World Journal of
Oral Health and Dentistry

World J Oral Health Dent. 2020;2(S1):A002
Conference Proceeding | Open Access

Pediatric SLT Standards Go from Black to Green Just by Creating a Tracheostomy Team

Carty B and Peck M
The Royal London Children's Hospital, London, UK

Originally Presented at UKSRG-2020 Conference held at Institute of Child Health, London, UK during February 6-7, 2020.

Abstract

Background: Historically children admitted with or for a tracheostomy to an acute tertiary hospital were not seen by an MDT and were not routinely referred to SLT. There was no recorded evidence on how this model influenced standards of care or outcomes. To reflect best practice a Pediatric Tracheostomy MDT including SLT was established in 2017.

Aim: To present comparative data on how a dedicated Pediatric Tracheostomy MDT including SLT influenced compliance with standards and outcomes.

Method: Retrospective BRAG risk rating compliance against locally devised best practice SLT standards. All children admitted for existing or new tracheostomy over 3 years to acute tertiary hospital in London included, 18 months BEFORE MDT and 18 months WITH MDT. Thematic analysis of initial and final Tracheostomy and Dysphagia Therapy Outcome Measures (TOMS) are done.

Results: BEFORE MDT=15 children; 60% non-compliant, 40% limited compliance, 0% TOMS recorded. WITH MDT=18 children; 100% full compliance, 100% TOMS. Tracheostomy themes=50% progressed to continuous cuff deflation, 39% managing secretions adequately or independently, 28% progressed to Passy-Muir speaking valve continuously. Dysphagia themes=71% commenced oral feeding, 29% had feeding tube removed and 86% actively participating in mealtimes. Of the total, 69% children initially scoring severe to moderate frequent distress presented with mild or no inappropriate distress on discharge.

Conclusion: Dedicated Pediatric Tracheostomy MDT including SLT significantly improves SLT standards through weekly ward round, routine pre and post-operative assessment and early dysphagia interventions. Therapy outcomes improved for secretion management, cuff deflation, use of speaking valves and progression to eating and drinking evidenced.

Citation: Carty B, Peck M. Pediatric SLT Standards Go from Black to Green Just by Creating a Tracheostomy Team. Proceedings of UKSRG-2020; 2020 Feb 6-7; London, UK. World J Oral Health Dent. 2020;2(S1):A002.