



Ms Robyn Kruk AO
Chair Covid-19 Inquiry Response Panel
Department of Prime Minister and Cabinet
Sent via: <https://www.pmc.gov.au/covid-19-response-inquiry/consultation>

14 December 2023

Dear Ms Kruk

Speech Pathology Australia thanks the COVID-19 Response Inquiry Panel for the opportunity to make a submission.

Speech Pathology Australia is the national peak body for speech pathologists in Australia, representing more than 14,000 members. Speech pathologists are university trained allied health professionals with expertise in the diagnosis, assessment, and treatment of communication and swallowing difficulties.

We provide recommendations in the following areas:

1. Key health response measures
2. Governance including the role of the Commonwealth Government and responsibilities of state and territory governments
3. Mechanisms to better target future responses to the needs of particular populations
4. Health supports for people impacted by Covid-19.

Key Health response measures

Recommendation

Speech Pathology Australia recommends that all allied health professions, including self-regulated health professions such as speech pathology are recognised within future response measures.

Speech pathology is a self-regulated health profession, and member of the National Alliance of Self-Regulating Health Professions (NASRHP). Within many Covid-19 key health response measures, guidance was provided regarding advice and regulation for health professionals such as doctors and nurses, or health professionals working within acute or hospital settings. Guidance for allied health professionals in other settings was routinely lacking, requiring peak bodies or allied health officers to have to request this information and resulting in delays to critical advice regarding provision of allied health services. This was exacerbated by guidance frequently referring to registered health professionals under the Australian Health Practitioner Regulation Agency (Ahpra), excluding a large portion of the allied health workforce.

As self-regulated allied health professionals who work across a range of sectors and settings, it was often unclear as to which health directive applied to speech pathologists. Ahpra registered professions such as physiotherapy or occupational therapy were frequently used as the example professions within allied health specific advice, omitting speech pathologists. Speech Pathology Australia staff had to continuously seek additional clarification from relevant policy makers regarding guidance and rules for speech pathologists returning to work or providing speech pathology services. This led to considerable delays in the provision of the required advice and in some cases undue suspension of speech pathology services.

Speech pathologists working in community settings such as aged care facilities, accommodation facilities for people with disability, or private practice (representing more than half of all Speech Pathology Australia members) were the most severely impacted. The confusion as to which health services were permitted to continue, under which circumstances and resultant impact on service delivery caused immense emotional and financial stress for our membership and negatively impacted upon users of speech pathology services.

Similarly, obtaining information about the requirements for (and access to) personal protective equipment (PPE) was challenging for the speech pathology profession, particularly those members working within private practice settings. Speech Pathology Australia received a high volume of member contacts to receive guidance regarding their PPE requirements and/or raise concerns regarding accessibility and cost of PPE. This was exacerbated due to limited linkage pathways with Primary Health Networks and exclusion of speech pathologists from PPE arrangements within community-based settings such as aged care facilities.

Health response measures providing additional allied health sessions after lockdowns in residential aged care under Medicare funding only focused upon physical mobility (e.g. physiotherapy and occupational therapy) and excluded speech pathology. This ignored the very large number of people with other sequelae of Covid-19, most notably the large number of people with swallowing difficulties. Future policy responses must be in place to proactively recognise all components of the health workforce and ensure equitable measures are in place for effective information and resource distribution.

Governance

Recommendation

Speech Pathology Australia recommends that timely national guidance from the commonwealth government is provided regarding the health response, regulation of health services.

Despite calls from many experts to consider overseas guidance recognising the role of airborne transmission and therefore the necessary precautions to mitigate against it, there was delayed recognition of airborne transmission of Covid 19 by the Australian Health Protection Principal Committee (AHPPC). This created confusion and further delayed access to consistent messaging of critical information to protect the public and health workers such as speech pathologists. Limited evidence was provided to the public and health sector regarding updated advice on the type and levels of PPE needed due to this form of transmission.

