

Celebrating the impact of SLTs in people's lives

### **HUB Forum Webinar**





## **Alison Ferris**

# Welcome





#### **HUB Forum Northern Ireland Members**

**Chair of Hub Joan Skeffington Rep Independent SLTs** 

NI SLT Managers
Group
Hilary McFaul
Northern Trust

Rep for pre school Kate Crossan Western Trust

Rep for SLT assistants
Wendy McConnell
Southern Trust

**Link Representative Ciara Rafferty South Eastern Trust** 

Rep for Service leads
Board of Trustees
Rosalind Kyle
Belfast trust

Rep for School age
Alison Ferris
South Eastern Trust

Rep for Adults
Karen McBarron
Belfast Trust

Rep for Retired SLTs

Jane McConn

Edel Neeson NorthernTrust Rep for Adults
Member of PPPC
Bronagh McAuley
Northern Trust

Rep for HEI/Research
Dr Lynda Kennedy
Ulster University

Newly Qualified SLT Tina Melon NorthernTrust

UU Student Reps
Caoimhe McCormick
Claire Hawthorn
Clara Oliveira
Jacob Sheerin



### Jenny Keane - CAHPO

(Chief Allied Health Profession Officer)
Department of Health



### Ruth Sedgewick Head of NI Office

# Introduction and Managing Wellbeing for SLTs





# SLT & emotional wellbeing

30th Nov 2021

Ruth Sedgewick, Head of NI Office RCSLT







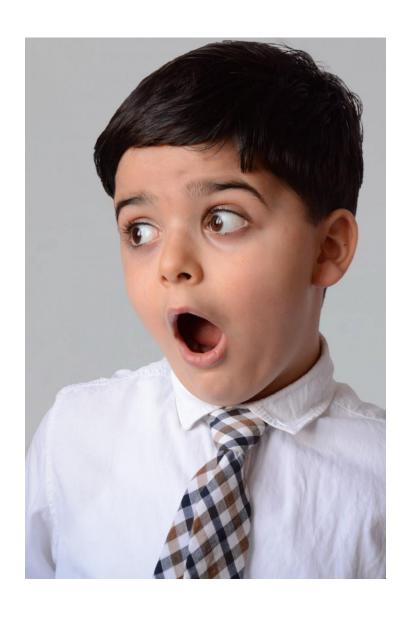














### Emotional wellbeing & SLT





### Emotional and mental wellbeing tips



#### In work -

- Set boundaries and stick to them
- Regular supervision
- Ask for peer supervision also
- Use your annual leave!
- Take your lunch break

#### At home -

- Try not to take work home
- Make time for your hobbies
- Try some mindfulness exercises or yoga
- Ask for help!



https://www.rcslt.org/learning/covid-19/health-wellbeing/#section-1



#### **Ruth Sedgewick**

**Head of NI Office RCSLT** 

email: ruth.sedgewick@rcslt.org

Tel: 02890 446386

Mobile:





## **Marion Molloy**

# Prison health The Tuck Shop Project



# Tuck List Project Hydebank Wood College

Marian Molloy SLT Healthcare in Prison



### Background

- Started post in June 2019
- High percentage of students have literacy difficulties
- During assessments, accessing the tuck list came up again and again
- Inclusive communication/Easy Read high on agenda of SLT in healthcare in Prison



### Why make the tuck list easy read?

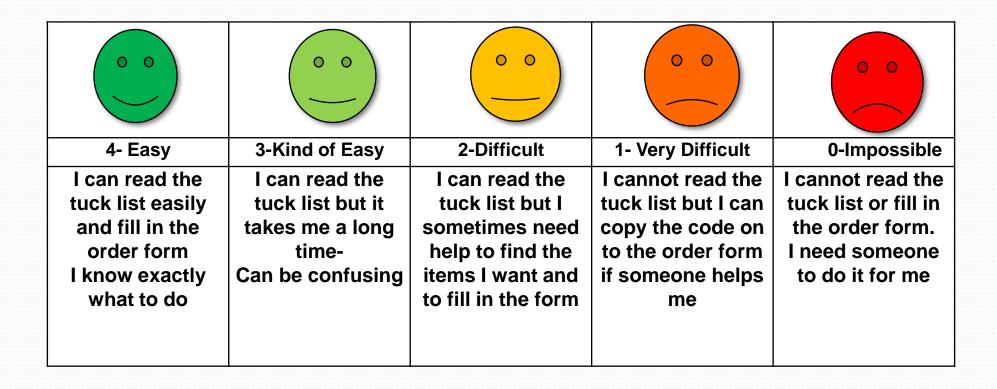
- Inclusive communication
- 5 Good Communication Standards
- Increase Independence/Agency/Choice
- Improved health and well being
- Reduce opportunities for manipulation
- Reduce errors in orders and therefore...
- Reduce aggressive/challenging outbursts
- Opportunity for Co-production



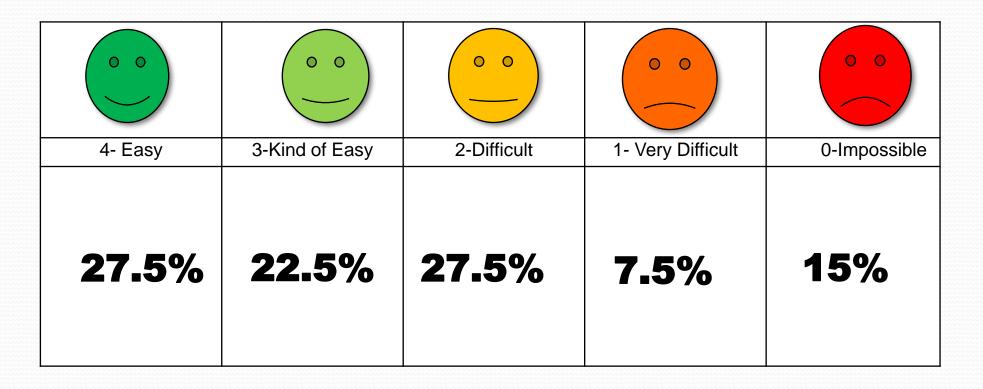
### Why continued......

