



Standardized Service for Allied Health

Eating, Feeding and Swallowing Services for Pediatrics

Information for Practice, Operational Leaders and Providers

Standardized Eating, Feeding and Swallowing Services for Pediatrics

<p>Document Purpose</p>	<p>This document applies to care providers and leaders, across sites and sectors, who provide eating, feeding and swallowing services. The purpose is to:</p> <ul style="list-style-type: none"> • Provide guidance to clinicians, practice and operational leaders to support the delivery of family and patient-centered and evidence-informed eating, feeding and swallowing services • Facilitate consistent access, wayfinding, integration and collaboration between sectors and across local, zone and provincial providers • Outline targets for clinical activities offered locally and in zone and provincial hubs <p>EFS Service does not intend to address traditional psychiatric eating disorders, or parenteral nutrition.</p>
<p>Goals of the Service</p>	<p>Improve health outcomes and quality of life for individuals with suspected or confirmed eating, feeding and swallowing disorders.</p> <p>The primary aim of the EFS service is to assess and manage concerns presented by those with a suspected or known EFS disorder, to improve health outcomes and patient safety, while promoting quality of life, and creating a positive feeding experience. This may involve addressing issues within the following health domains as they relate to a pediatric feeding disorder (Goday, 2019):</p> <ul style="list-style-type: none"> • Nutrition and Hydration Domain • Medical Domain • Feeding Skill Domain • Psychosocial Domain
<p>Access, Wayfinding & Transition Supports</p>	<p>Target Population</p> <p>Children (birth to 18 years old) with a known or suspected eating, feeding or swallowing disorder.</p> <p>Access & Referral</p> <p>Local service providers accept referrals from all sources, and may or may not include self-referral. Zone services support local service providers and accept referrals for individuals who require complex eating, feeding and swallowing related assessment and treatment. Provincial services are available to those infants, children and youth who have had a clinical assessment and require support that cannot be accommodated at the zone level. One site may offer a mix of zone and provincial level services based on context and needs. Wait time targets for clinical and instrumental assessment are based on priority levels, and are as per standard patient access targets in Connect Care for general rehabilitation:</p> <ul style="list-style-type: none"> • Emergent: available only in emergency and inpatient locations • Semi-Urgent/Urgent: 2 weeks • Routine: 6 weeks <p>See: PEAS Referral & Triage criteria</p>

	<p>Support for Access to Appropriate Services</p> <p>Local, zone and provincial providers will collaborate to facilitate follow-up on recommendations and provision of services by a local provider whenever possible. Virtual health consultation and management will be considered when feasible using platforms such as Virtual Health.</p> <p>Transition Supports</p> <ul style="list-style-type: none"> • A pediatric feeding care plan is needed to support transitions between service providers and settings. • The plan will include timelines, required supports and the person or program responsible for initiating the follow-up. • Mentoring for local service providers may be a component of the transition plan. 			
<p>Partnership & Collaboration</p>	<p>Ongoing collaboration with the individual, family, caregivers, physicians, Allied Health providers, and community agencies is essential.</p> <ul style="list-style-type: none"> • Local, zone, and provincial service providers will collaborate to meet individual client needs and facilitate local service delivery whenever possible • Distance consultation and treatment via Virtual Health Technology will be considered when available • Clients, families and providers will create at least one collaborative, functional, client-centred goal (See Collaborative Goal Setting Practice Support and on the PEAS Website Collaborative Practice tools) 			
<p>Targets for Clinical Activities</p>	<p>Local</p> <ul style="list-style-type: none"> • Community Rehabilitation • Rural health centres • Home care • Municipal and community hospitals 	<p>Zone</p> <ul style="list-style-type: none"> • Regional hospitals • Regional outpatient rehabilitation programs 	<p>Provincial</p> <p>Specialized EFS service locations such as:</p> <ul style="list-style-type: none"> • Stollery Hospital • Glenrose Rehabilitation Hospital • Alberta Children’s Hospital 	
<p>Some sites act as both Zone and Provincial Hubs</p>				
		<p>Local</p>	<p>Zone</p>	<p>Provincial</p>
<p>Person centred wellness & swallowing education, capacity building, collaborative care planning and transition support</p>		<p>✓</p>	<p>✓</p>	<p>✓</p>
<p>Screening and referral for eating, feeding, swallowing</p>		<p>✓</p>	<p>✓</p>	<p>✓</p>
<p>Clinical assessment of structure, function and participation related to eating, feeding and swallowing</p>		<p>✓</p>	<p>✓</p>	<p>✓</p>
<p>Specific, individualized education to address appropriate compensatory strategies and diet modifications</p>		<p>✓</p>	<p>✓</p>	<p>✓</p>
<p>Instrumental assessment – Videofluoroscopy Swallowing Studies (VFSS) & Fiberoptic Endoscopic Evaluation of Swallowing (FEES)</p>				<p>✓</p>
<p>Recommendations and management for nutrition & hydration strategies, secretion management, oral care, diet modifications and positioning and other rehabilitation and compensatory strategies.</p>		<p>✓</p>	<p>✓</p>	<p>✓</p>
<p>Rehabilitation and therapy to achieve feeding that is appropriate for the child’s developmental age and abilities (eg:</p>		<p>✓</p>	<p>✓</p>	<p>✓</p>

