3.10 Referral to Mental Health Speech & Language Therapy (includes Accessing Mental Health Speech and Language Therapy and NHS GGC Mental Health lin patient Speech & Language Therapy Dysphagia Pathway)

ACCESSING SPEECH AND LANGUAGE THERAPY

Speech and Language Therapists (SLTs) assess, diagnose and manage individuals with swallowing difficulties and/ or communication problems. SLTs work as part of multidisciplinary teams advising, supporting and enabling patients, professionals, families and carers.

In relation to swallowing, that support includes managing risk of aspiration, providing strategies to maximize swallow function and support independent eating and drinking, thereby maximizing the patients quality of life.

Prior to Contacting the SLT and requesting assistance from that service;

- the medical or nursing team will have identified a potential swallowing problem and will have followed the NHSGGC Mental Health Speech and Language Therapy Dysphagia Pathway for patients with for swallowing difficulties – see below
- discussion within the MDT will have taken place regarding the nature of concerns and what is being requested from SLT service
- Your usual consent procedures for that individual, dependent on capacity will have been followed

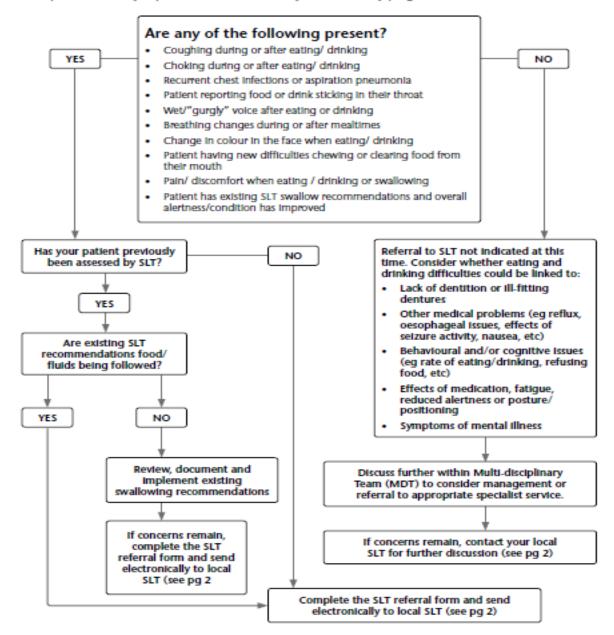
The following NHSGGC Mental Health Speech and Language Therapy Dysphagia Pathway for patients with eating and drinking difficulties can be used by any multidiscipline to initiate communication of a swallowing problems for further discussion and or referral onto SLT within NHSGGC Mental health in patient wards, this includes any concerns you may have about the patient/ impact of any difficulties with food, fluid or swallowing, whether these are new SLT concerns for the patient, what has been previously tried and has there been any change in the current presentation of the patient's swallowing.

NHSGGC In Patient Mental Health Speech and Language Therapy Dysphagia Pathway



There are many reasons patients may present with eating and drinking difficulties. Some of these presentations may require a referral to SLT and may be a result of Dysphagia.





NHSGGC In Patient Mental Health Speech and Language Therapy Dysphagia Pathway





| Decision reached from following dysphagia pathway | Please tick appropriate outcome | Signature: | Date: | Outcome/Actions: |
|--|---------------------------------------|------------|-------|------------------|
| Speech and Language Therapy referral form to be completed and sent electronically to local SLT | | | | |
| If there are immediate concerns re nutrition and hydration, please inform medical staff involved in the patient's care. While awaiting SLT review/ assessment patients should be given food and fluid that will minimise the risk of choking, and should be supervised when eating and drinking. | | | | |
| Review the patient, document and implement existing swallowing recommendations within current Multidisciplinary (MDT) care plan | | | | |
| Discuss further within MDT to consider further nutritional management if required or referral to appropriate specialist service. | | | | |
| Contact local SLT for further discussion (include your name, ward, patient's name and CHI and reason for contact) | | | | |

Local SLT contact details:

As the SLT is not in one location all week within mental health, has periods of leave and wants to ensure a timely response to nursing and medical requests for assistance, the **email contact** should be used in the first instance for all new referrals, requests for reviews and discussion/advice.

