

Adult Community SLT: Service overview

Adult acquired conditions

- Predominantly see adults with acquired swallowing and/or communication difficulties – **community** (clinic, patient's home, community hospitals, Hospice) and **Ipswich Hospital** (inpatients and ENT outpatients including Head and Neck cancers)
- Geographical coverage: East and West Suffolk CCG and South Norfolk
- Location/Base: Allington, DRC, Ipswich Hospital (+ Newmarket Hospital)
- Hours of Operation: Mon – Fri 9am – 5pm (some flex at beginning/end of day, according to service demand)

Our populations

Most commonly we see people with swallowing and/or communication problems associated with:

- **Stroke**
- **COPD** (27% of this population experience dysphagia)
- **Dementia***
- **Acquired neurological conditions** (predominantly Parkinson's Disease, MND, MS)
- **End of Life Care**
- **General medical disorders** (eg UTI, medical decompensation)

Referral information – useful to tell us...

- The more information we have, the more quickly and effectively we can triage
- Dysphagia:
 - Dates of chest infections over last 6 months (+ antibiotic treatments)
 - How often do they cough? On what? (Food? Fluids? Both?)
 - Discussions with family re: any decisions/discussions around risk management +/- alternative feeding
 - Share the record!

Communication:

- Include a summary/description of the difficulties
- Refer early for communication problems + dementia (and dysphagia!)
- How long the patient has experienced the difficulty and recent changes
- Share the record!

Commissioned response times

Priority 1: within 10 working days

Recurrent, unexplained chest infections

Sudden, unexplained weight loss

Not able to eat/drink (not behavioural)

Supporting risk management (palliative care, no plans in place)

Priority 2: within 20 working days

No short term risk of dehydration, malnutrition, chest infections

Complex dysphagia – plans in place from Acute stay

Communication disorder + vulnerable living circumstances/early support indicated

Priority 3: 18 weeks (aim for 13 weeks, as per RCSLT guidelines)

Stable and safe on modified diet/fluids – likely to be upgraded

Communication - Info/support/rehab required

Actual Response Times

KPI Monitoring (from January 2017)

- 100% compliance with Priority 1
- 100% compliance with Priority 2
- 100% compliance with Priority 3

March 2017

- Max waiting time: 16.29 weeks
- Average waiting time: 4.03 weeks



Adult SLT Pilot project: extended services

- Pilot began March 2017 and will run for 6 months, with a midway review and final evaluation
- Incorporates the principles that the service moves away from diagnosis based referral criteria and moves toward accepting referrals based on clinical need
- **The community SLT service will absorb any appropriate dementia referrals, mental health and non-acquired conditions into the already established service provision**
- The acute SLT services will outreach into the community for those patients discharged from hospital requiring a follow-up appointment

How to refer?

- **Referral form**

- Telephone: 01284 748847 01473 275285
- Fax: 01284 748889 01473 275246
- **Email: communityslt.suffolk@nhs.net**

- **Contact details:**

- | | |
|------------------------------|---------------------|
| • Adult SLT service | Adult SLT service |
| • Disability Resource Centre | Allington Clinic |
| • Bunting Road | 427 Woodbridge Road |
| • Bury St Edmunds IP32 7BX | Ipswich IP4 4ER |