Items	Code	Price in £	* Items	Code	Price in £ *
Greeting Card Small	997	1.00	Nissin Inst. Noodles - Satay	924	0.46
Greeting Cards Large	821	1.90	Nutella Sachets	3070	0.13
Greeting Cards Medium	820	1.50	Oats So Simple Golden Syrup	941	2.49
Groceries			Pasta & Sauce- Cheese, Leek, Ham	813	0.84
			Pasta & Sauce- Chicken & Mush	142	0.84
Items	Code	Price in £	* Pasta & Sauce- Tomato & Herb	143	0.84
Angel Delight - Butterscotch	4078	0.66	Pasta Twists - Heritage	963	0.86
Angel Delight - Strawberry	101	0.54	Peach Halves - Silver Leaf	881	0.79
Baked Beans & Sausages 420gms	102	1.15	Peanut Butter (Crunchy)	984	2.10
Baked Beans (Large)	104	0.77	Pears - Lustre	882	0.74
Bbq Sauce	5044	1.69	Peas - Tin	197	0.45
Bisto Gravy Granules	842	1.40	Pineapple Slices	879	0.88
Blue Dragon Chilli Squeezy	2078	1.91	Porridge Oats	148	1.85
Branflakes	106	2.63	Porridge Oaty Apple & Cinn.	3094	1.53
Brown Sauce	158	2.39	Pot Noodle - Chicken & M'Room	149	1.01
Canderel Sweetner Sachets	959	0.01	Pot Noodle - Curry	801	1.01
Cheerios - Cereal	944	2.31	Ravioli	153	0.97
Cheese - Slices (Real Cheese)	935	1.30	Rice Express, Golden Vegetable	827	2.10
Cheese - Dairylea Spread	3024	1.44	Rice Express, Mexican	3052	2.10
Chopped Ham With Pork	110	1.03	Rice Express, Thai Sweet Chilli	3095	2.10
Coco Pops	5147	2.31	Rice Pudding	154	1.00
Coffee 1 Cup Sachet	116	0.07	Sardines - Tomato	157	1.01
Coffee 1 Cup Sachet - Decaffe	115	0.06	Savoury Rice - Beef	159	0.73
Coffee 150g Refill Nescafe	3072	4.06	Shreddies Nestle	4057	1.78
Coffee 50q	112	1.84	Soup - Big Chicken & Veg	199	1.12
Coffee Kenco Rich Refill 150g	3033	4.59	Soup - Chicken Batchelors	164	0.82
Coffee Nescafe Cappuccino Box	826	2.29	Soup - Tomato (Heinz)	167	1.08
Coffee Nescafe Latte Box	817	2.09	Spaghetti Heinz 400g	173	0.80
Cooked Ham - Princes	876	1.00	Stir-In-Sauce Bacon & Tomato	122	1.51
Cuppa Soup Chicken (4 Pack)	810	1.08	Stir-In-Sauce Sweet Pepper	3046	1.76
Cuppa Soup Golden Veg (4 Pack)	809	1.08	Strawberry Jam Portion	825	0.11
Custard Tin	120	0.89	Sugar	175	0.72
Drinking Chocolate	124	1.68	Super Noodles - Mild Curry	181	0.72
Fruit Cocktail- Silver Leaf	883	0.87	Super Noodles-Barbecue	178	0.71
Honey - Squeezy	128	1.74	Super Noodles-Barbecue Super Noodles-Chicken	180	0.71
Hot Dogs - American (Tin)	946	1.74	Sweetcorn	182	0.71
Jam - Raspberry Squeezy	5008	1.52	Tea Bags 40s	183	1.24
Jam - Raspberry Squeezy Jam Strawberry Squeezy	2097	1.52	Tilda Steamed Brown Rice	3065	1.24
	131	2.64	Tinned Tomatoes	185	0.91
Kelloggs - Fruit & Fibre	2092	2.57			1.29
Kelloggs Crunchy Nut Cornflake L/Gross Carbonara Pasta Sauce		2.57 1.09	Tomato Ketchup (Heinz)	822	
	1172		Tuna In Brine : Princes	844	1.56
Marmalade Portions - Duerrs	958	0.05	Tuna In Oil :John West	190	1.97
Mayonaise Sweet Chilli	981 3098	1.69	Twinnings Mixed Berry	841 840	2.28
Mayonnaise Garlic		1.69	Twinnings Pure Green Tea		2.06
Mavonnaise Squeezv 430ml	862	2.26	Weetabix 12pk	5009	1.62

# Difficulty Rating Scale: 25% of Men and 25% of Women- Total 40



# Difficulty Rating Scale: Results 25% of Men and 25% of Women



I find it difficult to read and find it very boring

Pictures
would make
it easier

I just keep the receipt and order the same again- I got the wrong stuff once

Make the writing a bit bigger- space it out more

If things were laid out better & grouped together it would be easier

Have ordered things and something else comes- could be better

> I'm dyslexicdisappointed when it comes and haven't got what I ordered

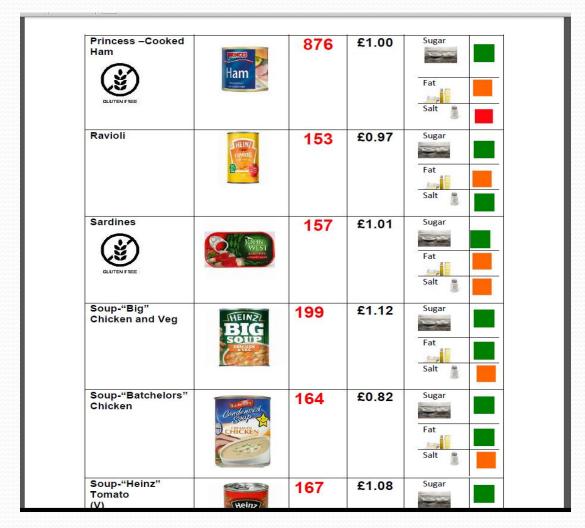
Marian Molloy SLT Healthcare in Prison

I just order the same stuffcause that's what I like and I can't be bothered going back to it. I've had to help people with it

Have put the wrong code down- pictures would be better- see what you're getting- didn't know there was pickled onion space raiders!



### Sample



#### **Outcomes**

- Staff recognising when someone needs assistance & requesting a copy for individuals
- Prison staff asking advice on making other documents easy read
- Increased awareness of SLCN/LD/Literacy difficulties
- Joint working NIPS/Health and residents

#### **Challenges**

- Missing copies
- Staff not making it available
- High turn over of people on remand
- Stigma
- Changes to stock and prices



### **Going Forward**

- Ensure hard copies available on each landing
- Match the pictures to the actual stock
- Tuck Mate- staff and students
- Potential for linking to ICT qualification- updating list, monitoring usage etc.
- Link with regional NIPS project to have prison tuck online
- Review usage of Easy Read version- Landing staff and students redo rating scale
- Link with tuck to map changes to ordering- healthier foods, a wider range of foods
- Provide Inclusive Communication/Easy Read Training to staff





## **Marion Molloy**

**Speech and Language Therapist Reg MRCSLT** 

**Lead Speech and Language Therapist- Healthcare in Prison** 

Hydebank Wood college, 110 Hospital Rd, Belfast, BT8 8NA

Base 028 90494353 / 028 90253839

Email: marian.molloy@setrust.hscni.net



### **Ruth Millar and Marialava Alves**

Dungannon & Coalisland
SureStart team
Speaking Tetun at Home Campaign



# Speaking Tetun at Home Campaign





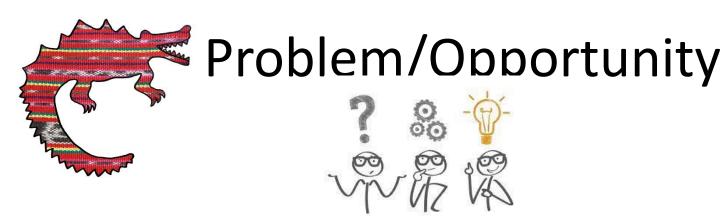
### Background

- East Timor (Timor Leste) is an island in Indonesia.
- Portuguese colony. Conflict between 1975 –1999 resulted in 102,000 deaths. Independence in 2002.
- 20% of the **population** is unemployed, and 52.9% live on less than \$1.25 a day.



