Speech and Language Therapy

York Teaching Hospital NHS Foundation Trust
Children’s Therapy Services

Helping provide for the needs of children under five with SLCN
3 sessions: 8/10th November 2016

Charlotte Firth, Speech and Language Therapist SLCN Lead
Vicky Mulvana-Tuohy, AHP Senior Manager
Speech & Language Therapists

Generalist: See children with delayed development of SLCN (but these may be managed by Universal and Targeted levels) and also disordered/unusual development of speech, language and communication skills. Typically pre-school children are seen in clinic unless they fall into a Specialist’s remit (see below).

Specialist: See children with areas of specific SLT input needs;
- Hearing Impairment
- Complex needs
- Autism
- Dysphagia (eating/drinking/swallowing)
- Stammering
- Voice
- Selective Mutism
- Severe speech and language disorder as main barrier to learning

Each area of need has a specific Care Pathway; a description of the SLT journey for that particular S, L or C need
Early Years SLCN
Speech, Language, Communication Needs

**Speech:** may sound immature/’babyish’ even for a young child or be very difficult to understand.

**Language:** doesn’t say or understand as much as is expected for age

**Communication:** disinterested in interaction with others e.g. may be absorbed in solitary play or activities and/or speaks but doesn’t seem to see the purpose of communication

**Other issues where SLT may need to be involved**

Difficulties eating /drinking/swallowing

Child dribbles profusely or beyond an age that this might be expected and/or lacks control of oral musculature
Speech and Language therapy

Universal level
Enhancing best practice for children with SLCN by adding to parents/carers and practitioners skills in this area

✓ How speech, language and communication skills develop
✓ Identifying SLCN
✓ When to suspect a child is not following the usual path of development (and then ask for SLT involvement)
✓ Knowledge of appropriate additional support and interventions for SLCN
✓ When to use these, to enhance the child's communication skills
✓ When to look for additional support when these strategies have not created enough progress
✓ When to refer to ask for SLT assessment
How does SLT support Universal level intervention?

• Talk to the SLTs when you see them and phone in advice sessions in new year (2017)

• SLT training sessions
  https://www.yorkhospitals.nhs.uk/childrens_centre/your_childs_hospital_journey/therapy_services/childrens_therapy_training_york/

• Referral Information
  ✓ Children’s Therapy Team referral pack
  ✓ Children’s Therapy services quick reference guide
  ✓ Parental referral form
  ✓ Integrated Children’s Therapy Team referral form
  sessionshttps://www.yorkhospitals.nhs.uk/childrens_centre/your_childs_hospital_journey/therapy_services/childrens_therapy_referral/

• Web site (new year), including information sheets for areas of SLCN (what to be aware of and how to support)
Speech and Language Therapy
Targeted level
Supporting parents/carers and practitioners as they support children with SLCN and put interventions in place

✓ Information sharing when necessary regarding e.g. how to support verbal comprehension difficulties or speech sound difficulties

✓ When to put suitable intervention packages in place

✓ ...and which are suitable for differing areas of SLCN e.g. Time to Talk, or Early Talk Boost

✓ When and with whom interventions are unsuitable

✓ When to ask for SLT assessment/involvement (before, after or during these interventions)
How does SLT support the Targeted level?

• Talk to the SLTs – as before

• AHP SLT training sessions
   https://www.yorkhospitals.nhs.uk/childrens_centre/your_childs_hospital_journey/therapy_services/childrens_therapy_training_york/

• Web site, including information sheets for areas of SLCN (what to be aware of and how to support)

• Advice regarding suitable, additional, enhancing interventions

• Input from SLT e.g. advice re how to support the child and interventions that may be useful
Speech and Language therapy

Specialist level

- When Universal and Targeted strategies have not had a noticeable effect

- When the child has needs that always require a Specialist level in addition to Universal and Targeted e.g. Stammering - see referral guidelines for ‘red flags’ (always refer when)

- Apply the Universal and Targeted information given however; we’re adding to your support, not replacing it.
How does SLT support the Specialist level?

