Measuring Outcomes of Universal Services

Kathryn Moyse
RCSLT Outcomes & Informatics Manager
RCSLT Outcomes Programme workstreams

- RCSLT led outcomes work
  - RCSLT Online Outcome Tool
  - Measuring the impact of universal/targeted/public health approaches
  - Framework to support broader collection of data by SLT services
  - Developing more specific measures for each clinical area

Influencing national policy on data and outcomes
From the outset, it was acknowledged that TOMs (and therefore the ROOT) is not applicable across universal services/public health.

Drivers internal to the profession included work undertaken in relation to the RCSLT Children’s SLT Services Strategy.

Drivers external to the profession included national initiatives by Public Health England and Department for Education.

UK-wide task and finish group established to developing approach to data collection in universal early years children’s SLT services.
Scoping work undertaken by early years working group

- Identified high level outcomes of universal/targeted/public health approaches e.g.:
  - Improving general public’s knowledge of the importance, nature and barriers to communication
  - Improving the knowledge and skills of parents/carers and the early years workforce

- Identified the key areas in which to measure change (child, parents/carers, workforce, setting/environment)
Scoping work undertaken by early years working group

- Collated examples of approaches to measurement and tools being used to collect data to evidence impact for different purposes including:
  - to monitor language skills of population (including tools used by other professionals)
  - to assess knowledge/confidence/competency of the workforce
  - to monitor the quality of the communication environment
Scoping work undertaken by early years working group

- Developed criteria to support appraisal of tools, e.g.
  - Age range
  - Administration – who, when, how
  - Technical standards (validity, reliability etc.)
  - Costs

- Undertook an initial appraisal of known tools against key criteria
Challenges

- Given the number of available tools, it would not be realistic to develop an exhaustive list and undertake a rigorous evaluation of each tool/approach.
- There are a number of tools that have been developed locally, which have become embedded in services and it is anticipated that there will be a reluctance to use something new.

Therefore, the working group therefore identified that it would be challenging to make recommendations to the membership about which tools to use and to develop a consistent approach.
Development of guidance

The working group identified key components for guidance:

- Importance of measuring impact and other relevant context/background
- Clarifying the objectives of the work/project
- Identifying what to measure
- Identifying how to measure
- Understanding the elements to consider when developing new tools/approaches
- Best practice examples of approaches to data collection

Identified accompanying resources e.g. theory of change, guidance to support members with developing local questionnaires and surveys
In parallel: Measuring the impact of SLT work outside the referral process in ALD services

- National adult learning disability (ALD) leads network completed national audits in 2017 and 2018:
  - Staffing
  - Types of activities
  - Caseload numbers
  - Acuity

- Results indicated that work outside of the referral process varied considerably across the services, but equated to an average of 10% of total activity
Measuring the impact of SLT work outside the referral process in ALD services

- In the 2018 study, SLTs reported that the purpose of this work was to:
  - To improve the skills of the LD workforce so they are better able to support people around targeted and known risks (39.2%).
  - To reduce the health inequalities known to contribute to the premature deaths through the public health and wellbeing agenda (17.1%).
  - To improve efficiency, minimise waits, reduce referrals and upskill others through providing advice and consultation at an individual level (16.2%).

- National ALD leads network identified the need to evidence the impact of this work and to develop approach to outcome measurement
Measuring the impact of SLT work outside the referral process in ALD services

- Developed a theory of change model to articulate the contribution of SLT activities/interventions to ultimate outcomes
- Alignment with the RCSLT Five Good Communication Standards and the Learning Disability Improvement Standards (NHS Improvement, 2018)
- Identified that there is a need for a range of measures and that many local services have their own preferred and established metrics, but need to develop some parameters and guidance
Proposed way forward

- Identify commonalities between the outputs of the two working groups to determine feasibility of developing guidance to support SLT profession with:
  - understanding the importance of measuring the impact of universal, targeted and public health activity (including current guidelines, policy and legislation, research and best available evidence)
  - clarifying the objectives of the work/project and identifying what information is required to know whether this had made a difference
  - how to approach measurement and decision making, including selecting and appraising published tools and aspects to consider when using tools that have been developed locally
Any Questions?
Workshop
Workshop session 2

- What have been your experiences with measuring the impact of work at a universal/public health level?
- What is working well?
- Have you encountered any challenges and how did you overcome them?
Feedback and discussion
For more information about the RCSLT Outcomes Programme, please contact:

Kathryn Moyse
RCSLT Outcomes and Informatics Manager

kathryn.moyse@rcslt.org