Policy Clarification 12.19.12

Oral Motor/Feeding/Swallowing Evaluations and Services

The following information provides a clarification of the evaluation process for children who are experiencing oral motor/feeding/swallowing issues. Please be advised that both family and children’s needs vary and making appropriate, documented, and individual decisions are vital in creating family-centered, individualized, and effective early intervention services.

Based on the research below and, in conjunction with state standards for best practice, when a child is experiencing oral motor/feeding/swallowing issues, an evaluation may be completed by either a Speech and Language Pathologist (SLP) or an Occupational Therapist (OT). If the child is in need of services related to oral motor/feeding/swallowing, the service provider (OT or SLP) does not need to be of the same discipline as the evaluator (OT or SLP).

For example, oral motor/feeding/swallowing issues may be evaluated by an SLP however, if the team determines that an OT is the most appropriate provider for this child, the OT is now authorized to provide ongoing services related to oral motor/feeding/swallowing issues, even if they did not complete the evaluation.

It should also be noted that the above clarification is ONLY related to concerns with oral motor/feeding/swallowing issues.

Research and further explanation/ definitions attached to clarification

According to the information below, SLPs and OTs appear to have appropriate and, in broad terms, fairly similar educational backgrounds in the evaluation of oral motor/feeding/swallowing concerns. With all types of education, specific experiences and expertise vary. However the entry level skills for both SLPs and OTs appear to be similar in regards to oral motor/feeding/swallowing education. Both the American Speech-Language-Hearing Association and the American Journal of Occupational Therapy emphasize the specific oral motor/feeding/swallowing skill sets that are obtained during education and/or required for licensing (America Speech-Language-Hearing Association, 2002b; Clark, G. F., 2007).

SLP
The following information provides a clarification of the possible role for a Speech and Language Pathologist when oral motor and feeding issues are present during an evaluation and/or services. According to the American Speech-Language-Hearing Association (ASHA), “the roles of SLPs in evaluation and assessment typically are to measure and describe communication and related behaviors, including feeding and swallowing, to share observations on other developmental domains, and to help in the decision-making process related to diagnosis, eligibility determination, and planning next steps for the child and family” (American Speech-Language-Hearing Association, 2008, par. 18). In addition ASHA states,
“SLPs may serve as either primary providers or consultants in transdisciplinary models, and should be considered for the primary provider role when the child's main needs are communication or feeding and swallowing” (American Speech-Language-Hearing Association, 2008, par. 12).

These statements should be used as a reference when determining appropriate staff for evaluations and service delivery. However, these statements are not to be the sole factor in determining appropriate service providers for children.

To view a thorough explanation of SLPs role in Early Intervention and, more specifically, in swallowing and feeding disorders, please reference the two articles below in the “Reference” section.

**OT**

The following information provides a clarification of the possible role for an Occupational Therapist when oral motor/feeding/swallowing issues are present during an evaluation and/or services. According to an article in the American Journal of Occupational Therapy, “Feeding, eating, and swallowing are within the domain and scope of practice for occupational therapy. Occupational therapists and occupational assistants have the knowledge and skills necessary to take the lead role in the evaluation and intervention of feeding, eating, and swallowing problems” (Clark, 2007). In addition, the American Occupational Therapy Association provides a “Fact Sheet” which highlights the roles and responsibly of Occupational Therapists in early intervention settings.


These statements should be used as a reference when determining appropriate staff for evaluations and service delivery. However, these statements are not to be the sole factor in determining appropriate service providers for children.

**References**