### **Local Context**

- Community started to arrive in N. Ireland at the start of millennium with many of first migrants setting in Dungannon area.
- Over 40% of the total number of newcomer pupils are enrolled in Education Authority southern region.
- St Patricks PS Dungannon has the highest % of EAL pupils in N Ireland.
- Relatively High levels of illiteracy among East Timorese Population.
- Multiple dialects of Tetun spoken.



- Local Nursery school teacher reporting that children from the East Timorese community starting NS with little or no home language. Going on to become fluent English speakers.
- Trend also replicated within Developmental Programmes for 2 3 Year Old settings. Sure
   Start staff observed parents speaking to children in English rather than their own language.
- We concluded that children from East Timorese Community at risk of loss of their native language within a generation



# Implications for parents and children not maintaining home language and dialects

- Risk of losing home language & link with home culture.
- Evidence shows that bilingualism in a child, young person or adult has linguistic, social and possible cognitive advantages.
- Bilingualism promotes the ability to develop and maintain relationships with family and community.
- Secure sense of self identity can contribute to the individuals wellbeing.





### The Solution

(so far ....)

- The launch of the Speak Tetun Campaign 2019
- Sure Start Speech & Language Therapist / East Timorese Family Support Worker.
- Workshop for all Sure Start staff around the importance of Bilingualism.
- Twilight workshop for professional colleagues (Health Visitors, Social Workers, Nursery Teachers)

### The Solution

(so far ....)

 Creation of a Speak Tetun Group (Haburas Tetun). Encourage speaking Tetun at all groups.

Advice leaflet in Tetun for parents.

Baseline questionnaires sent to all our East Timorese families.

Video produced. <u>IMG\_2317(1).MOV</u>



### **Sure Start Groups**

- Ante natal groups Ante natal clinic
- Tempo Ho Kangeroo.
- Brincadera.
- Tetun Rhyme time.
- The Video.







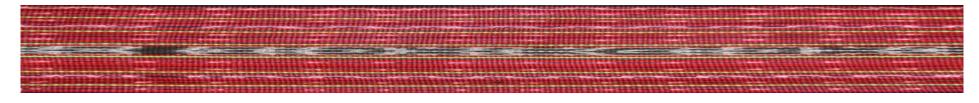
### Questionnaire key findings

• Feedback from 130 children – 71 % born in N I.

Asked questions about older siblings as well as children of Sure Start age.

 Very important to speak English but not as important to speak their native dialect/language.

 A significant number of parents didn't think it possible to learn both languages.



### Next steps

- Continue sharing message promoting Bilingualism with parents, Sure Start staff and professional colleagues through video, training & promotional material.
- Establish peer groups of East Timorese parents to inform other parents about retaining native language.
- Recruit and retain staff who speak Tetun.
- Due to the lack of books in Tetun produce our own story book for families.
- Advocate for more resources in Tetun (e.g. Talk To Your Baby

   National Literacy Trust).











Quality Care - for you, with you

## Ruth Millar and Marialva Alves

Ruth Millar – Project Speech and Language Therapist

Marialava Alves – Bilingual Family Support Worker

Dungannon & Coalisland SureStart

Tel: 028 8772 9695

Email: ruth.Doherty@southerntrust.hscni.net

Email: marialava.alves@southerntrst.hscni.net



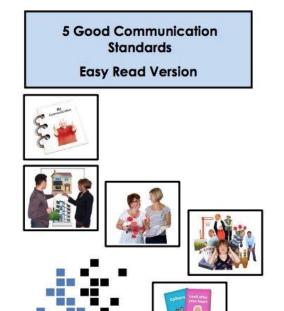


# Joanne Matthews

# 5 Good Communication Standards



# 5 Good Communication Standards Project



SET Audit award winners 2020



## **Background to Project**

Trends within ALD services indicated that

- referrals were mainly for dysphagia
- Reduced number of communication referrals
- Communication not seen as a priority
- Lack of awareness of 5 Good Communication Standards in Day centres/supported living





## **Aims of the Project**

 To raise awareness of and implement the RCSLT 5 Good Communication Standards

 To train and equip staff in communication and the RCSLT 5 Good communication standards





## **Getting started**

- Partnership between ALD Speech and Language Therapists and Day Centre staff
- One room was selected for input in 2 day centres across parts of South Eastern Trust :-
- Mountview ARC, Downpatrick
- Lisburn ARC, Lisburn







### What did we do?

RCSLT

 Pre and post intervention audit completed using the RCSLT 5 Good Communication Standards to help achieve inclusive communication Audit

Red	No, Not started working on this, not meeting the standard evidence
Amber	Partially working toward meeting the standard
Green	Yes, fully meeting the standard

 Pre and post intervention questionnaires reflecting staff confidence and satisfaction.





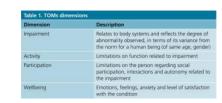
- Communication assessments and quick reference profiles "How Best to Support My Communication" were completed
- Individual and group therapy was provided.
- Communication training for staff delivered.
- Therapy Outcome measures (TOMS) were administered pre and post interventions.















