# Referral to Speech and Language Therapy (SLT):

* Information gathering – goal discussion – Assessment, then:
* Differential diagnosis:
* Aphasia (+ / -)
* Dysarthria (+ / -)
* Cognitive communication issues (+ / -)

# Then:

* Initial provision of accessible, personalised information to individual and family
* Signposting / referral to other relevant services and support

# This then supports an ongoing review / goal setting and intervention cycle with SLT/Multidisciplinary Team (MDT) /Stroke support services collaboration with a focus on training, support, information and joint working:

* Goal setting**:** goals should be
* Be patient centred
* Be asset based
* Promote self-management
* Utilise advocacy/supported decision-making when appropriate
* Be regularly reviewed and revised
* Involve outcome measures when appropriate
* Determine frequency and intensity of intervention
* Support discharge process with open re-referral to SLT if new goals identified

* Intervention: Individualised programme based on evidence based practice and with access to:
* Individual and/or group therapy
* Impairment and/or functional based therapy
* Intensive therapy programmes
* Augmentative and Alternative Communication (AAC)
* Computer-based therapy
* Telerehabilitation
* Conversation partner training
* Support for living with long-term communication difficulties
* Facilitating return to work/participation in leisure activities.
* MDT/support services able to provide:
* Supported communication
* Accessible information
* Support for communication goals
* Support for person living with long-term communication difficulties and their families