

CORE20 PLUS 5

How SLTs can support you to reduce health inequalities in adults

Core20PLUS5 is an NHS England approach to inform action to reduce healthcare inequalities at both England wide and system level. The approach defines a target population – the 'Core20PLUS' – and identifies '5' focus clinical areas requiring accelerated improvement.

Speech and language therapists (SLTs) have a vital role to play in **reducing health inequalities** for adults.

CORE20 PLUS 5

KEY CLINICAL AREAS OF HEALTH INEQUALITIES





- SLTs identify babies at risk and help them and their families to establish safe and positive oral feeding.
- SLTs are skilled in the assessment and treatment of early communication development and provide guidance and training to parents and neonatal staff.





- SLTs assess, identify and meet both communication and swallowing needs.
- SLTs provide **guidance and intervention** on a safe swallow, feeding positions and advice on food and medication consistency.
- SLTs **reduce the risk of swallowing problems**, leading to dehydration, malnutrition, choking and pneumonia.
- SLTs advise on what adjustments are needed to make all verbally mediated psychological interventions/assessments accessible.
- SLTs **enable clients to make informed choices** about their own care and consent to treatment.





Chronic respiratory disease

- SLTs specialise in the assessment, management and treatment of upper airway disorders, including inducible laryngeal obstruction and chronic cough.
- SLTs provide non-medical treatment for cough control.
- SLTs can **help people with chronic obstructive pulmonary disease** (COPD) to eat, drink and communicate to the best of their ability.





Early cancer diagnosis

- SLTs assess, diagnose and manage communication, speech, voice and swallowing problems due to head and neck cancer.
- SLTs provide information regarding the potential impact of treatment on communication and swallow functioning and assist in multi-disciplinary team (MDT) decision making.
- SLTs contribute to **long-term support**, **palliative and end-of-life-care decisions**, promoting quality of life.





Hypertension case-finding

- SLTs provide assessment of swallowing and communication difficulties following acute stroke.
- SLTs train members of the MDT and provide long-term rehab as part of rehabilitation team.
- SLTs support the medical team to assess capacity.

SPEECH, LANGUAGE AND COMMUNICATION IMPACT ON KEY CLINICAL AREAS





- There are links between a mother's speech, language and communication needs (SLCN) and her ability and willingness to accept pre-natal services and information, which affects peri-natal health of mum and baby, parenting ability and feelings about parenthood.¹
- Babies admitted to neonatal units are at risk of feeding and early communication difficulties.¹





Severe mental illness

- Communication difficulties are a barrier to engagement with rehabilitation and psychological programmes, which can impact on recovery and length of stay in mental health settings.²
- The NHSE Mental Health Services Specification names
 SLT as a core member of the MDT. 3,4

68%

of those with dementia in homes for the elderly were found to have dysphagia.⁵





Chronic respiratory disease

- Swallowing difficulties, changes to the voice, chronic cough and oral hygiene issues are common in chronic obstructive pulmonary disease (COPD).⁶
- COPD disrupts the coordination between the swallowing and respiratory systems.⁷
- The NHS England Service Specification for Severe Asthma identifies a need for an SLT within the severe asthma MDT.⁸





Early cancer diagnosis

 Head and neck cancer treatments commonly affect a person's ability to speak, use their voice, swallow, smell and breathe.⁹ 12,400
cases of head and neck cancer every year in the United Kingdom.¹⁰





Hypertension case-finding

 Presence of hypertension in elderly patients may increase the chance of presenting asymptomatic swallowing disorder by 2.1 times.¹¹

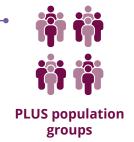
SPEECH, LANGUAGE AND COMMUNICATION IMPACT ON CORE20



The Core20 is the most deprived 20% of the national population as identified by the national Index of Multiple Deprivation (IMD).

 There are clear links between social disadvantage and speech, language and communication needs, which have been shown to impact into adulthood.

SPEECH, LANGUAGE AND COMMUNICATION IMPACT ON PLUS POPULATION



PLUS population groups are identified at a local level as experiencing poorer than average health access, experiences and outcomes.

 People with a learning disability (LD) are at a greater risk of eating, drinking and swallowing difficulties¹³ and death from aspiration pneumonia.¹⁴ age 5
are associated with employment outcomes at age 34¹²



How SLTs support these groups

- SLTs work with individuals with a LD throughout their life to enable access to education, employment and social activities.
- SLTs work with individuals with a LD and **their families to support communication** for greater quality of life and increased participation.
- SLTs are **a core part of community LD teams**, assessing the speech, language, communication and swallowing needs of individuals with a LD.
- SLTs play a key role in the **evaluation and management of autistic individuals** as they provide interventions to help improve communication skills and train others involved in the care and education of autistic people.
- SLTs contribute to a **differential diagnosis of autistic people**.

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