# **Training others**

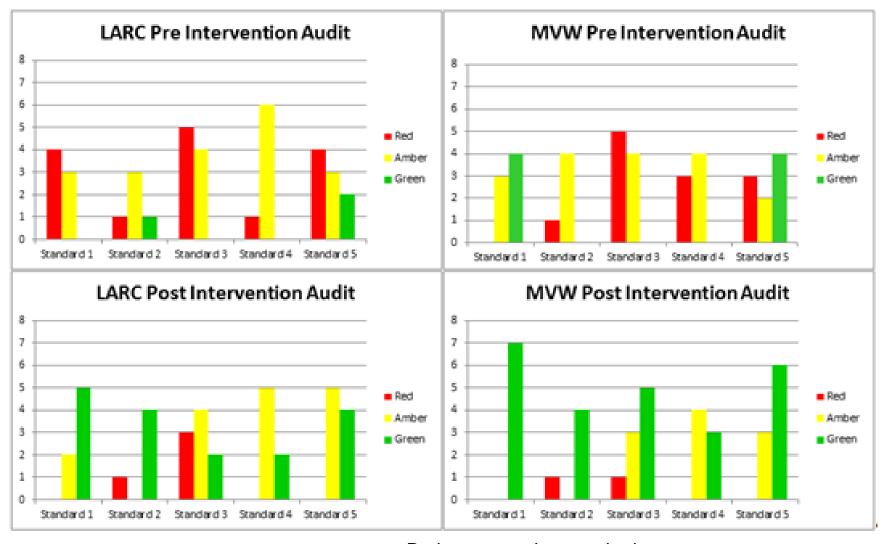
 Training in 5GCS delivered to the Regional Quality Improvement Authority (RQIA) as a benchmark for future inspections.







### How well did we do?





Red = not meeting standard Orange/yellow = partially meeting standard Green = fully meeting standard



### **Communication referrals**

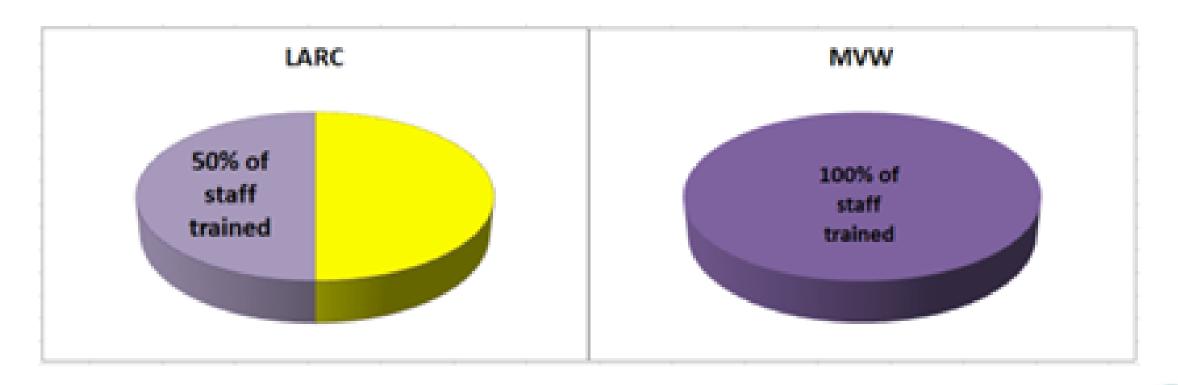
80%

Increase in communication referrals specifically related to 5GCS





# **Staff training**

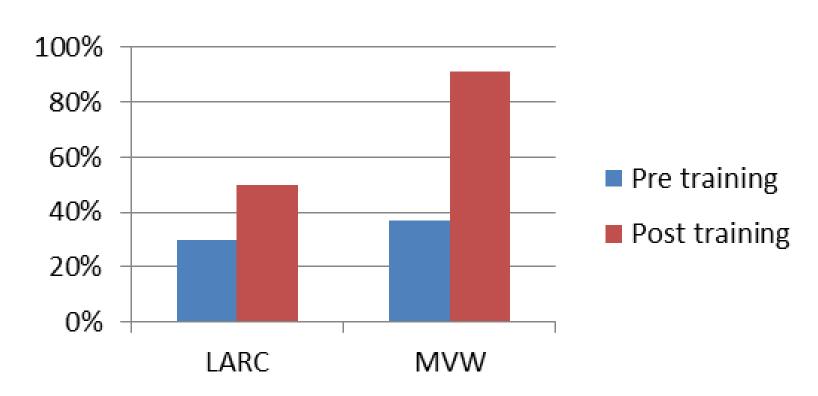






## Was anyone better off?

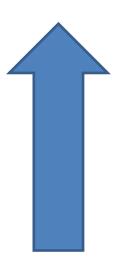
### **Staff Confidence Levels**







# Service user and staff well being



53% Increase in patient and staff well-being post intervention





# **Benefits of training**

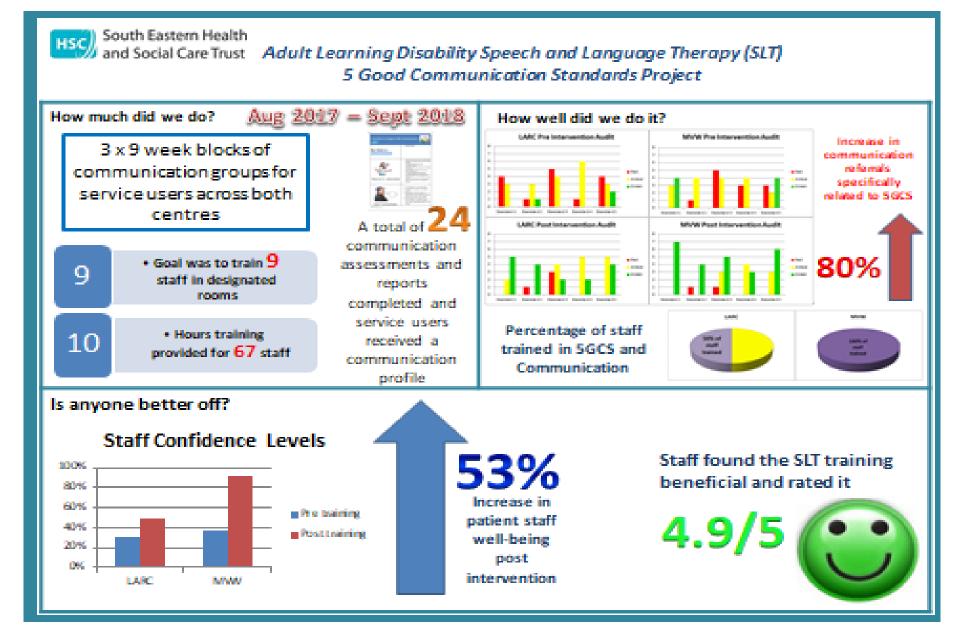
Staff found the SLT training beneficial and rated it

4.9/5













# **Key Challenges**



- Staff shortages
- Unable to maintain key staff in room
- High proportion of bank staff
- Availability of Day care Workers
- Unable to train staff on the ground
- Time to upscale and spread due to lengthy waiting lists and staff shortages/changes.



