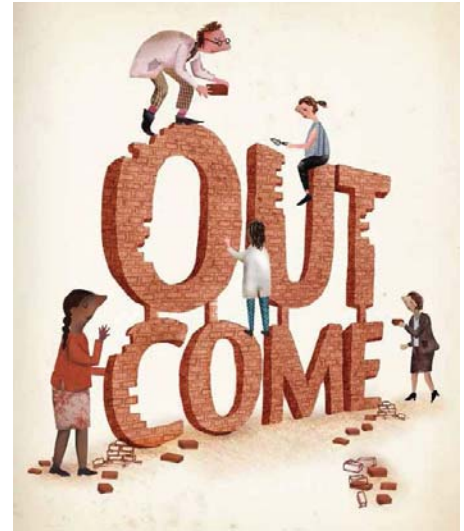


RCSLT Outcomes Project

Dysphagia Event
21 June 2018



Kathryn Moyse
Outcomes and Informatics Manager



Context

- Challenges across healthcare, education and social care with regard to outcome measurement
 - Use of terminology and consistency of definitions
 - Historical focus on inputs, processes and outputs
 - Outcome measurement not embedded - variable use of outcome measures, PROMS and PREMs
 - Few validated outcome measures available to AHPs
- Shift to outcomes-based commissioning in some parts of the UK
- Focus on national policies and frameworks promoting improvement based on outcomes



Drivers internal to the profession

Speech and language therapy services have a lack of robust evidence and outcomes data to:

- ❑ demonstrate the impact and contribution of SLT to changes in individuals' real life functioning
- ❑ support research and development of innovative practice and the evidence base
- ❑ identify what may be best treatment options for service users, and inform local care offers
- ❑ support service evaluation (including internal and external benchmarking)
- ❑ support business case development and to argue against cuts, putting pressure on SLTs to dilute services beyond the point which they are no longer effective
- ❑ demonstrate how SLT interventions are associated with impact on local, regional and national level outcomes



3

The RCSLT Outcomes Project

- Initiated in 2013 to respond to drivers internal and external to the profession
- Comprises three key workstreams:
 - ❑ Influencing national (UK wide) developments
 - ❑ Phase 1: Identifying an existing outcome measure using 'best fit' criteria and proof of concept pilot
 - ❑ Phase 2: Identifying the gaps, how to fill them and look at other work to be undertaken



4

Identifying an existing outcome measure

May 2014 – December 2014

- Commissioned a review of outcome measures used by SLTs to identify an existing tool for the data collection
- Developed criteria for appraisal of outcome measure tools, as suggested by members (see next slide)
- Appraised 60+ outcome measures, systems and frameworks against the criteria



5

RCSLT members' 'best fit' criteria

Table one: The 11 criteria agreed for existing outcome measures at the October 2013 and subsequent RCSLT Hub meetings

1. Is it reliable?
2. Is it valid?
3. Is it suitable across key client groups?
4. Is training available?
5. Is it easy to access?
6. Is it easy and quick to use?
7. Is it compatible with existing tools?
8. Can it work with the main areas of SLT practice and current priorities?
9. Can it capture long term/ultimate outcomes?
10. Can it take account of different stakeholders' priorities for outcomes?
11. Can it capture the range of service elements provided: interventions, training, adaptations to the environment, universal level etc?

6

Identifying an existing outcome measure

- Therapy Outcomes Measure (TOMs) (Enderby, John and Petheram, 2006)¹ was identified as the measure most fit for purpose
- It was acknowledged that:
 - The adoption of TOMs was a starting point for the profession's journey on outcome measurement
 - TOMs would not be used as a 'stand-alone' option but employed alongside other outcome measures and other tools/frameworks
 - TOMs is not applicable across all clinical areas and settings (e.g. universal services/Public Health) and parallel RCSLT work-streams would be established to consider how to fill these gaps in Phase 2

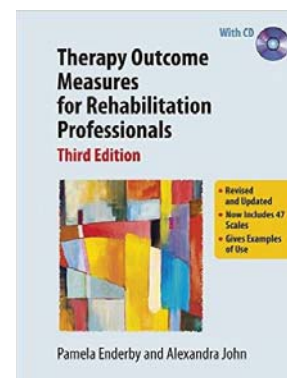
¹ *Third edition now available (Enderby and John, 2015)*



7

Therapy Outcome Measures Enderby and John (2015)

- TOMs scales address four dimensions of an individual in line with the International Classification of Functioning, Disability and Health (WHO, 2007):
 - **Impairment** - the severity of the presenting difficulty/condition
 - **Activity** - the impact of the difficulty on the individual's level of independence
 - **Participation** – impact on levels of social engagement and autonomy
 - **Wellbeing** – impact on mental and emotional wellbeing
- Each dimension is measured on an 11-point ordinal scale with six defined descriptors, ranging from 0 (worst case scenario), to 5 (best possible presentation).