This will minimise the risk for you and the patient, of the SLT not picking up your telephone message.

| Service | E-Mail | Phone number |
|---|-----------------------------|---------------|
| Glasgow Mental Health Inpatients | SLTMH@ggc.scot.nhs.uk | 07940 741 747 |
| Inverclyde Mental Health Inpatients | SLTIRH@ggc.scot.nhs.uk | 01475 505 023 |
| Renfrewshire Mental Health Inpatients | SLTMHRen@ggc.scot.nhs.uk | 01475 504 366 |
| Forensic Mental Health and Learning Disabilities inpatients | SLTForensic@ggc.scot.nhs.uk | 0141 211 6462 |

NHSGGC In Patient Mental Health Speech and Language Therapy Dysphagia Pathway

For patients with eating and drinking difficulties



Speech and Language Therapy (SLT) Referral Form

Please only complete this form after following the Mental Health Speech and Language Therapy (SLT) Dysphagia Pathway. Send the completed form via e-mail to your local SLT.

| Name or referrer: | Hospital and ward: | | | |
|---|--|--|--|--|
| Date: | Consultant/RMO: | | | |
| Name of patient: CHI: | | | | |
| Has the patient consented to referral to SLT? | | | | |
| | | | | |
| Yes Patient unable to consent | | | | |
| Please state who has provided consent for referral: | | | | |
| Are there any specific risks/alerts for working with this pa | atlent? | | | |
| Is the swallowing difficulty: | | | | |
| New Existing but appears to have deteriorate | d Existing but appears to have improved | | | |
| What are your concerns about the patient in relation to | swallowing (please tick all that apply): | | | |
| Coughing during or after eating drinking | | | | |
| Choking during or after eating/drinking | | | | |
| Recurrent chest infections or aspiration pneumonia | | | | |
| Patient reporting food or drink sticking in their throat | it | | | |
| Wet/gurgly voice after eating or drinking | | | | |
| Breathing changes during or after mealtimes Change in colour in the face when eating/ drinking. | | | | |
| Patient having new difficulties chewing or clearing for | and from their mouth | | | |
| Pain/ discomfort when eating / drinking or swallowing | | | | |
| Other (eg compliance issues): | | | | |
| Have you observed the patient having difficulty with specific consistencies of food or fluids? Please describe: | | | | |
| Food: Fluids: | | | | |
| Do you have concerns around any of the following? Please tick all that apply: | | | | |
| | | | | |
| Level of alertness Posture/positioning when eating and drinking Concentration | | | | |
| | | | | |
| Lack of dentition/ill-fitting dentures Level of assistance required Rate of eating and drinking | | | | |
| Weight loss/food refusal Other: Please state: | | | | |
| Physical Health History: | | | | |
| | | | | |
| Mental Health History: | | | | |
| | | | | |

NHSGGC

NRM: April 2020

Mental Health Speech and Language Therapy Dysphagia Pathway For patients with eating and drinking difficulties



| Decision weeks of from full and the | Please tick | Cignoturos | Date: | Outcome/Actions: |
|--|-------------|------------|-------|------------------|
| Decision reached from following dysphagia pathway | appropriate | Signature: | Date: | Outcome/Actions: |
| uyspiiagia patriway | outcome | | | |
| Speech and Language Therapy referral | | | | |
| form to be completed and sent | | | | |
| electronically to local SLT | | | | |
| If there are immediate concerns re | | | | |
| nutrition and hydration, please inform | | | | |
| medical staff involved in the patient's | | | | |
| care. While awaiting SLT review/ | | | | |
| assessment patients should be given food and fluid that will minimise the risk | | | | |
| of choking, and should be supervised | | | | |
| when eating and drinking. | | | | |
| | | | | |
| Review the patient, document and | | | | |
| implement existing swallowing recommendations within current | | | | |
| Multidisciplinary (MDT) care plan | | | | |
| , | | | | |
| Discuss further within MDT to consider | | | | |
| further nutritional management if | | | | |
| required or referral to appropriate specialist service. | | | | |
| Specialise service. | | | | |
| Contact local SLT for further discussion | | | | |
| (include your name, ward, patient's | | | | |
| name and CHI and reason for contact) | | | | |
| | | | | |

Local SLT contact details:

As the SLT is not in one location all week within mental health, has periods of leave and wants to ensure a timely response to nursing and medical requests for assistance, the email contact should be used in the first instance for all new referrals, requests for reviews and discussion/advice.

This will minimise the risk for you and the patient, of the SLT not picking up your telephone message.

| Service | E-Mail | Phone number |
|--|-----------------------------|---------------|
| Glasgow Mental Health inpatients | SLTMH@ggc.scot.nhs.uk | 07940741747 |
| Inverclyde Mental Health inpatients | SLTIRH@ggc.scot.nhs.uk | 01475 505 023 |
| Renfrewshire Mental Health inpatients | SLTMHRen@ggc.scot.nhs.uk | 01475 504 366 |
| Forensic Mental Health and Learning Disabilities inpatients | SLTForensic@ggc.scot.nhs.uk | 0141 211 6462 |