# Ideas for change

- Need for consistent staff
- Inclusive communication to be included in mandatory work force development
- RQIA now ask for evidence of the 5 Good Communication Standards as part of their Inspections.
- Plan to upscale and spread
- Future PPI project







# Joanne Matthews

**Speech and Language Therapist** 

**Intensive Support Services** 

Thompson House, 19-21 Magheralave Road, Lisburn, BT28 3BP

02892 633190/07525897899

Email: joanne.matthews@setrust.hscni.net



# **Alex McNeill and Erin Stewart**

# Tele-health Results of audit



# Evaluating the use of tele-health within Belfast Health and Social Care Trust Children's Community Speech and Language Therapy Service as a Response to the Covid-19 Pandemic

FLORENCE KING, ERIN STEWART & ALEXANDRA MCNEILL
BELFAST HEALTH AND SOCIAL CARE TRUST, CHILDREN'S COMMUNITY SLT



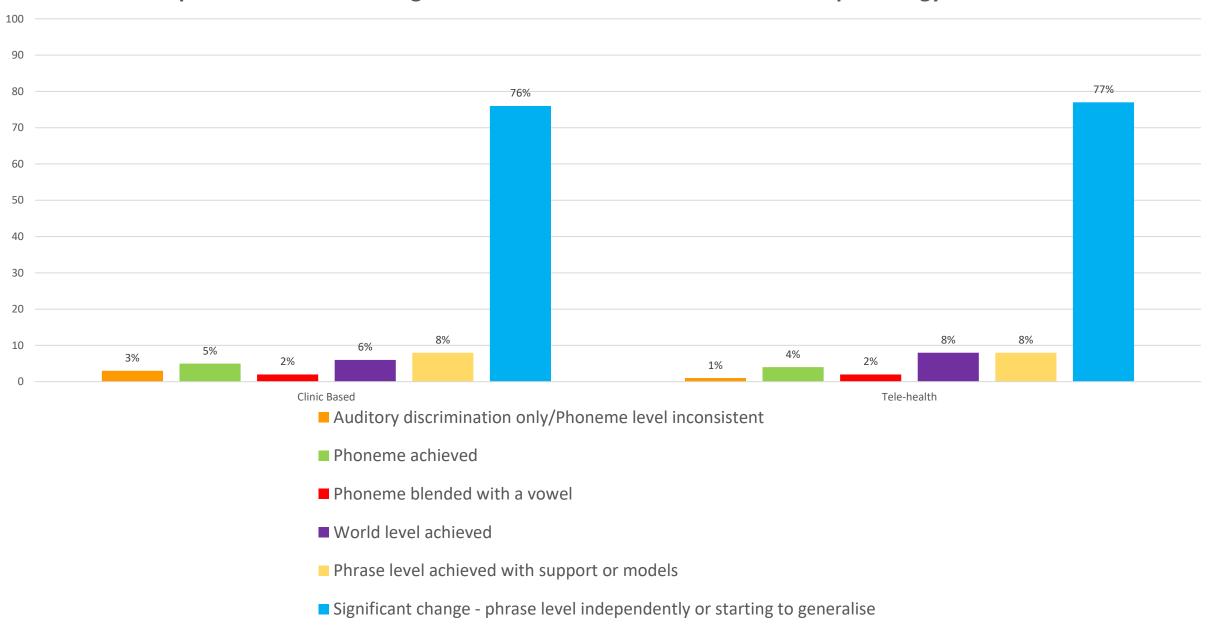
### Aim 1

Evaluate the outcomes of tele-health within Children's Community SLT Services in line with Key Performance Indicators (KPIs): (A) clinical outcomes and (B) attendance

- ▶ Clinical outcomes Case file review in March 2021 to review outcomes of any previous clinic based or tele-health SLT input and level of change achieved. 170 children received tele-health input for phonology targets. Target sounds were achieved to the following levels:
  - 77% to phrase level independently
  - ▶ 8% to phrase level with support
  - 8% to word level
  - 2% blended with a vowel
  - ▶ 4% at phoneme level
  - ▶ 1% auditory discrimination only
- ▶ Attendance Attendance rates for clinic based intervention in 2019-2020 were compared with those for tele-health intervention in 2020-2021.
  - ▶ 5% improvement in attendance during tele-health delivery



#### Comparison of level of change achieved in clinic based and tele-health phonology intervention

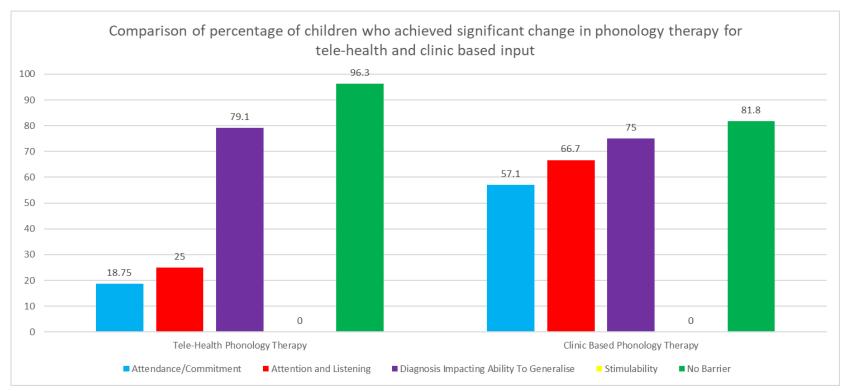


### Aim 2

Outline the main barriers which may affect outcomes in SLT and compare the impact of these on clinic based and tele-health interventions

### **Barriers Identified**

- Attention and listening difficulties
- Attendance issues or limited commitment to therapy
- Target sound not being stimulable
- A diagnosis which affects ability to generalise target sounds (for example, learning difficulties or ASD)





### Aim 3

Evaluate the views of parents/carers, service users and clinicians on the use of tele-health to deliver SLT

We have been able to provide a service and support to families during unprecedented times

It was great not having to travel to the health centre

It could be more challenging to hold the attention of some children

Dependent on good quality internet connection

Effective therapy which my daughter has really benefitted from



### Conclusions

- ▶ The use of tele-health has allowed our service to continue throughout the pandemic with no compromise on clinical outcomes.
- Since starting to use tele-health as a method of service delivery, clinicians have developed confidence in the area.
- Clinicians should carefully consider appropriateness for tele-health on a case-by-case basis.
- Limitations of tele-health should be considered.
- ▶ Tele-health has been a viable method of service delivery throughout the pandemic and should be considered further in the future.



