

Alex McNeill and Erin Stewart

**Tele-health
Results of audit**



Evaluating the use of tele-health within Belfast Health and Social Care Trust Children's Community Speech and Language Therapy Service as a Response to the Covid-19 Pandemic

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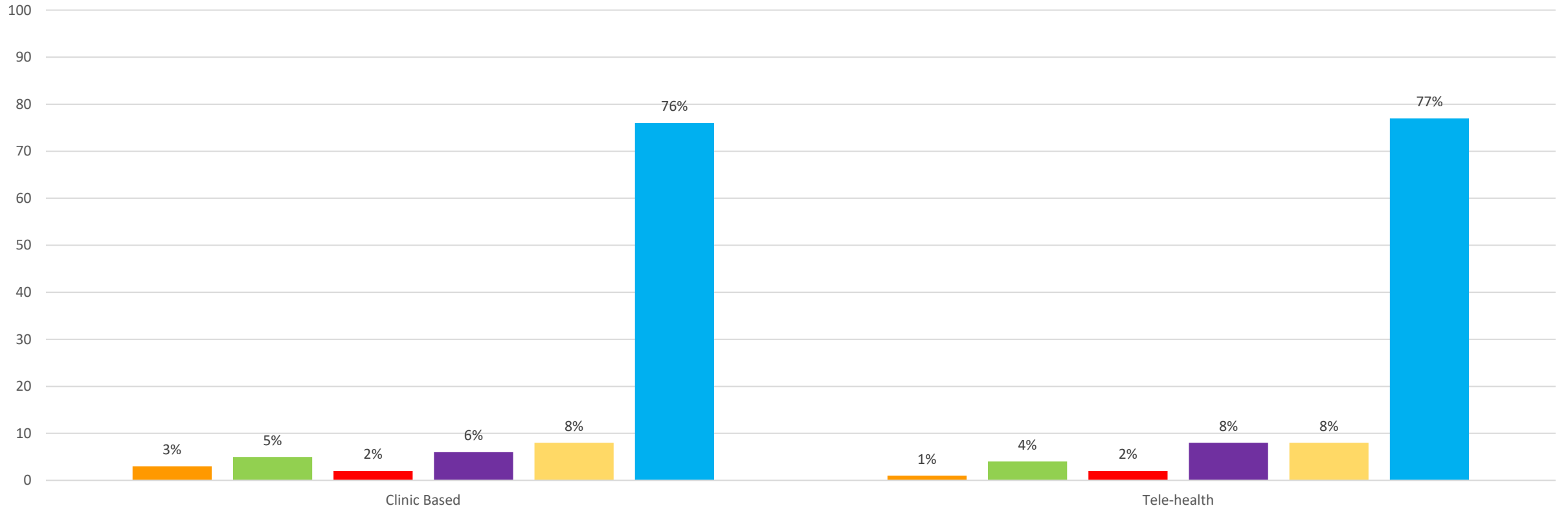
BELFAST HEALTH AND SOCIAL CARE TRUST, CHILDREN'S COMMUNITY SLT

Aim 1

Evaluate the outcomes of tele-health within Children's Community SLT Services in line with Key Performance Indicators (KPIs): (A) clinical outcomes and (B) attendance

- ▶ Clinical outcomes - Case file review in March 2021 to review outcomes of any previous clinic based or tele-health SLT input and level of change achieved. 170 children received tele-health input for phonology targets. Target sounds were achieved to the following levels:
 - ▶ 77% to phrase level independently
 - ▶ 8% to phrase level with support
 - ▶ 8% to word level
 - ▶ 2% blended with a vowel
 - ▶ 4% at phoneme level
 - ▶ 1% auditory discrimination only
- ▶ Attendance – Attendance rates for clinic based intervention in 2019-2020 were compared with those for tele-health intervention in 2020-2021.
 - ▶ 5% improvement in attendance during tele-health delivery

Comparison of level of change achieved in clinic based and tele-health phonology intervention