- Assessment of linguistic abilities formally and informally to determine SLCN and the role of the SLT in managing these
- Development of SLT care plans, along with those proximal to the child, to meet these needs, as appropriate
- SMART targeted programmes of care designed specifically in relation to the child’s SLCN. These are identified through departmental Care Pathways for each area of SLCN
- Advice, information and training to those working with the child to enable their care plan and put their targeted areas into their everyday life (in addition to specific practice sessions as necessary)
- Reassessment of targeted areas and revision of targets/care plans
- Provision of child specific reports and information
# Speech and Language Parent Referral Form
(For children under 5 years of age only)

In order for us to assess your child’s needs, we need you to complete all the fields on this form. Forms that are not filled in fully will be returned to you for more information. If your child is 5 years old or older you need to get your GP, paediatrician or class teacher to refer your child for an assessment.

<table>
<thead>
<tr>
<th>For York and Selby Area: Children’s Therapy Team, Child Development Centre, York Teaching Hospital, Wigginton Road, York, YO318HE.</th>
<th>For Scarborough Whitby Ryedale Area: SLT Dept, Beck House, 3 West Parade Rd, Scarborough, YO12 5ED.</th>
</tr>
</thead>
<tbody>
<tr>
<td>If parents require help filling in this form please advise them to call:</td>
<td>If parents require help filling in this form please advise them to call</td>
</tr>
<tr>
<td>01904 724366 (York and Selby)</td>
<td>01723 342472 (Scarborough, Whitby and Ryedale)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>DOB</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>NHS number (if known)</td>
<td></td>
</tr>
<tr>
<td>Phone number</td>
<td></td>
</tr>
<tr>
<td>GP</td>
<td></td>
</tr>
<tr>
<td>Health visitor</td>
<td></td>
</tr>
<tr>
<td>Nursery/child minder/ playgroup child attends</td>
<td></td>
</tr>
<tr>
<td>Parents’ name/s</td>
<td></td>
</tr>
<tr>
<td>Who has parental responsibility?</td>
<td></td>
</tr>
<tr>
<td>Any other professionals or agencies involved including social care?</td>
<td></td>
</tr>
</tbody>
</table>
Or by anyone else using the INTEGRATED CHILDREN’S THERAPY TEAM REFERRAL FORM

Inside, you will find the AHP integrated form has a common first 2 pages, then ‘Additional information’ referral sheets for each AHP.

See ‘Requests for SLT assessment’ sheet for referrals for assessment from professionals.
Request for SLT involvement at Specialist level

Quick reference:

Referral guide to York Teaching Hospitals

Children’s Therapy Services:

This explains ‘When to refer to SLT and when to watch and wait’ (when universal and targeted levels are in place), for all areas of SLCN from 0-18 months up to 6-7 years.
New route into Specialist level for under fives

Drop ins

Speech and Language Therapy (S&LT) services for children under 5 in North Yorkshire and City of York have, in recent years, moved to a drop-in model rather than taking referrals.

This meant that parents can attend any clinic at a time and venue convenient for them (they are often in Children’s Centres) and receive advice from an S&LT.

Referrals for children at school age are managed in a variety of ways across the different localities, with the majority of referrals coming from schools.

Why this has changed

Within the last year, York, Scarborough, Whitby and Ryedale S&LT team have reviewed their provision, in the light of the findings in the Better Communication report that there was some level of over identification of SLCN in York (the “worried well”), alongside some issues with persuading other families to go along to a drop in session where they did not know what to expect. The team also had some safeguarding concerns where health visitors did not know if families had attended clinics, as the therapists did not know to expect them.

Some clinics were also oversubscribed, e.g. 25 children in 2 hours) and families were therefore either receiving too short a session with the therapist or being turned away.
Challenges and benefits

• They have therefore now moved to a referral system, with all referrals being triaged on receipt. Complex cases no longer attend drop ins which were unsuitable for their needs, and are directed straight to specialist therapists (e.g. for selective mutism or hearing impairment).

• Standard referrals attend assessment clinics, which are held on a locality basis as before. As the families have set appointments they have longer with the therapist and if they do not attend the referrer is informed. Those requiring follow up intervention are seen 4 weeks later; there is no hidden waiting list for therapy. Therapy is delivered as per their agreed clinical pathways, which have all been reviewed in 2016 based on current evidence based practice. The number of assessment slots booked is based on attendance at drop ins over the last year, and at least the same number of referrals has been planned for.

• In order to address the needs of hard to reach families the team will also be offering monthly specialist clinics in Children’s Centres, specifically for families with multiple needs, so attendance can be facilitated by the Prevention team. This will begin in early 2017.