

JOURNAL OF
Palliative Medicine

Journal of Palliative Medicine: <http://mc.manuscriptcentral.com/palliative>

Supporting crucial conversations: Speech-language pathology intervention in palliative end-of-life care

Journal:	<i>Journal of Palliative Medicine</i>
Manuscript ID	Draft
Manuscript Type:	Letters to the Editor
Keyword:	Speech Therapy/Swallowing Issues, Pediatric Communication Issues, Neurology-specific areas of palliative care, Hospital-specific Palliative Care Issues, Community-based palliative care
Manuscript Keywords (Search Terms):	crucial conversations, speech-language pathology, palliative care, end-of-life, augmentative communication, multi-disciplinary team

SCHOLARONE™
Manuscripts

Supporting crucial conversations

The COVID-19 pandemic has highlighted the profound challenge of communicating with a dying patient or family member. Skilled use of alternative means of communication may be a necessity.¹

We represent SLPs from around the globe with expertise in empowering and enabling patients across the age continuum to communicate during palliative or end-of-life care, in the hospital or in the home setting. A patient's ability to communicate to guide care decisions and engage in crucial end-of-life conversations is a key component for all team members when providing quality palliative care. Declining communication skills can be especially stressful for family members as they anticipate the loss of their loved ones.² Now more than ever, essential conversations may be conducted virtually, with the SLPs as a core team member to optimize the use of techniques and supportive technology options for effective communication.

Practice patterns of 322 SLPs from the Republic of Ireland, Canada, Australia, United States, United Kingdom, and New Zealand who deliver palliative care were surveyed. The authors concluded that SLPs in palliative care may be unrecognized or underutilized at facility, national or international levels.³ In contrast, when Medical Assistance in Dying (MAiD) became legal in Canada in 2016, it was recommended that patients with diagnoses including: stroke, neurodegenerative conditions, head and neck cancer, and cognitive communication disorders be screened for communication impairments with a referral to an SLP if a significant communication impairment is identified.⁴ This recommendation was endorsed in recognition of communication as a human right.

1
2
3 A timely referral for a speech–language pathology consult should be initiated when a
4
5 patient’s impaired ability to communicate limits their capacity to communicate symptoms,
6
7 participate in care decisions, or engage with meaningful emotional, social or spiritual support.
8
9
10 Most interventions by an SLP in this context are of short duration and are modified in response
11
12 to changes in the patient's condition or needs. Interventions may include the use of alternative
13
14 and augmentative communication systems to maximize verbal and non-verbal communication,
15
16 as well as strategies to facilitate voice and swallowing/eating comfort. ⁵ For example, the SLP may
17
18 1) provide a patient with a strategy so that their voice is audible for the physician or social worker 2)
19
20 show a distressed partner how to use written choice when their loved one’s aphasia becomes severe
21
22 due to their brain malignancy, or, 3) provide a phone app for text-to-voice output communication.
23
24
25
26

27 The SLP may work directly with the patient or indirectly with the palliative care team,
28
29 support persons and family. We encourage and support the collaboration between all members
30
31 of the palliative care team. The delivery of an individualized patient centered-care approach to
32
33 communication aims to empower patients and their communication partners in a time when all
34
35 voices should be heard.
36
37
38
39
40
41
42
43
44
45
46
47
48

- 49 1. Freeman-Sanderson A, Rose L & Brodsky MB: Coronavirus disease 2019 (COVID-
50
51 19) cuts ties with patients' outside world. Aust Crit Care 2020; 33(5): 397-398.
52
53 DOI:10.1016/j.aucc.2020.08.001
54
55
56
57
58
59
60

2. Pollens R: Facilitating client ability to communicate in palliative end-of-life care: Impact of speech-language pathologists. *Top Lang Disord* 2020; 40(3): 264-277.
3. O'Reilly AC & Walshe M: Perspectives on the role of the speech and language therapist in palliative care: An international survey. *Palliat Med* 2015; 29(8). DOI:10.1177/ 0269216315575678
4. DeZeeuw K & Lalonde Myers E: The role of speech-language pathologists in medical assistance in dying: Canadian experience to inform clinical practice. *Can J Speech Pathol Audiol*; 44(2), 49-56.
5. Chahda L, Mathisen B & Carey L: The role of speech-language pathologists in adult palliative care. *Int J Speech Lang Pathol* 2017; 19(1). DOI: 10.1080/17549507.2016.1241301