



Speech and Hearing BC

## Key Advocacy Messages - 2019

When it comes to communication health for British Columbians, the key to effective support and treatment is **access to care for everyone**. Speech and Hearing BC will always work to highlight the needs of patients to ensure that access to care is available for children, adults, and seniors across the province. There are currently three issues in particular that require particular attention; early childhood intervention, hearing aid funding, and residential care services. The ongoing lack of adequate support in these key areas is contributing to lower communication health outcomes.

### Early Childhood Intervention

Offering adequate services to the youngest children of our province in support of their communication needs is absolutely vital. The development of speech and language, and its link to cognitive development, social skills, academic learning, and self regulation is a foundational building block for every human. Language development influences the developmental trajectory of a child for a lifetime.

**A conservative estimate (prevalence rate of 10%) would predict that one in ten preschoolers need to see a speech-language pathologist (SLP) for support in developing age-appropriate communication skills.**

Currently, it is not unusual for children to be left waiting for months or even years to see a publicly funded speech-language pathologist for families with toddlers/preschoolers in BC. Some children are left waiting and never end up having access to an SLP before entering kindergarten.

BC funds just under 165 FTE for speech-language pathologists serving the toddler/preschool population at the local level leading to large caseload sizes and long waits for service. Almost 50% of SLPs in British Columbia working at either a health unit or a Child Development Centre, have caseloads above 80 children.

**The recommended caseload for one full time equivalent (FTE) SLP is 25-40 children** allowing for best-practice clinical decision making/intervention for each individual child. Allowing for the maximum recommended caseload of 40 FTE and assuming a prevalence rate of 10% of preschoolers in the general population needing to see a speech-language pathologist, **BC would require 552 FTE for Speech-Language Pathologists to address the estimated need.**

### **ACTION:**

The government should take immediate steps to address the lack of adequate communication health services for children in our province. It should increase access to publicly funded appropriate and timely speech-language service for the toddlers and preschoolers. It should move to eliminate wait times for the toddlers and preschoolers who need speech-language service. Immediately adding an additional 175 local FTE SLPs will go a long way towards addressing these critical unmet needs.

## Hearing Aid Funding

We know that more than 10% of British Columbians experience some form of hearing loss and less than 25% seek assistance, largely due to prohibitive barriers such as cost. The prevalence of hearing loss increases for those aged 65+, the standard age to begin receiving a fixed pension income. For many with hearing loss, hearing aids can be essential to maintain the ability to communicate as well as the ability to safely move around in their environment.

Left untreated, hearing loss can also lead to feelings of social isolation and depression and can place persons at risk for greater mental, cognitive and physical health issues.

**Currently, British Columbia is one of the few provinces in Canada with no comprehensive hearing aid funding.** Hearing aids **are not covered** under the provincial Medical Services Plan (MSP). A recent CBC News Investigation found BC residents pay more **out of pocket** for hearing aids than residents of nearly every other province.

### **ACTION:**

The government should ease the financial burden for individuals by developing a framework for funding support for hearing aids. This will mitigate the poor health outcomes associated with untreated hearing loss, while also reduce the burden of untreated loss on the health care system and ultimately improve overall quality of life.

For a pensioner earning less than \$10,000 annually, the estimated \$3,000 cost for a hearing aid that lasts 3-5 years on average is a major hit to the pocketbook.

## Long-Term Care Services

According to recent statistics from Speech-Language and Audiology Canada, **British Columbians suffer from the second lowest number of Speech-Language Pathologists (SLPs) per capita** of all the provinces in Canada. The lack of adequate SLP services in the province is contributing to a gap in services for those in long-term care.

The dedicated and passionate SLPs in this province are vital to evaluating and treating individuals for speech, language, and swallowing disorders. These disorders are often the result of strokes, degenerative diseases like Parkinson's or dementia, ALS or multiple sclerosis, as well as traumatic injury to the brain, certain cancers, and surgery in the head and neck.

When British Columbians do not have adequate access to timely identification and treatment of these communication health disorders, overall health outcomes and quality of life can seriously suffer as a result. Unfortunately, the current MSP does not cover rehabilitation services, and this leads to many individuals who have communication or swallowing disorders who are receiving minimal treatment and care options.

### **ACTION:**

The government should aim to bring British Columbia up to the national average in terms of number of practicing Speech-Language Pathologists per capita to ensure people with communication and swallowing difficulties have access to critically needed services. In order to do this, 200 new publicly funded Speech-Language Pathology positions must be added to our healthcare system. This includes SLP services for adults in

the general community and long-term care facilities. It should also focus on ensuring that key regions of the province are receiving equitable access.

The government should also review the MSP framework to include rehabilitation services for those with communication and swallowing health disorders. We respectfully request a response by August 1, 2019 and a meeting with a representative of the Ministry of Health in order to discuss how the Ministry will aim to ensure adequate SLP services for British Columbians living with communication and swallowing disorders.