■ Auditory discrimination only/Phoneme level inconsistent

■ Phoneme achieved

■ Phoneme blended with a vowel

■ Word level achieved

■ Phrase level achieved with support or models

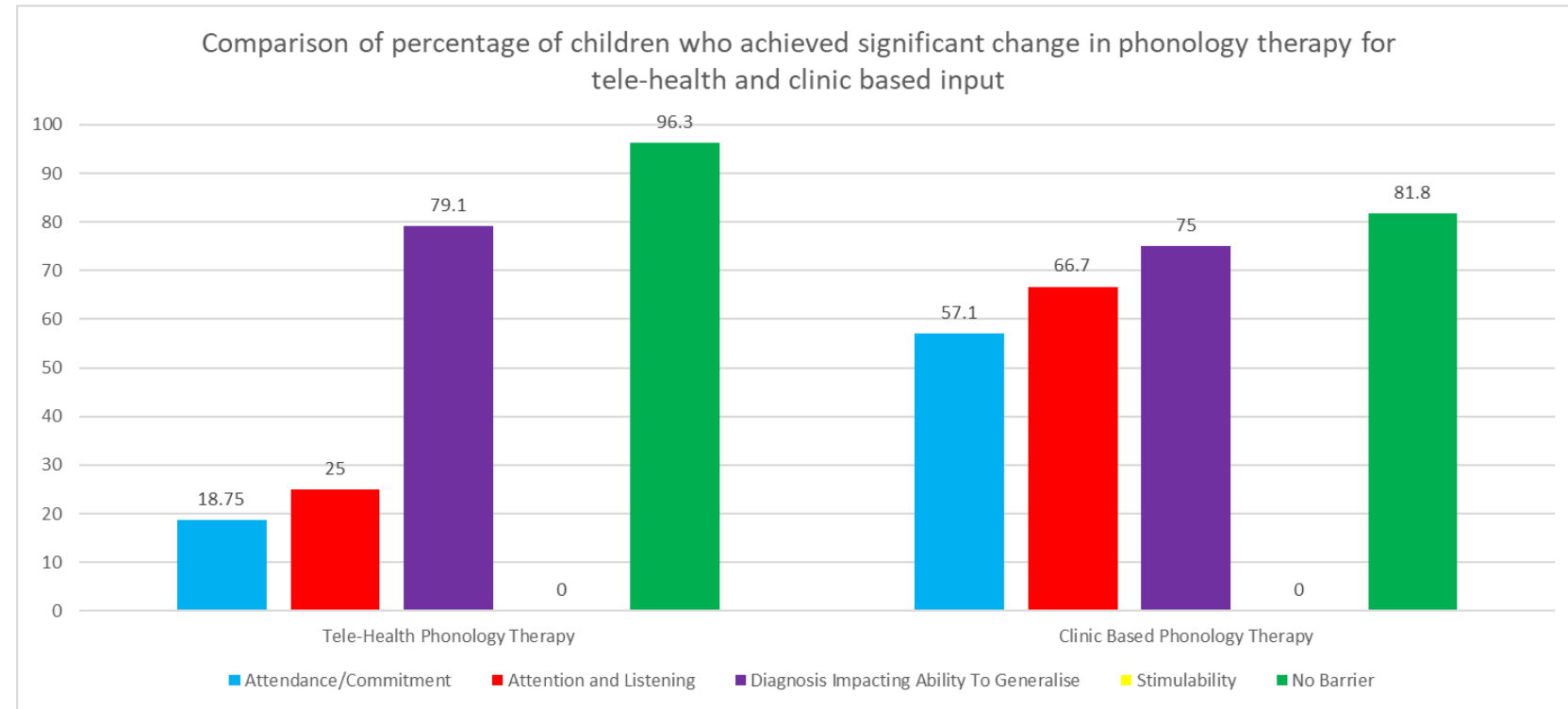
■ Significant change - phrase level independently or starting to generalise

Aim 2

Outline the main barriers which may affect outcomes in SLT and compare the impact of these on clinic based and tele-health interventions

Barriers Identified

- ▶ Attention and listening difficulties
- ▶ Attendance issues or limited commitment to therapy
- ▶ Target sound not being stimuable
- ▶ A diagnosis which affects ability to generalise target sounds (for example, learning difficulties or ASD)



Aim 3

Evaluate the views of parents/carers, service users and clinicians on the use of tele-health to deliver SLT

We have been able to provide a service and support to families during unprecedented times

It was great not having to travel to the health centre

It could be more challenging to hold the attention of some children

Dependent on good quality internet connection

Effective therapy which my daughter has really benefitted from

Conclusions

- ▶ The use of tele-health has allowed our service to continue throughout the pandemic with no compromise on clinical outcomes.
- ▶ Since starting to use tele-health as a method of service delivery, clinicians have developed confidence in the area.
- ▶ Clinicians should carefully consider appropriateness for tele-health on a case-by-case basis.
- ▶ Limitations of tele-health should be considered.
- ▶ Tele-health has been a viable method of service delivery throughout the pandemic and should be considered further in the future.

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