Implementing Therapy Information Sessions - Managing Family Expectations and Maximising Engagement



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Background

In 2017, The North Ayrshire Speech and Language Therapy (SLT) Paediatric Service identified that families had prolonged and multiple waits to access SLT services with some families waiting a year or more before receiving a triage consultation. Waits occurred after referral, triage and assessment prior to intervention.



These increased waits resulted from ongoing workforce issues and departmental reorganisation. Prolonged waiting times were also contributing to parental anxiety. A further issue was a lack of engagement by families resulting in either failing to attend appointments or sporadic attendance. This overall situation was having a negative impact on staff morale

What we were aiming to achieve

- Reduce overall waiting times for children and their families
- Manage parental expectations more effectively and efficiently
- Maximise engagement in therapy interventions
- Improve staff morale

Incorporating improvement methodology, a whole team approach was used to explore potential improvements and change ideas. An outcome of this was:

When assessment has been identified as the outcome of an initial telephone triage consultation, the families/carers will be booked onto a Therapy Information Session prior to being offered an initial speech and language assessment.

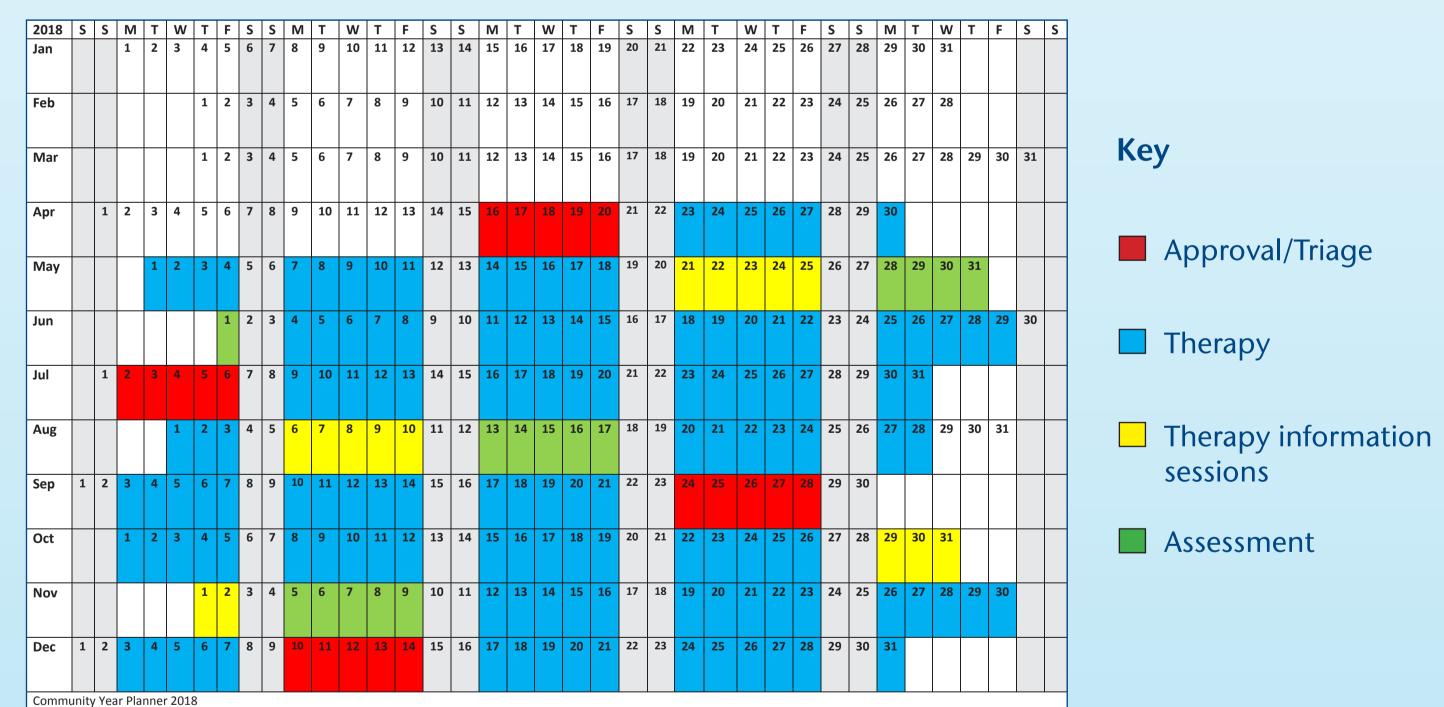
As such, the aim of this specific project was that:

By December 2018, 85% of parents / carers offered an appointment will attend a Therapy Information Session

How we did this

Building on the success and learning from the approach of our SLT colleagues in Forth Valley the following change ideas were tested and implemented within our service:

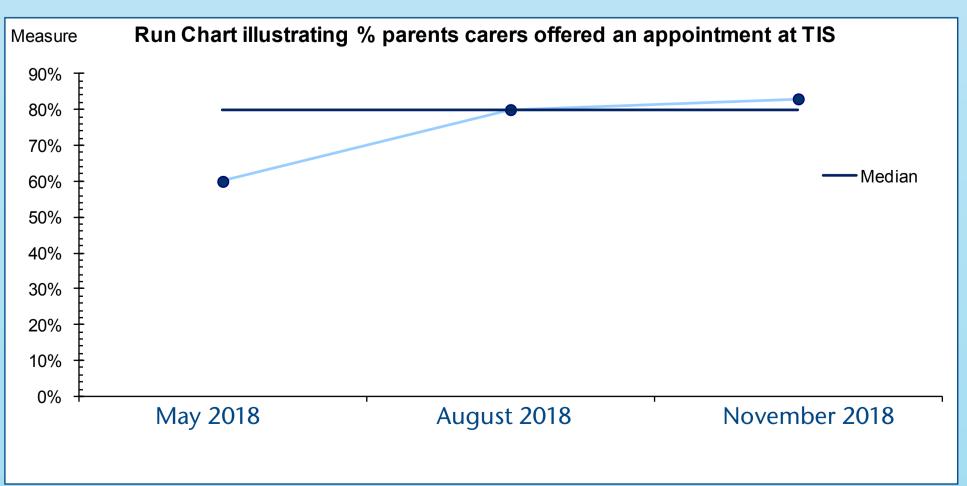
- Introduction of Therapy Information Sessions (TIS) When assessment was identified as an outcome of triage parents and carers were invited to a TIS. A TIS is a 45-minute group session for parents and carers only, with information shared on speech, language and communication development, what to expect from the Speech and Language Therapy Service and strategies to manage speech, language and communication needs. It was envisaged that introduction of a TIS would lead to clearer communication with parents about the role of the SLT and of therapy partners, clarify the discharge policy, promote engagement and enhance self management improving overall outcomes for each child.
- Introduction of a yearly planner- This detailed 11 week cycles throughout the year which included a week for triage, a week for Therapy Information Sessions, a further week for assessment and blocks of weeks for intervention. It was envisaged that implementation of a yearly planner would help team planning and manage work flow.



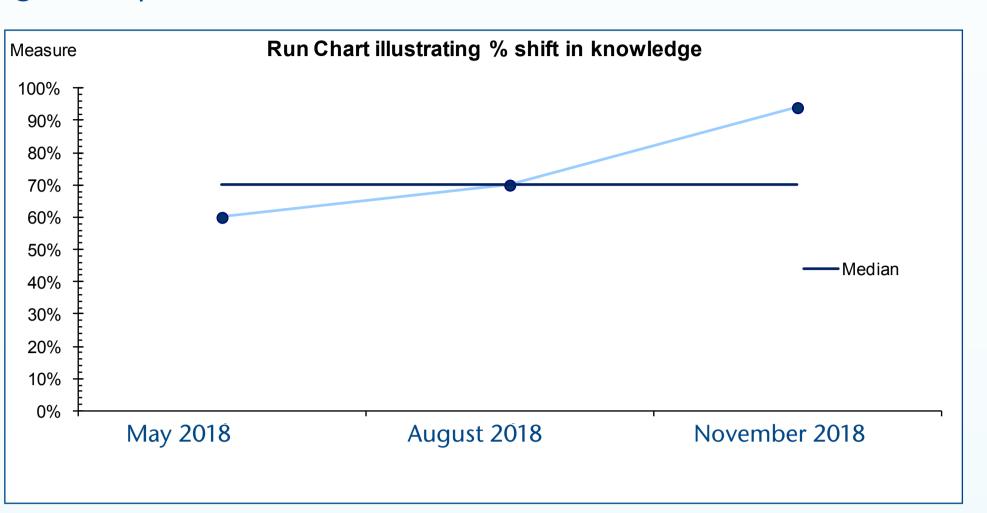
What have we achieved to date?

Three cycles of the yearly planner have now taken place. Through continuous quantitative and qualitative measurement we have been able to demonstrate the following:

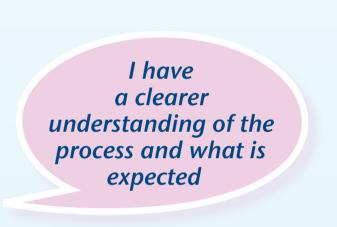
• Increased attendance at the Therapy Information session - By December 2018, 83% of parents / carers who were offered an appointment at one of the Therapy Information Sessions actually attended.

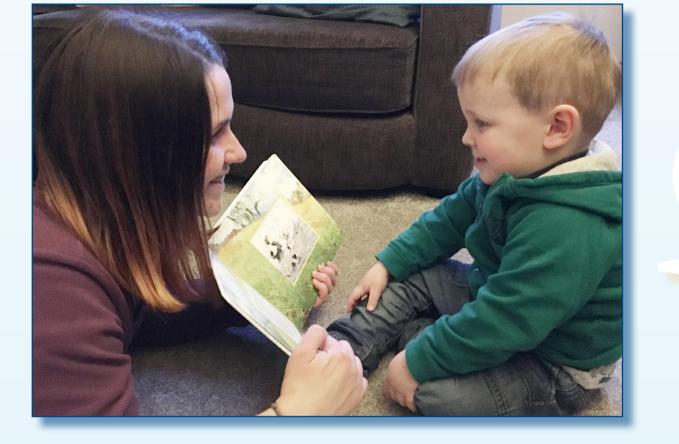


• **Improved family expectations and engagement** - By December 2018 94% of families demonstrated a shift in knowledge in their understanding of the SLT role and the role parents play in the ongoing development of their child.











• Improved staff morale - Through the introduction of the TIS and the reduced waiting times staff morale has improved. Qualitative data from those involved in delivering the sessions include:



Conclusion and Planned next steps:

In addition to the above positive outcomes the change to service delivery has also led to the number of waits within the system being reduced to only one wait. This is the wait from request for assistance to triage with the **length of wait reduced by 25%**.

As a team we have a date set aside in April 2019 to review the process and plan next steps based on our learning to date. We envisage the following to be points of discussion:

- We will continue to deliver the Therapy Information Sessions
- We are considering different way of approaching triage
- We plan to review the timescales of the yearly planner
- We are now starting to collect data at the stage of intervention to evidence the impact on consistency of engagement and self management

References

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