

Referral Access Criteria to SLT Department at CHI

All referrals must meet the inclusion criteria below to be accepted into the service. Any referrals who do not meet the inclusion criteria or exceptions below will be returned to the referrer.

General Inclusion Criteria:	Exclusion Criteria:	Exceptions
<ul style="list-style-type: none"> • Referrals must be made in writing via letter, electronic referrals or the referral form (see Appendix 1) • There is no minimum age of referral. Maximum age of referral into service is 16. • Referrals are accepted from Consultants in Children's Health Ireland for assessment and management planning. • The child must attend the referring CHI consultant regularly AND • Children must require a tertiary specialist level assessment for swallow and/or communication or need to be seen as part of a pathway for their medical condition. • Feeding and/ or communication difficulties are related to a significant and on-going medical condition. • Children referred with complex medical presentations that require specialist developmental assessment may be accepted for communication assessment. • Inpatients who are normally managed by local SLT may be referred if they present with a new feeding problem related to their current hospital admission. In such cases the child will be managed as an inpatient and transferred back to their local team on discharge. 	<ul style="list-style-type: none"> • Referral is made due to the absence or withdrawal of a local service. • The child presents with a delay in speech, language or a delay in progressing to developmentally age-appropriate food textures. • The child presents with a chronic communication or feeding problem which is being managed by the local SLT. • Referral is made by external consultant, GP or a local SLT • Children and young people who can be or who are appropriately managed by community SLT services will not be reviewed in CHI SLT • If the child is already under the care of or on a waiting list for a specialist/ community based service, a duplicate service will not be offered. • Children with general developmental delay, isolated speech and language delay or voice disorders will not be seen for communication assessment. These referrals should be made to community services. 	<ul style="list-style-type: none"> • <i>Videofluoroscopy</i>: This is a national service. A referral made by a consultant from any service will be accepted onto the videofluoroscopy waitlist if appropriate for this service. Referral management for this specialist service is not included in this policy. • <i>Second Opinion Speech Assessments</i>: The SLT department accepts referrals from outside agencies/ professionals for second opinion assessments of speech and resonance disorders.