	feeding therapy, interventions to address oral aversion and feeding tube dependency, etc...)			
	Services for clients requiring specialized equipment		✓	✓
	Referral to zone and/or provincial services	✓	✓	✓
	Transition support to facilitate seamless services across providers and sectors	✓	✓	✓
	Transition support for clients to receive local services		✓	✓
	Capacity building and mentoring for local and/or zone providers		✓	✓
	Consistent use of outcome measures relevant to the population & setting	✓	✓	✓
	Collaboration with other healthcare providers and partners as needed	✓	✓	✓
	Innovation and research including academic and industry partnerships			✓
	Use of emerging technology			✓
Clinical Resource Requirements		Local	Zone	Provincial
	Evidenced-based, current education materials for use with clients and families	✓	✓	✓
	Standard protocols & processes for triage, screening, clinical assessment, and referral to FEES, VFSS, appropriate to the population	✓	✓	✓
	Videofluoroscopy equipment suitable to provide safe and reliable swallowing assessment*			✓
	Fiberoptic Endoscopic Evaluation of Swallow equipment and infection prevention and control processing available			✓
	Ability to accommodate special seating needs in VFSS suites (e.g., wheelchair & seating or bariatric)			✓
	<i>*Instrumental swallowing assessment services are not consistently available in all zones.</i>			
Recommended Outcome Measures	Quality dimension	Outcome Measure		
	Acceptability	% of families who indicate that they are involved as much as they want to be in decisions about their child's care and treatment.		
	Accessibility	% of families who indicate that they have to wait too long to access care		
	Appropriateness	% of patient/family that have an EFS Care Plan		
	Effectiveness	% of families with reduction in family impact score (impact of having a child with feeding problems) [Measurement using the Feeding Swallowing Impact Survey (FS-IS)] (Lefton-Greif, et al., 2014)		
	Efficiency	% of patients seen in an ED quarterly in relation to feeding/swallowing issues (e.g. aspiration, malnutrition, dehydration)		
	Safety	% of patients admitted to hospital quarterly in relation to feeding/swallowing issues (e.g. aspiration, malnutrition, dehydration)		

Professional Practice	<p>Provider Roles</p> <ul style="list-style-type: none"> • An interdisciplinary team is involved in service planning and delivery whenever possible. (CADTH, 2017, p. 20). Team composition varies depending upon the service setting and program goals. Eating, Feeding and Swallowing teams are most commonly staffed by speech-language pathology, occupational therapy, and registered dietitians. Collaboration with primary care or specialist physicians is key. • Access to the following disciplines may also be required: community physicians, gastroenterologists, lactation consultants, nurse practitioners, nurses, otolaryngologists, pediatricians, pharmacists, physiotherapists, psychologists, psychiatrists, respiratory therapists, social workers, and surgeons. <p>Provider Competency</p> <ul style="list-style-type: none"> • Clinicians providing eating, feeding and swallowing assessment, and management require a high level of specialization. Access to training and mentorship is required for those new to practice. • It is the individual clinician’s and the team’s responsibility to consider their distinct and collective roles and competencies in relation to the needs of the client and the context of their work. Clinicians identify gaps in their own or their team competence and involve others as needed to ensure safe, quality care. <p>See:</p> <ul style="list-style-type: none"> • PEAS Role Descriptors & Tasks within Full Scope • PEAS Collaborative Practice tools
Professional Practice Supports	<p>See:</p> <ul style="list-style-type: none"> • PEAS Website: https://peas.ahs.ca • PEAS Clinical Practice Guide • PEAS Community of Practice
References	<p>Lefton-Greif, M. A., Okelo, S. O., Wright, J. M., Collaco, J. M., McGrath-Morrow, S. A., & Eakin, M. N. (2014). Impact of Children’s Feeding/Swallowing Problems: Validation of a New Caregiver Instrument. <i>Dysphagia</i>, 29(6), 671-677. Retrieved from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4359894/</p> <p>CADTH. (2017) Feeding and swallowing assessment services for pediatric populations in Canada: Service provision, practice models, and assessment tools. <i>Environmental Scan</i>; no.61. Retrieved from https://www.cadth.ca/sites/default/files/pdf/ES0306_Feeding_Swallowing_Assessment%20Service_s.pdf.</p>
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