

Speech-Language Pathology SERVICES FOR CHILDREN IN INPATIENT SETTINGS



WHO:

SLPs work with children from birth to 18 years of age. Children may be treated in inpatient facilities, as opposed to in a school or at an outpatient clinic, when they have **one or more complex medical issues** such as cleft lip/palate, neurologic disease, traumatic brain injury, respiratory problems, genetic syndromes or congenital anomalies, and/or chronic conditions that require hospitalization.

WHAT:

The communication and feeding/swallowing needs of children—and treatment options appropriate for them—may differ across age groups: infants, toddlers, preschoolers, school-aged children, and adolescents. SLPs help in areas that include:

- **Speech.** It may be hard for other people to understand a child when they talk. Sometimes the muscles needed to make speech sounds are weak. Other times, the brain has trouble telling the speech muscles how and when to move. Such difficulties may be caused by developmental disorders, genetic syndromes, or brain diseases.
- **Language.** A child may have problems finding words to express themselves, understanding what others are trying to communicate to them, and reading and/or writing. There are many potential causes of language problems, including being born early, stroke, and brain injury.
- **Augmentative and Alternative Communication.** Children may need or choose to use other ways to communicate besides talking. These include no or low- and high-tech options such as pointing or gesturing, picture boards, and speech-generating devices.
- **Feeding and Swallowing.** Feeding disorders include problems with sucking, eating from a spoon, chewing, and/or drinking from a cup. A swallowing disorder involves difficulties with moving food or liquid from the mouth, throat, or esophagus into the stomach. All can lead to health, learning, and social problems.

WHERE:

SLPs work in intensive care units (including NICUs), hospitals, and rehabilitation centers.

HOW:

Children are often referred to an SLP for a communication or swallowing evaluation by pediatricians, neurologists, gastroenterologists, otolaryngologists, psychologists/psychiatrists, and other professionals. SLPs collaborate closely with other healthcare professionals in delivering treatment services. Speech-language pathology services are paid for by Medicaid, Medicare, private insurance and state funding programs, though coverage can vary.

WHY:

SLPs help children develop the **communication and swallowing skills they need for life.** These may be especially challenging—but achievable—for those with complex and/or chronic medical needs and conditions.