Based upon emerging overseas guidelines and experiences of speech pathologists internationally, Speech Pathology Australia developed profession specific guidance including precautions for airborne transmission far earlier than the Australian guidelines changed to recognise this emerging evidence. Governance mechanisms to oversee and monitor future committees in the case of similar scenarios should consider mechanisms to appropriately respond to advancements in scientific understanding.

Additionally, national guidance regarding regulation of health professionals and delivery of health services would have assisted speech pathologists, particularly those working across border communities or via telehealth. The extensive differences across states and frequent changing of rules and advice resulted in reports of significant stress and information fatigue for the sector, and interruptions to service provision.

Mechanisms to better target future responses to the needs of particular populations

Recommendation

Speech Pathology Australia recommends that communication of future response measures to the public is timely, effective and communication accessible.

There has been significant discussion regarding the accessibility of information and provision of supports for people with disability in response to Covid-19¹. Speech Pathology Australia highlights the issue of the lack of accessible information provided to the public, including people with communication disability and people from culturally and linguistically diverse communities.

As per Article 21 of the United Nations Convention on the Rights of Persons with Disabilities² people with disability have the right to access this critical health information, particularly when it affects their safety, wellbeing and ability to receive services. A national communication policy ensuring minimum accessibility standards for health messaging, incorporating communication accessibility is required to ensure that this right is upheld.

Health supports for people impacted by Covid-19

Recommendation

Speech Pathology Australia recommends that speech pathologists are recognised as key members of rehabilitation teams for people with Covid-19 or Long Covid.

The rehabilitation needs as a result of contracting Covid-19 and Long Covid have not been systematically addressed in Australia. There are insufficient clinics and resources to address community need in this area, and a lack of a defined clinical pathway to help inform medical practitioners and the public.

There is clear evidence that speech pathology services are a core need within Covid-19 rehabilitation³ but to date they have not been adequately included in a rehabilitation pathway, leading to ongoing burden of disease for individuals living with residual impacts on communication and swallowing. This has impacts on workforce and social participation, mental and physical health and wellbeing. Speech Pathology Australia calls for speech pathologists to be recognised as key members of rehabilitation teams and for these critical services to be included within the rehabilitation pathway for Covid-19 and Long Covid.

Speech Pathology Australia is keen to engage with the Covid-19 Response Inquiry Panel to improve health outcomes for people with Covid-19 or Long Covid. Please contact Mr John Foley General Manager Policy and Advocacy, on 03 9642 4899 or by emailing

[REDACTED] if Speech Pathology Australia can assist in any other way or provide additional information.

Yours sincerely



Kathryn McKinley
National President

¹ [Statement of ongoing concern - The impact of and responses to the Omicron wave of the COVID-19 pandemic for people with disability | Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability](#)

² [Convention on the Rights of Persons with Disabilities | OHCHR](#)

³ Chadd, K., Moyses, K., Enderby, P. (2021) Impact of COVID-19 on the speech and language therapy profession and their patients. *Frontiers in neurology*, 12, 629190; Dawson, C., Clunie, G., Evison, F., Duncan, S., Whitney, J., Houchen-Wolloff, L., Bolton, C. E., Leavy, O. C., Richardson, M., Omer, E., McAuley, H., Shikotra, A., Singapur, A., Sereno, M., Saunders, R. M., Harris, V. C., Greening, N. J., Nolan, C. M., Wootton, D. G., Daynes, E., ... Wallace, S. (2023). Prevalence of swallow, communication, voice and cognitive compromise following hospitalisation for COVID-19: the PHOSP-COVID analysis. *BMJ open respiratory research*, 10(1), e001647. <https://doi.org/10.1136/bmjresp-2023-001647>; Rodrigues, M., Costa, A. J., Santos, R., Diogo, P., Gonçalves, E., Barroso, D., Lima, A. (2023). Inpatient rehabilitation can improve functional outcomes of post-intensive care unit COVID-19 patients—a prospective study. *Disability and Rehabilitation*, 45, 2, 266-276.