

Implementing Change to Speech and Language Therapy Targeted Service

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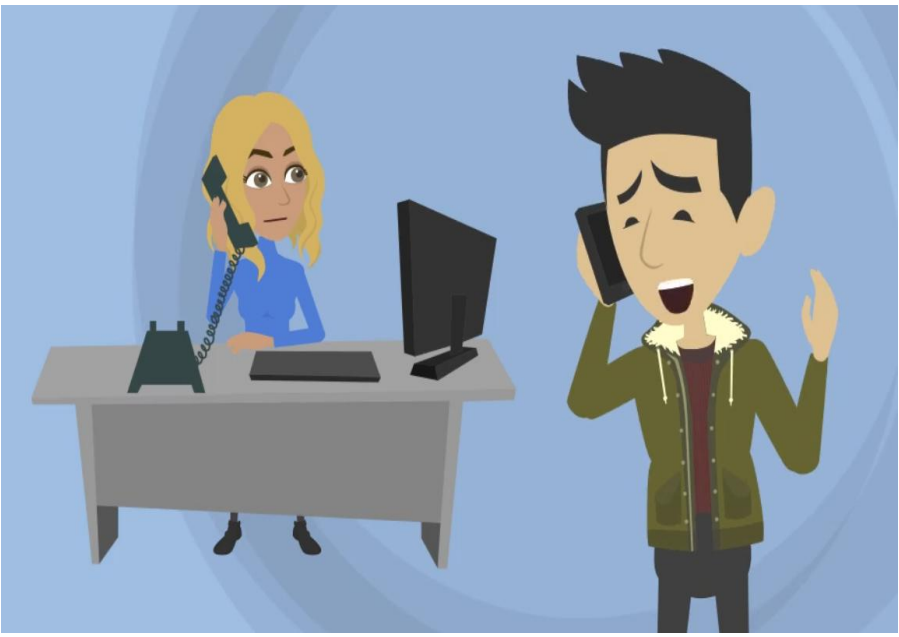
What did we do

We planned to develop a intervention within the Adults with Learning Disability Speech and Language Therapy service (ALD SLT) to offer an upstream and targeted population approach based on need rather than demand. We aimed to empower others to improve communication or eating and drinking outcomes and decrease health inequalities. Easy access to our service would be a key feature.

The service would be a multi-channel request for assistance advice line which gives learning disability speech and language therapy (SLT) advice, assistance or support in non urgent situations where the personal data of the person with a learning disability is not needed. This would enable people in need of brief SLT support to get it quickly.

- In April 2023, we engaged with
- Users of the current SLT service to seek their views on an advice line service.
 - Stakeholders
 - Other teams across NHS Scotland to hear about their experiences of service delivery models

We sought guidance from clinical governance and information governance to enable us to modernise our SLT service in line with local and national standards.



What happened

Our stakeholders told us they would welcome an SLT service in this new way for brief, non urgent SLT support. Survey responses from stakeholder needs analysis indicated that 94% of respondents feel they would benefit from an advice line support service to improve communication or eating and drinking.

- To implement this advice line we:
- Used image cards for stakeholder’s engagement, as we found this allowed people freedom to express what really mattered to them.
 - Created a short animation to advertise the advice line as we felt this would be more engaging.
 - Created a flyer for those people not accessing email and circulated this as widely as possible.
 - Created a spreadsheet to gather the essential information as was agreed after data information assessment process.
 - Devised our request for assistance form.
 - Completed a data protection assessment.
 - Created criteria to differentiate between request for assistance and a referral.
 - Created guidelines for SLT and admin staff that are responsible for the advice line.
 - Gathered personal stories of experiences of using the advice line.

