

A Day in the Life of a Healthcare SLP: A Journey Across Settings

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Presentation compiled by members of the MSHA SLP Healthcare Committee

Learner Objectives

- Participants will be able to name the healthcare settings.
- Participants will be able to describe the patient populations in healthcare settings.
- Participants will be able to describe the job roles and responsibilities of SLPs in the healthcare setting.
- Participants will be able to describe interview techniques for healthcare placements.



Healthcare Settings

Hospitals

- Acute care
- Long term acute care
- Subacute
- Rehabilitation
- Pediatric

Skilled Nursing Facilities


Outpatient clinics



The Acute Care Setting


(ASHA, n.d.)

- **Age Range:**
 - Adults and/or Pediatrics
 - Varies across hospital systems
- **Medical Diagnoses:**
 - Acute illness or injury requiring 24-hour medical care.
 - Examples: CVA, respiratory disease, head injury, hemorrhage/injury, CNS diseases neurological disease, infection, surgery, cancer, organ failure, psychiatric illness, childbirth
- **Common Communication and Swallowing Disorders:**
 - Dysphagia and diet recommendations (majority of caseload)
 - Motor speech,
 - Language
 - Cognition
 - Voice
- **Collaboration**
 - The multidisciplinary team includes physician, PA, NP, RN, dietician, respiratory therapy, PT, OT, Chaplain, Social Work, Case Manager, etc.
 - SLP is a small piece of a complex puzzle!
 - The role of the SLP may be more consultative because the focus is more on patient management than direct treatment.
- **Setting Characteristics**
 - Very fast-paced and constantly changing environment.
 - Average patient stay is 11 days



Long-Term Acute Care Hospitals (LTACHs)

- Specialize in the treatment of patient with serious medical conditions who require ongoing care but at a decreased level of intensity.
- Patients are discharged from the intensive care units to long-term acute care hospitals.
 - These patient require more care than would be received at a rehabilitation center, skilled nursing facility, or at home.
- Location:
 - Housed in acute care hospitals but function independently
 - Stand-alone facility.
- Patient population:
 - Prolonged ventilator use or weaning
 - Ongoing dialysis for chronic renal failure
 - Intensive respiratory care
 - Multiple IV medication or transfusions
 - Complex wound care/care for burns



Long-Term Acute Care Hospitals (LTACHs), cont.

- Services Provided:
 - Patients who have a trach and/or are ventilator-dependent
 - Work on swallowing abilities and tolerance for voice prostheses
 - Alternative and Augmentative Communication
 - Work with patient, family and staff to optimize a patient's communication
 - In-service staff on swallowing and communication



The Rehabilitation Unit / Hospital

- Age Range:
 - Adults
- Medical Diagnoses:
 - CVA, Head injury, hemorrhage/injury, respiratory diseases, CNS diseases
- Common Communication and Swallowing Disorders:
 - Memory
 - Dysphagia
 - Language
 - Attention
- Collaboration
 - Interdisciplinary team: patient, family, physicians, nurses, PTs, OTs, psychologists, dietitians, recreation therapists, music therapists, vocational rehabilitation counselors, and social workers/case managers.
 - Coordinate a team treatment plan through weekly team meetings.
 - Two disciplines may co-treat a patient
 - The disciplines need to address different yet complementary goals in the same treatment session
- Setting Characteristics
 - Average patient stay is 20 days and is determined by the patient's ability to tolerate 3 hours per day of rehabilitation therapy (Includes PT, OT, and SLP).
 - SLPs conduct functional communication and swallowing evaluations and setting measurable, functional long and short-term goals.



The Long-Term Care Setting

- Alternative Names
 - Skilled Nursing Facility (SNF), Nursing home, geriatric care facility, long-term care facility
- Continuum of Care
 - Patients in this setting are ever-changing
 - SLPs work to improve and regain skills that were lost
 - Skills are lost due to illness, injury, or change in mental status
- Age range of patients in long-term care
 - 60 +
- Primary medical diagnoses of long-term care residents:
 - CVA
 - Mental disorders
 - Respiratory diseases
 - CNS diseases
 - Other neoplasm
- Primary Communication Deficits
 - Swallowing
 - Cognition
 - Language



The Long-Term Care Setting, cont.

- There are three main ways to initiate referrals for speech-language pathology services:
 - Physician orders for SLP evaluation and treatment upon admission to the long-term care facility.
 - Identification of residents during a screening.
 - Staff/family referrals.
- Collaboration With Other Disciplines
 - Physical therapists, occupational therapists, recreation therapists, nurses, social workers, dietitians, and others who provide care to the residents of your facility.



