



# TELEHEALTH SERVICE DELIVERY GUIDE: ESTABLISHING A DYSPHAGIA TELEHEALTH SERVICE BASED ON THE EXPERIENCE AND EXPERTISE FROM TELESWALLOWING LTD

## CONSULTATION WITH SENIOR DECISION MAKERS

The successful implementation of telehealth requires the co-operation and co-ordination of different NHS departments such as IT and Speech and Language Therapy and care home staff and management. This can only be achieved where there is senior management commitment to the successful implementation of telehealth.

Teleswallowing® evidenced a threefold increase in staff productivity. The training provided when telehealth is implemented may be the conduit to the wider adoption of telemedicine by other professional groups with its associated time and cost efficiencies.

## KEY PATIENT BENEFITS

Telehealth reduces the delay between referral and assessment and can positively impact;

- Reduction in health deterioration may subsequently help avoid hospital admission.
- Reducing discomfort, anxiety and distress caused by choking and coughing on oral intake of an appropriate consistency.
- Reduces the time patients are left 'nil by mouth'.
- Reduces the number of people needing to attend an out-patient clinic during Covid-19.
- Allows people to remain in familiar surroundings which are more convenient and less stressful.
- The "hands on" element of the assessment is performed by a familiar member of the care home staff which residents report is less stressful.

## PATIENT IMPACT

- During the testing phase of Teleswallowing® the adoption sites reported no loss of rapport between patient and Speech and Language Therapist and no reduction in diagnostic accuracy.
- Reportedly, two years following the initial cohort of nursing homes using Teleswallowing®, no-one has been admitted to hospital with swallowing difficulties from these homes. This may be due to the rapid response and subsequent reduction the risk of health deterioration due to dehydration, malnutrition and aspiration pneumonia.

## KEY SERVICE BENEFITS & IMPACT

Telehealth dysphagia training & involvement in assessments can;

- Improve time and cost efficiency without reduction in quality of service.
- Alleviate pressure on over-stretched services and reduce waiting times with no loss of quality.
- Avoid delays between referral and assessment, prevent deterioration of health & reduce hospital admissions.
- Increase care home staff awareness of dysphagia before residents' health deteriorates & enabling staff to be more skilled at managing swallowing difficulties.
- Reduce the number of inappropriate referrals.
- Reduce reliance on expensive agency staff.

## ROLE OF THE SERVICE MANAGER & SLT TELEHEALTH TEAM

### Responsibilities may include to:

- Work with the key stakeholders to share ownership of any telehealth initiative and ensure competency, confidence & commitment of all concerned.
- Produce the telehealth Standard Operating Procedure (SOP) & develop a risk assessment.
- Prepare an emergency management and troubleshooting guide
- Authorise other key service documentation (eg referral forms, certification, local information leaflets).
- Contributing to development of the SOP, Risk Assessment and key service documentation.
- Develop a database of assessment data, IT connectivity & acceptability.
- Developing & training Telehealth Dysphagia Partners assisting with the IT system & clinical assessment.
- Support certification & maintenance of competencies for Telehealth Dysphagia Partners.

## ROLE OF THE TELEHEALTH DYSPHAGIA PRACTITIONER

### Responsibilities of the therapist may include;

- Introductions and confirmation of consent.
- Case history taking.
- Undertake a swallowing assessment and record observations on a proforma whilst assisting the Telehealth Dysphagia Partner to gather and record data during the assessment.
- Instruct on camera angles to facilitate observation.
- Assess oromotor, oral hygiene and dentition.
- Conduct swallow trials.
- Direct interventions (compensatory postures, strategies and manoeuvres, swallowing strategies, modified consistencies)
- Explain results to the individual and the Telehealth Dysphagia Partner.
- Review (as appropriate).
- Document the assessment and intervention.
- Maintain IT data log.

## ROLE OF TELEHEALTH DYSPHAGIA PARTNERS

Telehealth Dysphagia Partners must have dysphagia training commensurate with their role to ensure competency

### Their responsibilities may include:

- Thorough preparation of the assessment environment & ensure a full range of thickened drinks/foods is ready and appropriate utensils are available and within easy reach.
- Checking & preparation of all IT and media equipment & report IT acceptability.
- Preparation of individual with swallowing difficulty – the person is oriented and sat in an upright position and the person's mouth is clean.
- Being prepared to receive the Practitioner's call.
- Able to summarise or provide full details of the patient's case history if not already completed previously.
- Competence to assist the Practitioner to undertake the remote assessment, monitor for any swallow function changes & record the outcomes on the telehealth proforma.
- Disseminate the results to management & others caring for the person with swallowing difficulties.

**REMOTE, RAPID, COST-EFFECTIVE IDENTIFICATION, ASSESSMENT AND MANAGEMENT OF DYSPHAGIA**