## **Alex McNeill and Erin Stewart**

Alex McNeill – Speech and Language Therapist Carlisle Wellbeing and Treatment Centre Email: <u>Alexandra.mcneill@belfasttrust.hscni.net</u>

Erin Stewart – Speech and Language Therapist The Arches Wellbeing and Treatment Centre Email: Erin.stewart@belfasttrust.hscni.net





# **Amy Rooney**

# Speech and Language Therapy & Covid 19

# Celebrating SLT and Nightingale at Whiteabbey Hospital





# Whiteabbey Nightingale Hospital

- Established November 2020
- Regional unit, 14 day admission
- Nursing and AHP led, 7 day service
- Well funded for SLT; Band 7, Band 6, Band 4 SLTa
- Increased frequency of SLT inpatient reviews; seen daily as much as possible















# Patient Journey

- Mr O
- Admitted to BCH November 2020
  - Intubated Nov 2020
  - Trache inserted Nov 2020
  - Decannulated Jan 2021 & d/c to ward from ICU
  - Severe oro-pharyngeal dysphagia Jan 2021
- Transferred to Whiteabbey Nightingale Feb 2021















# **Patient Journey**

- Transferred to Whiteabbey Nightingale Feb 2021
  - Intensive SLT input (9/12 days seen, 14 SLT contacts total)
  - Mild dysphonia vocal hygiene advice, breathing exercises, overall improvement in volume and strength
  - Resolved dysphagia, oral stage impacted only by dentition
  - Final recs = Level 7 easy to chew and Level 0 thin













# Patient Journey

- ICU follow up clinic presentation, seen April 2021
  - Communication no concerns regarding dysphonia/current voice function. Voice WNL for age.
  - Swallow no swallow issues or trouble getting food down, remains on same SLT recs, generally reduced appetite, no weight loss















### Outcome measures

- 49% of Covid patients received SLT input for communication and/or swallowing
- 51% treatment complete at end of 14 days
- Therapy outcome measures (TOMS) introduced
- TOMS helped to see change pre and post therapy







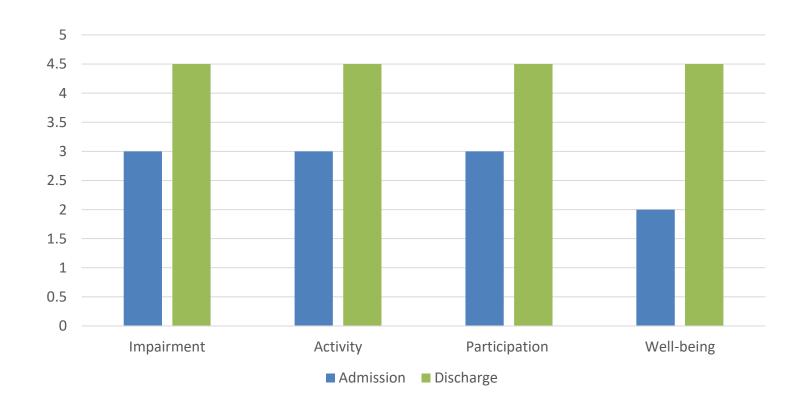








### Mr O's outcomes









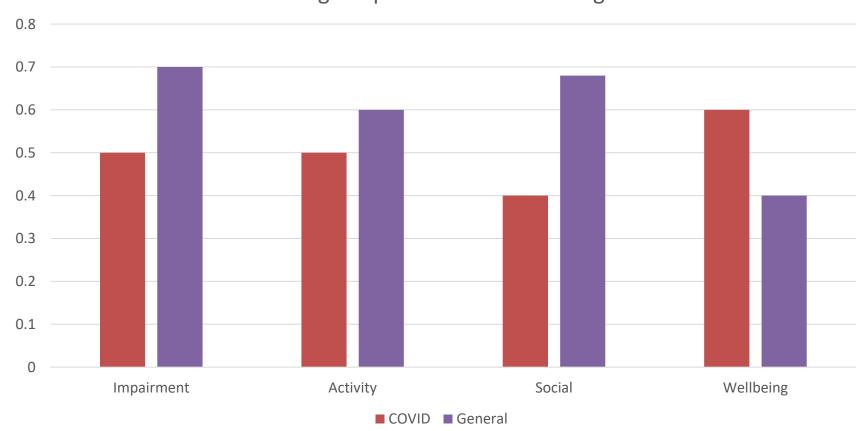






### **Outcomes for COVID and General Rehab**

Average improvement on discharge















### Nightingale moving forward

- Currently general rehab and fractures
- Funding extended until March 2022
- Currently part time band 7 SLT, band 6 SLT and SLTa
- At the time of the power point there were 24 patients on the ward















# **Amy Rooney**

**Speech and Language Therapist** 

amy.rooney@northerntrust.hscni.net

Telephone: 02890552255



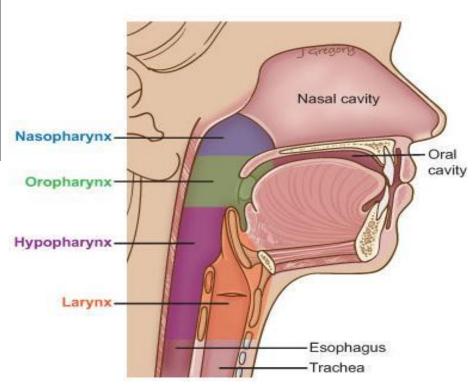
# **David Curtin**

# Impact of SLT Pre-habilitation programme for cancer patients









# Head & Neck Radiotherapy Prehabilitation Initiative

A Multi-disciplinary Macmillan Team Partnership North West Cancer Centre, Derry~Londonderry

30/11/2021

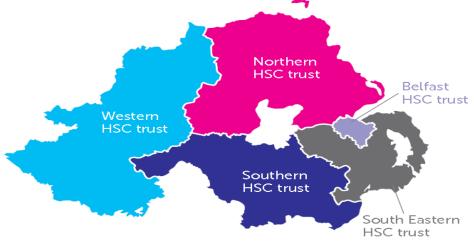


### Who & Where We Are:



Malcolm Wilkinson (Radiotherapy Radiographer)
Ciara McSherry (Macmillan Dietitian)
David Curtin (Macmillan Speech and Language Therapist)
Angela McKeever (Macmillan Head and Neck CNS)







### Head and Neck Radiotherapy Prehabilitation (Prehab)

• 'Prehabilitation enables people to prepare for treatment; promoting healthy behaviours and needs based prescribing' (Macmillan, 2019)

• I'm excited to take you on a journey to show you how we designed and implemented a head and neck (H&N) prehabilitation model of care, the first of its kind in Northern Ireland



• Working in partnership with patients and colleagues we improved patient experience before, during and after treatment

### 'It felt like jumping from a plane without a parachute'

Ask yourself... 'Have you ever done something new that you were not prepared for?'



Jim and others (n=21) wanted to give us some feedback on how they felt before starting treatment





'I would have liked help...'