8

The RCSLT Online Outcome Tool

- The RCSLT Online Outcome Tool (ROOT) is being developed to support practitioners with:
 - Collecting and collating outcomes data using two methods:

Direct data entry

- Data is entered directly into the ROOT

Data upload

- Data collected in local electronic systems is exported and uploaded to the ROOT

- Evaluating and reporting outcomes (see next slide)

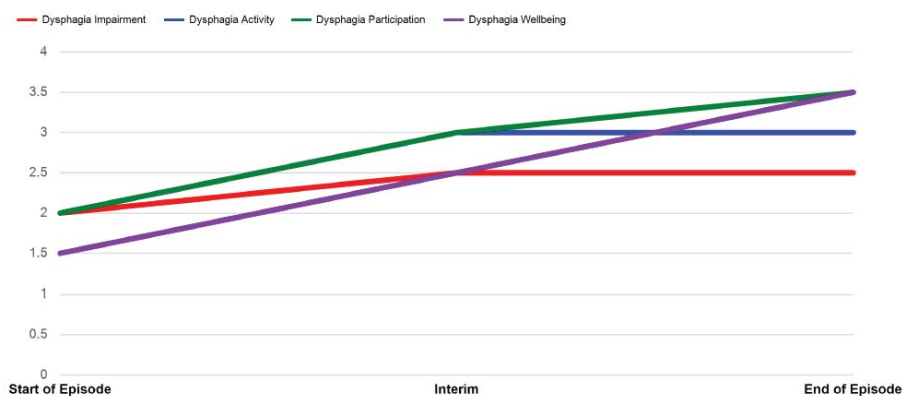
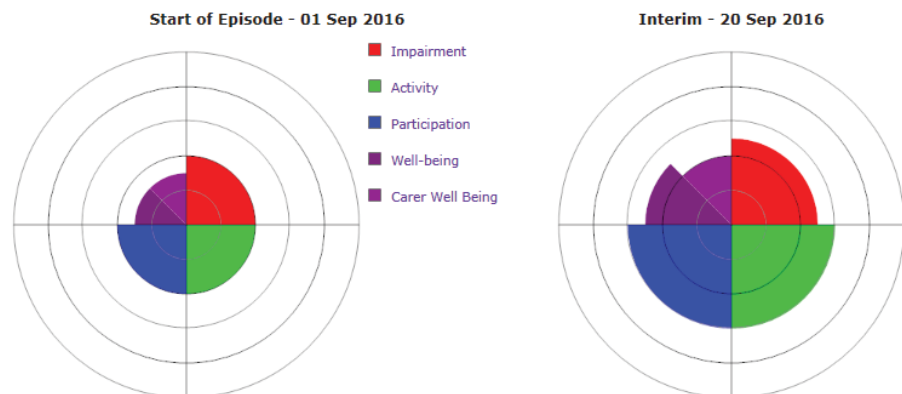