Subacute Care

- Care is provided on an inpatient basis for those individuals who:
 - Need services that are more intensive than those typically received in skilled nursing facilities
 - Less intensive than acute care.
 - Cannot tolerate 3 hour/day of PT, OT, SLP or no longer requires therapy at this intensive a level
- Location:
 - Housed in skilled nursing facilities
 - Housed on skilled nursing units.
 - May be found in rehabilitation hospitals but is less common



Outpatient Clinic Setting

- Populations:
 - Adults & Pediatrics
- Referral Sources:
 - Neurologists for motor speech disorders, dementia, Primary progressive aphasia
 - ENT for voice and swallowing disorders , Head and neck cancer
 - Gastroenterology for dysphagia
 - Pulmonary for PVFM
 - Primary care physicians for language delay, voice, etc.
- Specialties:
 - Some settings may specialize in certain disorders (e.g., aphasia clinic, inter-disciplinary voice clinic, fluency clinic)
- Collaboration
 - May co-treat with PT or OT
 - Work on specialized teams: cleft palate, feeding teams, Head & Neck cancer, ALS, Huntington's disease, cleft and craniofacial abnormalities
 - Work with audiologists on a specific case



Outpatient Clinic Setting, cont.

- Primary Medical Diagnosis
 - Adults: CVA, head injury, CNS diseases, respiratory diseases, hemorrhage/injury
 - Pediatrics: Developmental delays, autism, CVA, head injury, CNS diseases, respiratory disease
- Primary Communication Areas
 - Adults: Oral and Written Language, Cognition, Motor Speech
 - Pediatrics: Oral Language, articulation/phonology, motor speech, cognitive-communication, swallowing/feeding, fluency



The Pediatric Hospital Setting

- The evaluation and treatment of patients from birth to 18 years old or into adulthood.
 - Acute and Inpatient Settings
 - Outpatient Setting
- Can require specialized skills in several differing age groups, including:
 - Infants
 - Toddlers
 - Preschoolers
 - School-aged children
 - Adolescents.
- Common disorders found in the pediatric population, particularly in a medical setting:
 - Apraxia and other articulation or phonology disorders
 - Autism
 - Language disorders
 - Central auditory processing disorders
 - Stuttering
 - Dysphagia



A Typical Day Across Settings

A typical Day in the Acute Care Hospital Setting: Adult and Pediatric

- Adults or Pediatrics
- Typical Day can be 8, 10, or 12 hours:
- Log in to the EMR and split new consults and follow up treatments amongst your SLP team.
- Depending on your workday and productivity requirements, you will aim to see 6-15 patients in a day.
 - Productivity varies
 - Patient is unresponsive
 - Patient off the unit
 - Being seen by another healthcare provider
 - New consults may take priority over follow-up patient appointments
 - Patient not tolerating diet recommendation
- May complete VFSS and/or FEES examinations
- See patients at the bedside.
- Complete documentation
- You never know what your day is going to look like which keeps things exciting!

Outpatient Clinic Setting: A Typical Day

- Adult or Pediatric
- A typical day can be 8 or 10 hours
- Patients are scheduled in advance
- Productivity demands vary
 - 8-12 dependent on appointment block
 - Patient cancellations/rescheduled appointments
- Complete documentation on patient seen not seen.



Documentation

- Documentation is critical in conveying the essential clinical information regarding each patient's diagnosis, treatment, outcomes, and communication between clinicians and payers.
- Documentation should answer the following questions:
 - Is it medically necessary?
 - Is it a service requiring the knowledge and skills of a speech-language pathologist?
 - Are the goals and treatment functionally relevant?
 - How does this service add value to the patient's interdisciplinary care and overall health?



Documentation, cont.

- Billing codes are needed for reimbursement of healthcare services.
 - Reimbursement comes from a variety of sources
 - Third party payers, such as Medicaid, private insurance and state funding programs.
 - Self-pay
- Clinical documentation provides the justification for the codes that are submitted.
- CPT codes are used to describe procedures or services.
- ICD codes are used to report diagnoses or disorders.
- Clinical documents are legal documents.
- Student documents should be cosigned by a qualified provider.
- Documentation should be completed before leaving your job.



Planning a Career in the Healthcare Setting



Graduate Level Clinical Experiences

- Obtaining observation hours in the healthcare setting
- Impact COVID-19 has had on student placements
- Helpful Hints
 - Arrive at least 30 minutes early to clinical experiences
 - Look at patient schedule for the day.
 - Take brief notes of each patient for the day.
 - Learn to collect case history from electronic medical records and thorough patient interviews
 - Familiarize yourself with the documentation requirements
 - Browse clinician's notes
 - Observe and assist with patient care
 - Engage in reflective practice



Interviewing Skills: In-Person

- Research the site
- Emphasize your skills and experiences
- Be prepared to answer questions covering:
 - Content knowledge
 - Case scenarios involving:
 - Assessment tools
 - Treatment techniques
 - Professional and ethical disposition
 - Resume/clinical experience
- Prepare a list of questions for the interviewer
- Dress professionally
- Cell phones on vibrate
- Arrive early



Interviewing Skills: Virtual

- Same interview tips should be followed during a virtual interview
- Professional attire and professional “background”
- Quiet place in the house
- Cell phone on silence and out of reach



Transitioning to the Healthcare Setting

- Continuing education courses/certifications
- Volunteer opportunities
- Familiarity with common medical diagnosis
 - how to assess and treat communication and swallowing disorders associated with them
- Concise Documentation

References

- American Speech-Language-Hearing Association [ASHA]. (n.d.). *SLPs in health care settings*. Retrieved November 18, 2020, from <https://www.asha.org/slp/healthcare/>