'Felt Guilty'

'wanted help...didn't







'No idea





### Our Collective Aim & Shared Vision



The Key Pillars of Prehabilitation

Effective use of resources

'Ownership of their cancer story; personal control, reduced anxiety & vulnerability'

Personalised
Prehabilitation
Care Plans

Personal empowerment & enhances quality of life

Structured Interventions

Promotes physical and psychological resilience & behaviour change

# Kathy's Story: aged 52, a teacher and mum of three, has tongue cancer



### Kathy's Personalised Prehabilitation Care Plan



- 1. Already losing weight: swallow assessed, risk of aspiration/choking: SLT/Dietetic regime implemented
- 2. Radiotherapy (RT) machine anxiety: visit arranged to RT suite following video, referral to counselling; avoided medication

### **Targeted**

Mouth and swallowing exercises demonstrated and daily routine advised

### Universal

**Interventions** 

1. Side effects leaflet provided, advised to selfmonitor for worsening or 'unusual' symptoms, emphasis to report issues early, don't ignore!

### Prehab Extended Outcomes: 'A Rippling Effect!'

(Total no. prehab patients= 10)

Self-Reporting of deterioration (30%)- led to early and prompt assessment & management = Admission Avoidance

Eager and empowered to self-manage acute symptoms at home (2/2 patients), reducing inpatient length of stay

2/4 (50%) of patients agreed to attend smoking cessation service as a consequence of prehab and stopped smoking before radiotherapy: far reaching positive effects to patient & society/public health

treatment (average 60%)

0/10 patients called the

out of hours helpline

during or after

40% of patients were referred on to psychological therapies, 0% of prehab group required anxiety medication prescriptions during treatment (avg. 35%)

Clinician prioritisation: prehab reduced the number of sessions patients needed during treatment (average 2 sessions less)- time and resource saving!

Two patients <u>referred</u>
on for Physio and
Occupational therapy
before treatment

- **Clear benefits to health system:**
- Patient personalised care plans (on par with national guidance)
- Empowered patients, selfmanagement, quality of life
- Less clinician contact needed
- Early support
- Admission avoidance
- Shorter length of stay
- Reduce reliance on medication

'I understood what everyone's role with me would be and the leaflet broke down the side effects week by week, so there were no surprises or shocks'

'I've stopped smoking after 40 years, never thought I could do it- thank you!'

'I think if I hadn't spoken to the counsellor after the CNS referred me, I would have pulled out of the treatment altogether!'

'My swallowing problem was assessed fast, and the SLT/Dietetic advice helped me to eat better and stop worrying'

'My wife and I stuck the leaflet on the fridge and looked at it when I was experiencing a new side effect, seeing it was a normal reaction to radiotherapy stopped us from panicking and calling the out of hours helpline'

'I started my mouth and swallowing exercises straight away, I then had some more questions about these before the treatment began and having someone to contact was really reassuring'

'The radiotherapy
video showed me
what was going to
happen and so it
took the fear away, it
also helped me to
explain it to my wife
afterwards'

'Prehab was like a revelation-I really felt like I was walking a mile in the patients' shoes'

'Reading the feedback was humbling, emotional; hearing the difference we made to quality of life'

'I was delighted to see the **outcomes so quickly** and also the wider, positive impact on the health system too'

'Early screening expedited management- I was really surprised how many were already having problems'

'Early psychological supportwe've **built new relationships** with the counselling team'

# Prehab Milestones & Clinician Reflections



'Leadership development, meeting deadlines, facing and overcoming challenges (difficult conversations, I.T., room, clinician availability/flexibility)'

'Challenging negative patient beliefs; managing expectations, difficult conversations (team debriefing after session helpful)'

'Using 'Model for Improvement' to guide and measure change: I felt challenged, but in a good way'

'Balancing Measures! It was really valuable to collect information about what we were deprioritising to do the prehab session: helped us demonstrate the unmet staffing/resource need'

'Creation of the leaflet and radiotherapy video made me feel really proud, it felt so new and ground-breaking. Seeing its positive impact was the icing on the cake'

#### **Spreading the word:**

- NI Cancer Network Group
- Prehab Bid: Cancer Recovery Plan NI, 2021-2023
- Goal to showcase our prehab model UK wide

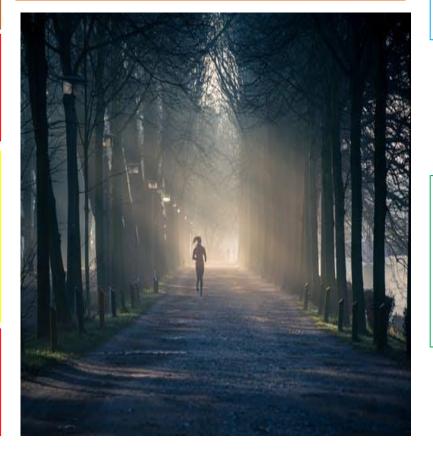
Trust Quality Improvement
Showcase Event: **CEO feedback** 

Participate in **Service Transformation**, Commissioning & Workforce Planning

Contribute to strategy and prehab policy design locally and nationally 'Cancer Strategy for Northern Ireland 2021-2031'

**Presentation** at RCSLT event: 'Celebrating the impact of SLTs in people's lives' webinar

Where do we go from here?
Like Kathy, we're ready for the Marathon!



#### 'Holding the Gains!'

Working to integrate prehab into existing service delivery ('Invest to Save/ we add value!'): Innovative ways to deliver prehab (COVID-19): Video!

Streamlining weekly **H&N MDT meeting** to include Prehab discussion

**Role models**: H&N Surgical Prehab pilot locally, inspiring other H&N projects throughout Northern Ireland

Advocacy, teaching and support for new prehab projects at the NWCC Quality
Assurance,
Formal research
and publication
of findings

**Abstract & Poster Presentation**: Irish H&N Cancer Conference 2021

### **David Curtin**

**Macmillan Speech and Language Therapist** 

**Clinical Lead Oncology** 

North West Cancer Centre, Altnagelvin Hospital

(028) 71611169 or Ext: 216 292

Mob: 07774837486





# Shannon Johnson, Lisa Kelly and Alison Ferris

# SEN – interview SLTs starting a new post during Covid



# Paula Hasson

# Supporting complex babies to develop oral feeding skills - parent experience











# SLT makes a difference to children's lives

Helping support a medically complex child to develop oral feeding skills.

Paula Hasson- Clinical Lead SLT NHSCT















### **Background**

- Referred to local SLT by SLT in RBHSC on 16.10.2020
- Complex congenital heart disease: VSD's repaired on 01.10.2021 in Crumlin
- Fully NG tube fed difficulty establishing volume for oral feeding
- History of Reflux and regular vomiting episodes
- Slow to gain weight
- Concerns re: swallow safety, oral-pharyngeal incoordination
- Difficulties establishing oral feeding and query aversion to oral feeding.









