental human right, as well as for improved access to speech-language pathology and audiology services across Canada.

3) CONCERNS AND IMPACTS

- The COVID-19 pandemic has exposed the urgent need for speech-language pathology and audiology services in long-term care settings.
- Speech-language pathology and audiology services are currently not available in most long-term care facilities despite the high prevalence of communication, swallowing, hearing and balance difficulties in residents.
- Long-term care staff often lack the tools and skills needed to accurately identify and address the communication and swallowing needs of residents.

4) BACKGROUND

- Communication, swallowing, hearing and balance difficulties are highly prevalent in people living in long-term care settings.
 - About 75% of residents have communication disorders.
 - The majority of residents have hearing loss which often co-occurs with other sensory impairments (e.g., vision, balance).
 - About a third of residents have combined sensory and cognitive impairments.
 - Over half of residents have swallowing difficulties (dysphagia).

- These difficulties are associated with:
 - Loneliness.
 - Reduced social engagement.
 - Loss of autonomy.
 - Caregiver burden.
 - Health and safety concerns including falls, medication errors, malnutrition, dehydration and aspiration pneumonia.
 - Increased risk of acute care hospitalization and increased length of stay.
- S-LPs, audiologists and communication health assistants provide resident-and-family centred interventions that are evidence-based.
- S-LPs and audiologists collaborate with and train other healthcare team members so they are better able to identify and address the needs of residents with communication, swallowing, hearing and/or balance difficulties.
- Speech-language pathology and audiology intervention outcomes include:
 - Improved quality of life.
 - Effective resident-staff communication.
 - Consistent application of swallowing care plans.
 - Fewer responsive behaviours in people with dementia.
 - Reduced caregiver burden.

5) HOW SAC CAN HELP

- SAC is well positioned to contribute to the development of new, national standards for long-term care.
- SAC has previously participated in consultations on the National Dementia Strategy, National Seniors Strategy and Long-Term Care on Reserve.

6) DISCUSSION

- The new national standards for long-term care provide a valuable opportunity to improve the safety and well-being of long-term care residents with communication, swallowing, hearing and balance difficulties.

References Available on Request.