9



Individual service user

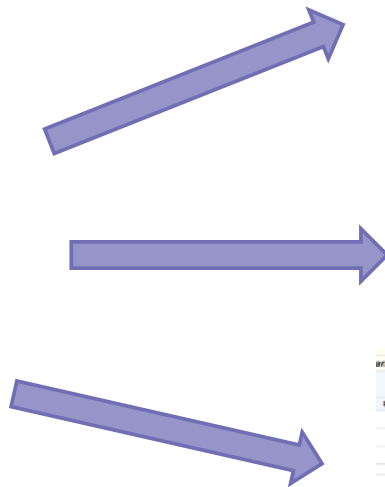
TOMs Scores Chart



10



Groups of service users



	Average Type													
All Toms Scales Episodes: (49) Patients: (49)	Mean	2.77	3.11	0.35	2.73	3.28	0.54	2.57	3.09	0.52	2.54	3.1	0.56	
	Median	3	3	0.5	3	3.5	0.5	2.5	3	0.5	3	3	0.5	
Cleft Lip or Palate Episodes: (8) Patients: (8)	Mean	2.94	3	0.06	3	3.25	0.25	2.69	3	0.31	2.81	2.88	0.06	
	Median	3	3	0.25	3	3.5	0.25	2.75	3	0.5	3	2.75	0	
Dysfluency Episodes: (12) Patients: (12)	Mean	3.15	3.5	0.35	3.1	3.4	0.3	2.5	2.95	0.45	2.55	2.95	0.4	
	Median	3.25	3.5	0.75	2.75	3.25	0.25	2.5	3	0.5	2.75	3	0.5	
Dysphagia Episodes: (23) Patients: (23)	Mean	2.33	2.72	0.39	2.33	3.04	0.72	2.2	2.93	0.74	2.12	3	0.87	
	Median	2.5	2.75	0.25	2.5	2.75	0.75	2	2.5	0.5	2.25	2.75	0.75	
Dysphonia Episodes: (8) Patients: (8)	Mean	3.83	4.17	0.33	3.75	4.08	0.33	4.17	4.08	-0.08	4.08	4	-0.08	
	Median	3.75	4	0.25	3.5	3.75	0.25	4	3.75	-0.25	4	3.75	-0.25	



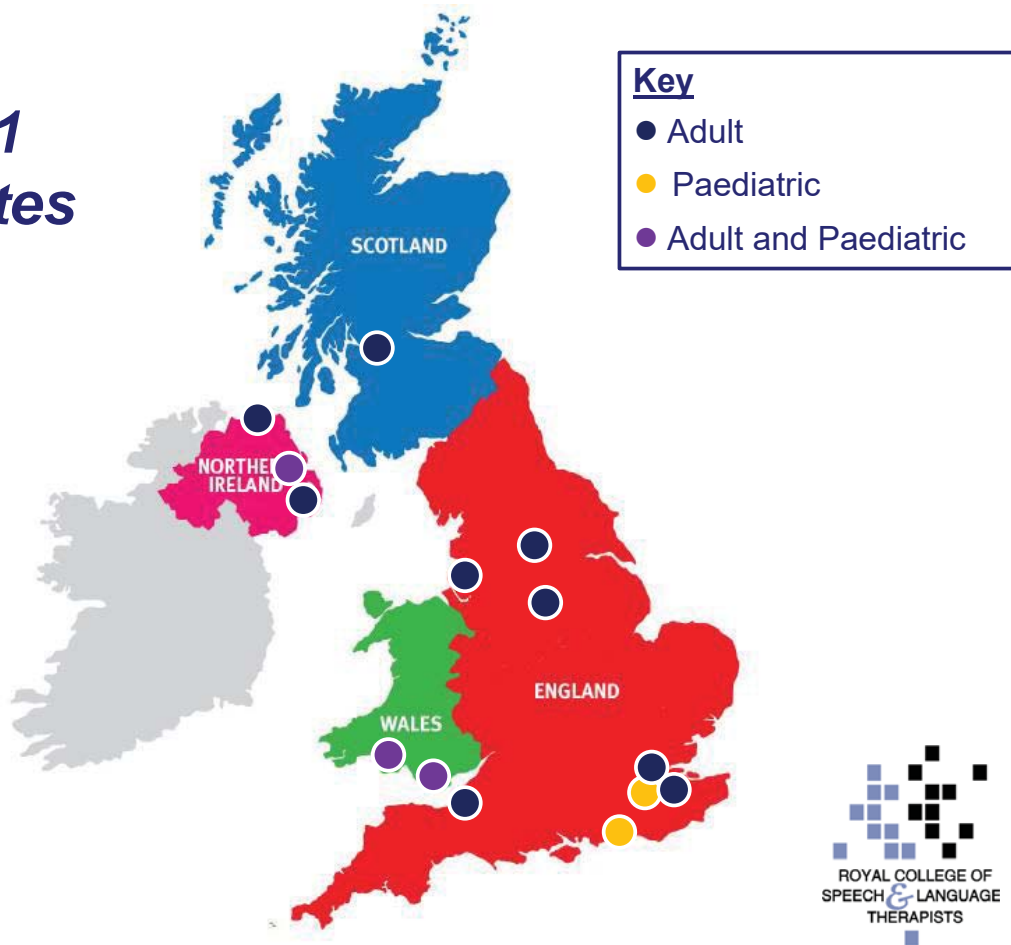
Developing and testing the RCSLT Online Outcome Tool

March 2015 – November 2016

- Developed ROOT prototype and completed initial testing
- Recruited speech and language therapy services to pilot the ROOT (see next slide)
 - Representation from across the UK
 - Range of clinical areas and settings
- First iteration of the ROOT piloted by six of the SLT services engaged in the pilot
- ROOT developed iteratively in response to members' feedback
- Initial evaluation completed