#### What do we know?

- "Infants and children who require tube feeds because of complex needs are at a risk of developing oral hypersensitivities due to prolonged tube feeding."
   (Hawden at al 2000)
- "Consequently these children are highly likely to develop significant difficulties in learning to tolerate eating orally. This may have an impact on the child's social and emotional development."

(Harding C, Faiman A and Wright J 2010. International Journal of evidence based Health care.)









#### What did we do?

- Linked with SLT in RBHSC
- Follow up phone call and F2F appointment with child and her Mother
- Advised on;
- Positive oral experiences with finger massage, using child's own fingers, toys and teethers.
- Continue NNS during tube feeding and water sips.
- Messy play activities to be completed daily.
- Developing oral tastes (spoon and bottle) and monitoring swallow safety for clinical signs of aspiration.









#### What was the outcome?

- Child's Mother worked through the advice and personalised it to suit her child.
- Mother was consistent implementing all advice and worked in close collaboration with MDT including Paediatricians and Dieticians in RBHSC and locally.
- By May 2021 A's NG tube was removed and she was fully orally fed on a mixture of Bottle feeds morning and night with 3 spoon feeds per day and developing her tolerance for textures
- Her weight had improved and is now static and tracking the 9<sup>th</sup> percentile / length 25<sup>th</sup> percentile.









#### **Factors for success**

- Early introduction of oral de-sensitization and NNS whilst tube feeding by SLT in RBHSC.
- Good liaison and hand over between SLT in RBHSC and local SLT.
- Resolution of the original problem- cardiac surgery and GOR had reduced.
- Monitoring of swallow safety and signs of aspiration as feeding progressed. Swallow was safe.
- Working with MDT/Dietician to adjust feeds when oral feeding progressed to help create hunger.
- Child readiness and acceptance.
- EXCELLENT motivation, perseverance and consistency from Mother and family circle implementing and personalising advice given.





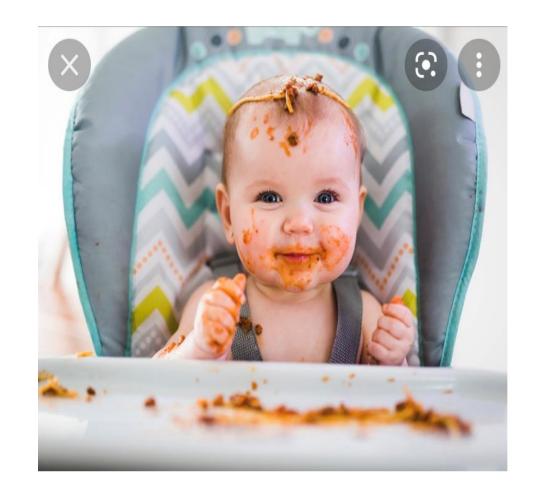




### One Parents top 5 tips to another:

• Tip 1:

Do messy play and Do it every day!











### • Tip 2:

Change Tube feeding times to after mealtimes











### • Tip 3:

Involve your child in family mealtimes





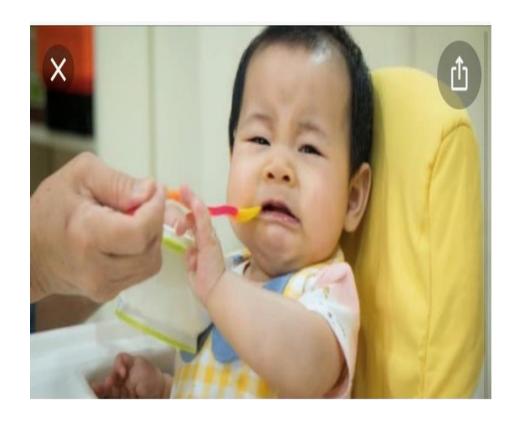






### • Tip 4:

Do not force it – if your child ever refuses, do not push it





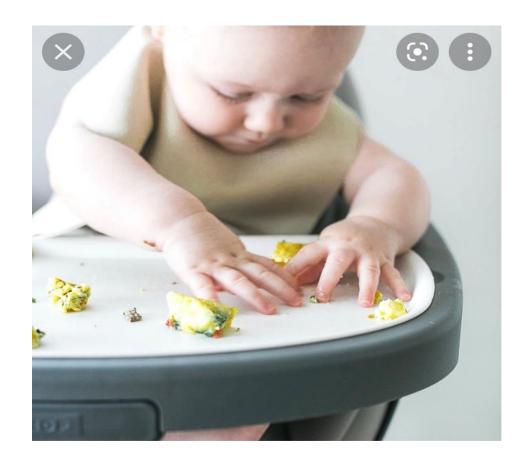






• Tip 5

Let your child lead

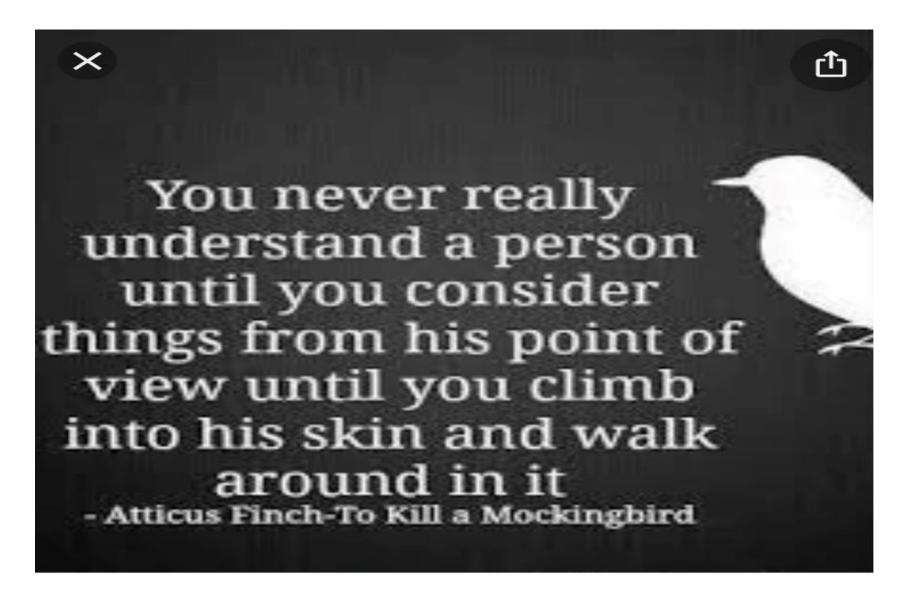












### Paula Hasson

**Clinical Lead Speech and Language Therapist** 

**Children with Disabilities Team** 

**Northern Trust** 

paula.hasson@northerntrust.hscni.net

Tel: 02827669683 / 07824326541





# Hilary McFaul

## Reflection





# Celebrating the impact of SLTs in people's lives

rcslt.org

🥰 @RCSLT

