



AHP Day

Alison McLaughlin
Speech and Language Therapist
Clinical Lead Voice

Where do you work within the Trust?

DCS - Royal Blackburn Hospital (Inpatient and Outpatient) and St Peters Centre, Burnley (Outpatient).

What does your job role involve on a daily basis?

Leading the ELHT Voice Service; Management of children and adults with disorders of voice and voice therapy for individuals who are undergoing gender reassignment (Transgender). Fibreoptic Endoscopic Evaluation of Swallowing (FEES); Critical Care Unit/RBH Wards/Outpatient. Supporting Head + Neck Cancer SLT Team; voice, swallowing, speech assessment and rehabilitation. Valve clinic/Head + Neck Clinic/C22. MDT working; ENT/Head + Neck and Maxillofacial teams.

How does your role contribute to our delivery of Safe, Personal and Effective Care within ELHT?

As a Service we are constantly looking for ways in which we can deliver care that is safe, personal and effective. My role here at ELHT involves accurate diagnosis, assessment and treatment in voice, speech and swallowing disorders. Patient care is timely, with clear goals and always looks towards self-maintenance and management. We strive to support patient flow, positive discharge and avoid repeat admissions where possible. As a Service we actively collect patient feedback and respond to suggestions, ideas and reflections that our service users provide. Our work is grounded in both evidence based practice and practice based evidence and always keeps patient goals at the heart of what we do.

What do you most enjoy about being a Speech and Language Therapist?

I love being an SLT. The diversity of my role means that I not only work in the acute setting but I also provide outpatient clinics and home visits. This means every day and every patient is different and my job is never dull! I often talk about the 'sparkle' moments that happen at work, of which there are lots. Changing a voice prosthesis for a person who has had a total laryngectomy and of hearing their 'voice' for the first time after surgery is a privilege. Hearing their first words 'I love you' to a partner or a loved one makes any challenge a day may bring surmountable.

Why did you want to become a Speech and Language Therapist?

At 43yrs old my dad had two massive strokes in short succession – his prognosis was poor. My mum was 8months pregnant and with 3 others under the age of 12 you can imagine how our lives were changed forever. Despite the poor odds we were given my dad did survive, he came home, walked, talked and did some pretty impressive things with his life. It was the process of his rebuilding that inspired me to become part of the NHS. I sat for hours and listened to the numerous AHP's that traipsed in and out of our house. Even at the age of 7 I was 'on it' with the delivering of therapy, I've always loved a plan. Above all I can remember the kindness and the 'other bit' to being a therapist that you can't necessary label or describe with words but you can feel it – that's when I knew I was hooked.

Are there any frustrations, myths or things you find people often don't understand about your profession which you'd like to take this opportunity to say a few words about?

Friends, family, members of the public and patients often ask tongue in cheek, 'can you help me talk properly?' They are usually referring to changing local accent/dialect to received pronunciation (RP) and with a Burnley accent myself that's definitely not what I do! Or they assume I work with children. In the workplace the scope and level of specialist knowledge of the SLT can also be a surprise to some colleagues and is often underutilised or overlooked.

The role of the SLT has evolved dramatically since I graduated. SLT has never been so dynamic, evidence based and exciting to be part of. SLT led Fibreoptic Endoscopic Evaluation of Swallowing (FEES), voice banking for MND patients, Advanced Dysphagia Practitioners, SLT led Videofluoroscopy Clinics, SLT led Valve Clinics are just a few of the things SLT's are leading on here at ELHT.