Phase 1 pilot sites



13

Extension to the proof of concept pilot

December 2016 – May 2017

- Further testing of the RCSLT Online Outcome Tool (ROOT) by the six pilot sites with prior experience of using it
- Initial testing by a further six pilot sites (including four of the original pilot sites and two additional SLT services)
- Developing key areas of ROOT functionality in response to member feedback
- Identifying approaches to support sustainability, scalability and roll-out

14

The RCSLT Board of Trustees' decision

May – July 2017

- Completion of final evaluation of the ROOT
- The RCSLT Board of Trustees approved a phased roll-out of the ROOT more widely across the profession
 - Initially working with 'early adopters' to develop and test the approach to roll-out
 - Further development of the ROOT to accommodate wider use
 - Developing a 'ROOT-ready' flowchart to guide members through the typical sequence of steps required to implement ROOT



15

10 June 2010 – 10 June 2018	Total
TOMs Scale	
Dysphagia	11082
Core Scale	2607
Dysphonia	1544
Dysarthria	1102
Aphasia/Dysphasia	620
Phonological Disorder	221
Child Language Impairment	188
Learning Disability – Communication	159
Dysfluency	99
Cognition	84
Autistic Spectrum Disorder	58
Hearing Therapy/ Aural Rehabilitation	48
Laryngectomy	44
Tracheostomy	42
Augmentative and Alternative Communication (AAC)	15
Challenging Behaviour and Forensic Mental Health	10
Head Injury	2
Dementia	1
Dietetic Intervention for Undernutrition: Paediatric	1
Dyspraxia – Developmental Coordination Difficulties	1
Total	17928

10 June 2010 – 10 June 2018

All Closed		Positive change in number of domains of TOMs				
TOMs scale	Episodes	None	One	Two	Three	Four
All Scales	17928	4241	2922	3504	2361	4900
		23.7%	16.3%	19.5%	13.2%	27.3%
Dysphagia	11082	3034	2116	2342	1233	2357
		27.4%	19.1%	21.1%	11.1%	21.3%



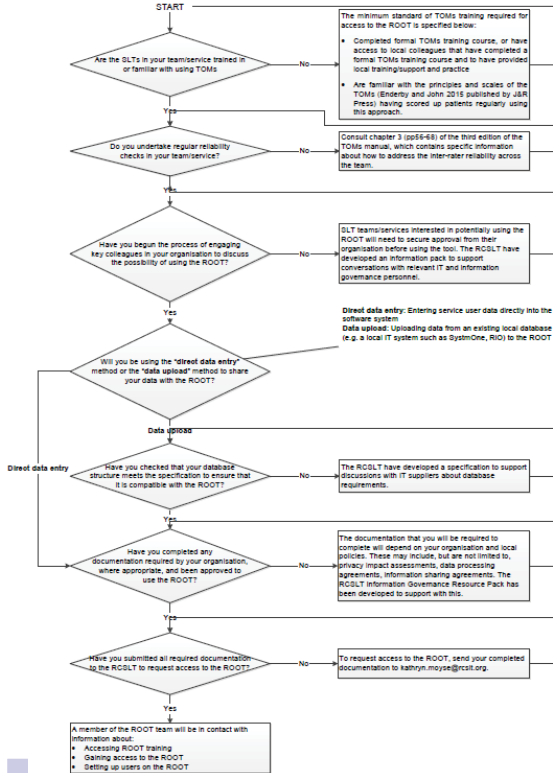
Where next?



Phased approach to implementation

DRAFT

Are you ROOT-ready?



Interested in getting involved?

- RCsLT are welcoming expressions of interest from members who are considering using the ROOT in their team/service
- For more information, including to receive the briefing pack and accompanying resources, members should contact ROOT@rcslt.org



What are the gaps?



21

Phase 2

- Initiated in December 2016 to run in parallel to Phase 1:
 - Framing TOMs as part of other resources available
 - Identifying the gaps and how these might be filled
- Developing approach to data collection in universal/targeted children's SLT services
- Supporting ALD leads network to develop approach to capturing impact of work conducted outside the referral process (e.g. environmental work)
- The Phase 2 workstreams link to a number of other RCSLT workstreams (e.g. Children's SLT Services Strategy, digital transformation)



For more information, please contact:
Kathryn Moyse
RCSLT Outcomes and Informatics Manager
kathryn.moyse@rcslt.org

https://www.rcslt.org/members/outcomes/RCSLT_outcomes_project

