

The Role of GPs and Other Health Professionals in Identifying and Managing Children with Speech, Language and Communication Difficulties

**PRIMARY
HEALTH
NETWORK**

phn
HUNTER NEW ENGLAND
AND CENTRAL COAST
An Australian Government Initiative

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Dr Mary Claessen is an experienced Speech Pathology researcher and clinician and is a current academic staff member in the Curtin University School of Allied Health. Mary's research focusses on improving quality of life for people with communication and feeding difficulties.



Jessica Warren is a Senior Psychologist and Manager with Psychological and Specialist Services, Department of Communities and Justice. Her particular area of interest lies in the treatment of trauma in the early childhood period

Kate Headley has worked extensively as a senior speech pathologist in the disability sector across NSW. Between 2018-2021 she worked as part of the LINKS Trauma Healing Service providing trauma-focused interventions to children living in OOHC.



Poll:

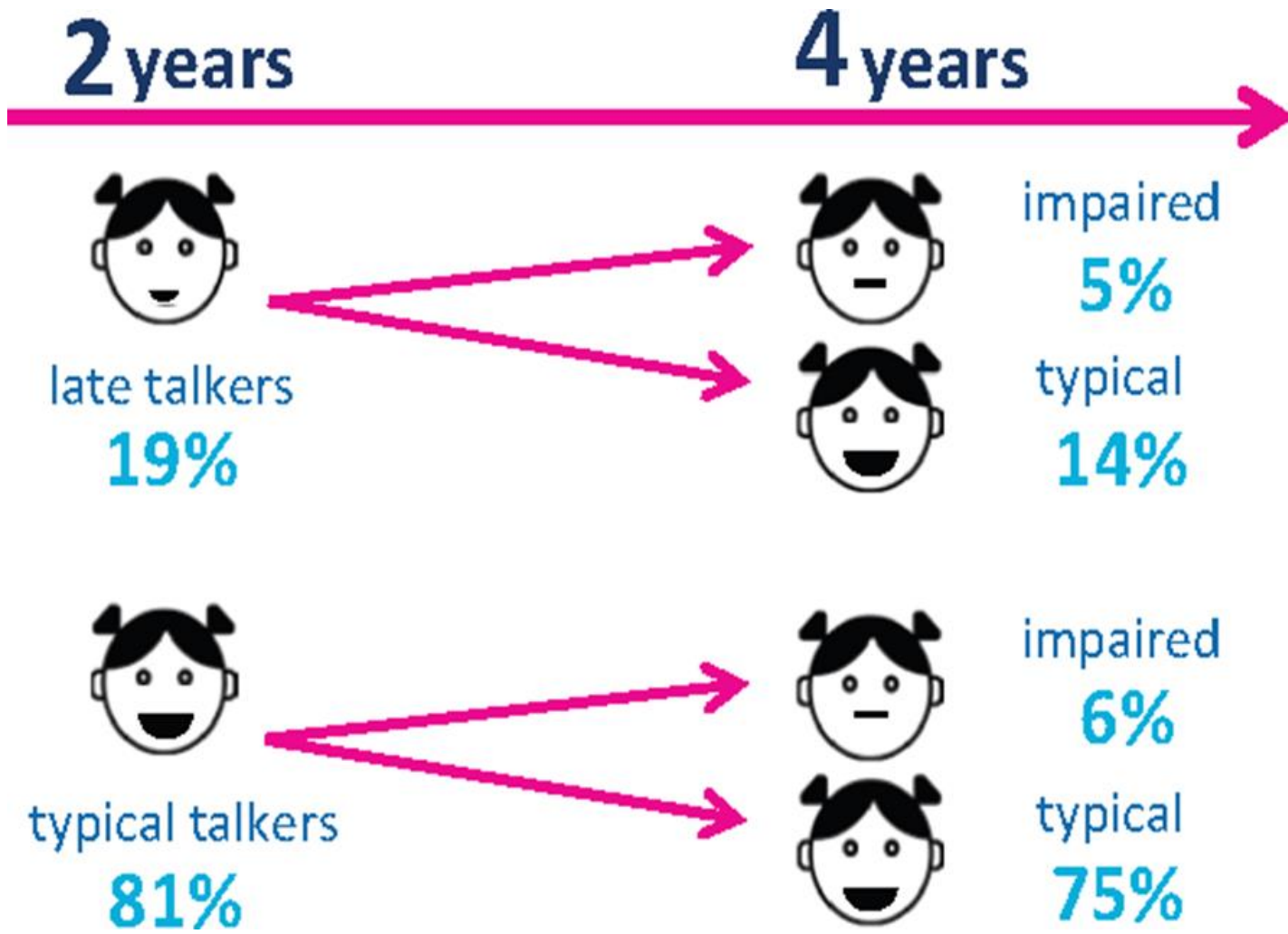
In Australian data, what percentage of children start school developmentally delayed with their communication milestones?

- A. 5-10%
- B. 10-20%
- C. 20-30%
- D. 30-40%

Case Discussion 1

Chloe presented for an appointment in general practice with her Mum following concerns about skin sores. Chloe was aged 2.5 years at the time. Physical examination identified what appeared typical of a dermatitis that had been scratched and subsequently infected. Throughout the appointment Mum demonstrated flat affect and low mood. Chloe appeared to mirror this – she was quiet and unemotive. She demonstrated minimal changes in her demeanor with efforts to engage her in banter. On one occasion she smiled slightly during play with the stethoscope.





What would you do:

Would you refer Chloe to a Speech Pathologist?

- A. Yes
- B. No
- C. Unsure



What do you think:

Is Chloe eligible for a GPMP?

- A. Yes
- B. No
- C. Unsure



Case Discussion 2

Brandon presented with his step mother for an appointment in general practice with concerns about his attention and behaviour. Brandon was 12;2 at the time of the appointment. His step mother described that she had known Brandon for 5 years, sharing a home with him for the past 3 years.

Case history collected from his step-mum indicated that everyone always refers to Brandon as having ADHD, although he doesn't have a formal diagnosis. His step-mum reported not knowing the details of Brandon's early life experiences, but knowing that he had been placed in his Father's care full time as his Mother had a history of allowing violent partners to live in the home with her and her children. Brandon's father had previously shared with her that he suspects Brandon was abused by some of his Mother's partners.

Brandon's presenting problems are reported as difficulties managing his feelings, with violent and aggressive outbursts at home and school. It is described that Brandon has been suspended twice from school in the past term and was kicked off his soccer team. Throughout the appointment, Brandon is quiet and sullen. He is reluctant to engage with you and provides single word answers to your questions.

Poll:

What is the co-occurrence of behavioural difficulties and language disorder ?

- A. Unknown
- B. Up to 30%
- C. 30-60%
- D. More than 60%

Poll:

What is the incidence of communication difficulties when a child has experienced complex trauma?

- A. Unknown
- B. Up to 30%
- C. 30-60%
- D. More than 60%

When thinking about ACEs and Complex Trauma:

“.....language disorders
are so common in this
population as to be
almost normative”

(Snow, McLean & Frederico, 2020)

Poll:

Is there a clinical relationship between speech, language & communication disorders and mental health disorders?

- A. Yes
- B. No
- C. Unsure

What would you do?:

Would you refer Brandon to a Speech Pathologist?

- A. Yes
- B. No
- C. Unsure