Speech-Language Pathology SERVICES IN THE HOME (HOME HEALTH)

Speech-language pathologists (SLPs) work with **people across the lifespan** on communication and swallowing skills.



DID YOU KNOW?

Some people can qualify to have speech-language pathology **services in the home** if they are unable to get to appointments in the community.

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WHO:

SLPs work with adults of **all ages**, including those who experience a stroke; nervous system disease (e.g., Alzheimer's, multiple sclerosis); respiratory disease; cancer; or traumatic brain or other injury. These all can result in speech, language, cognitive, and swallowing problems. Home health services by SLPs may also be needed for children, such as a baby using

a feeding tube at home or a medically fragile child who can't attend appointments in the community.

WHAT:

Most commonly, SLPs in home health work with people in areas that include the following:

- **Speech.** Difficulties can involve muscle weakness in the mouth and/or trouble getting the muscles of a person's mouth to move in a way that helps them speak clearly. This may make it hard for others to understand them.
- Language. A person may have difficulty expressing themselves and/or understanding others. This includes having trouble finding the words that they want to use; putting words in the wrong order or substituting sounds or words (e.g., "table" for *bed*; "wishdasher" for *dishwasher*); and following conversations. They may also have trouble with reading, writing, or spelling.
- **Cognition.** This can involve reduced problem-solving abilities, organizational skills, and judgment. Memory loss is also common-particularly for people with dementia or Alzheimer's, or for those who had a stroke or brain injury.
- Augmentative and Alternative Communication. Some people may use—or choose to use—other ways to communicate besides talking, such as picture boards or speech-generating devices. These methods may be needed following medical interventions such as a tracheostomy, or when a person has a neurodegenerative disease like amyotrophic lateral sclerosis (ALS), Parkinson's disease, or multiple sclerosis.
- **Feeding and Swallowing.** Difficulties may include coughing during or after eating or drinking, food or liquid leaking from the mouth, or food getting stuck in the mouth or throat. These may put someone at risk for dehydration, malnutrition, and other complications.

HOW:

People may be referred for home speech-language pathology services when discharged from a hospital, rehabilitation, or long-term-care facility. Doctors may also refer people directly to home health providers. Home care speech-language services may be covered by Medicare, Medicaid, private insurance, other third-party sources—or they may be private pay. Coverage typically requires the person to be homebound and unable to travel to appointments in the community.

WHY:

Home health services provide the opportunity for people to continue to make progress and *live a fuller and more independent life.* Therapy activities can address "real-life" needs in a person's daily activities and routines (e.g., preparing safe meals or communicating with caregivers). The home setting provides opportunities to incorporate families into therapy and individualize each person's care plan to their specific environmental and social needs.