Rationale

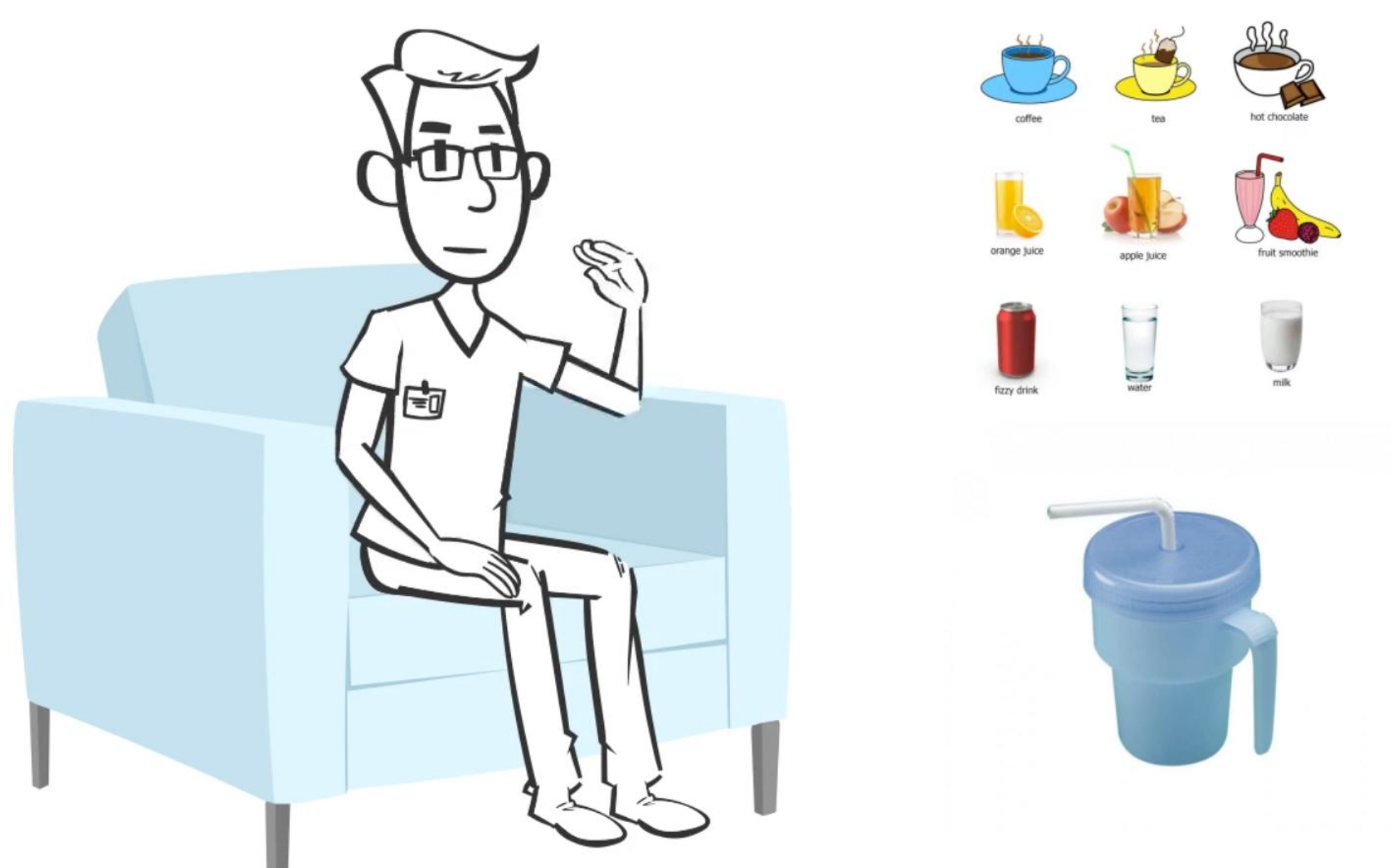
We are aware through our clinical experience, staff training and referrals analysis that there are many people with learning disabilities that have communication support needs and they may not be supported to reach their maximum communication potential. There are an estimated [1400 people with learning disabilities in NHS Forth Valley](#). People with learning disabilities [still experience health and wellbeing inequalities](#).

Most will [experience communication disadvantage](#) and will require communication support from family or a funded care provider. There are many thousands of carers supporting people with a learning disability in NHS Forth Valley and their competence in communication support is essential.

The current SLT service model reaches only a small proportion of this carer population meaning that adults with a learning disability (ALD) may not reach their full potential and may experience the negative health and wellbeing consequences of communication disadvantage.

We intended to make the SLT service more accessible with an advice line so that people could access SLT service for non urgent advice on team training needs, communication and/or eating and drinking support which would then benefit the adult with learning disabilities. The service would be able to meet more population needs and achieve targets related to reach and impact.

The advice line is now in place for anyone to seek assistance from speech and language therapy regarding communication approaches, eating /drinking or team training needs.



Conclusions and what next

We hope the SLT service will be able to meet more population needs and achieve targets related to reach and impact. We will assess the result of offering this service to determine whether there is a change to rate and type of referral. The number of referrals made to SLT may reduce as people gain the support they require from the advice line. However it may also mean that by contacting the advice line the number of referrals may increase as a carer/SLT may recognise that the person they support needs more in depth SLT input. The type of referral may also change with an increase in staff knowledge and skills about communication support. It is hoped that referrals may become more proactive/anticipatory as support staff are more aware of communication breakdown; why and when it occurs and can therefore act in a more preventative approach before a crisis point is reached. There will be an opportunity for enhanced level of screening/pre-referral discussion. We also hoped that as the advice line becomes more established the aim of empowering others to be responsible for non-specialist inclusive communication approaches will be enhanced.

The data gathered will be reviewed and considered in terms of impact, future planning and long term sustainability.



Reflections

Gaining information from other services and other health boards was very helpful in learning about the best way to set up this new approach to our service. It was also extremely helpful to obtain the views of our current service users, what changes they would like to see and their thoughts on accessing SLT service. We will endeavour to continue to do this. The careers fellowship has allowed the project leads to implement change to SLT service, whilst gaining many new skills and experiences along the way.

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NES AHP Careers Fellowship Scheme

Acknowledgment/references