Using Outcome Measures to Develop Your Practice

Sue Koziel- Lead SLT Preschool Services

Swansea Bay University Health Board

Swansea Bay

Port Talbot

Neath Waterfall Country

Marina

Gower

University Health Board (UHB)
(1st April 2019)

Local Authority Boundary

ISLE OF ANGLESEY

CONWY

FLINTSHIRE

BETSI CADWALADR
UNIVERSITY HEALTH BOARD

DENBIGHSHIRE

GWYNEDD

WREXHAM

POWYS
POWYS TEACHING
HEALTH BOARD

CEREDIGION

HYWEL DDA UNIVERSITY
HEALTH BOARD

PEMBROKESHIRE

CARMARTHENSHIRE

MERTHYR TYDFIL

BLAENAU GWENT

MONMOUTHSHIRE
TORFAEN

ANEURIN BEVAN
UHB

NEATH
PORT TALBOT

RHONDDA
CYNON
TAF

CAERPHILLY

SWANSEA BAY
UHB

SWANSEA

CWM TAF
MORGANNWG
UHB

NEWPORT

BRIDGEND

CARDIFF

CARDIFF AND
VALE UHB

VALE OF GLAMORGAN

© Crown copyright 2019
Cartographics • Welsh Government

April 2019

OGL

Therapy Outcome Measures:
Data Trends and Performance Measures

Therapy Outcome Measures Enderby and John (2015)

TOMs describe four dimensions using 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 independence

• Participation – the impact on levels of social engagement and autonomy

• Wellbeing - Impact on mental and emotional wellbeing

Each dimension is measured on an 11 point scales with six descriptors ranging from 0 (worse) to 5 (best)

0	0.5	1.0	1.5	2.0	2.5	3.0	3.5	4.0	4.5	5

First Step

Do TOMs !!

If not now when ?

Change will not come if we wait for some one else to do it.

Aim for excellent get very good
Aim for very good get ok

Data Collection

A new data collection sheet to be completed for every episode of care.   Updated March 2019

Therapist Name:_____

Patient/Client Identity (Hospital No.):_____

Care Spell Number : _____Episode of Care Number:_____

Employing Authority: Swansea Bay University Health Board

Profession: Speech and Language Therapy

PIMS Team/ Clinic Location: (circle as applicable)

PSCN/HI/Paeds Dysphagia/Pre School Community/School Age Community (SBS)/Lang units/LD-Special Schools /Dysfluency/Flying Start

NPT/SWA

Patient/Client Details

Date of Birth: _____ / _____ / _____   Carer:_____ (person rated)
              dd   mm   yyyy

Gender (M/F/O):_____

Aetiology Code 1:_____   Aetiology Code 2:_____

Impairment Code 1:_____   Impairment Code 2:_____

TOM Scale Used:_____   TOM Scale Used:_____

Ratings

Code *	Impairment		Activity		Social	Well-Being		Date
A/I/ F	Code 1	Code 2	Code 1	Code 2	Participation	Patient	Carer	Rated

*A = Admission to Therapy, First Rating; I = Intermediate Ratings (only to be used if there is a change within the episode of care); F = Final Rating

Number of Contacts:_____   Indirect Time:_____mins

End of Treatment Code:_____   Direct Time:_____mins

Primary person delivering intervention: SLT / SLTA / TA / Parent or Carer / Generic Technician *
* circle/delete as applicable
Comments:_____

Next Step

Do TOMs Reliably!!

- Clinical Team meetings- inter rater reliability

- TOMS trainers monitoring trends and considering training needs

	Nov 2016 - Feb 2017	March 2017 – June 2017
Average	78%	89%
Range	20%-100%	70%-100%

What can we do?

Analyse by aetiology

Analyse by impairment

Analyse by severity

Determine change and distribution of change (i.e. Where are we making what difference)

Current filter options…

		Age Range Low:	0
Age Range High:	150	**Gender**	All
Toms Scale	Core Scale (25), Augmentative and Al▾	**Medical Diagnosis**	Unknown (6), (K20) Oesophagitis (20)
Interims	With or without interims	**Matched:**	All Data
Impairment Score Low:	0.0	**Impairment End**	5.0
Medical Diagnosis Comorbidity:	Include All	**Medical Diagnosis Progressive:**	Include All
SLT Diagnosis:	Unknown (1094)	**SLT Diagnosis comobidity:**	Include All
SLT Diagnosis Progressive:	Include All	**Start of reporting period:**	28/06/2016
End of reporting period:	28/06/2017		

Supporting Clinical Decision Making

Child J: Language Unit

Date	I	A	P	W CH	W C
24.04.17	3	3.5	4	3.5	2
17.07.17	3	3.5	3.5	3	2
			-0.5	-0.5	

Child L: Community Clinic

Therapy Progress - L

- Ep 1 - 420 mins 8 contacts
- Ep 2 - 520 mins 8 contacts
- Ep 3 - 960 mins 14 contacts
- Ep 4 - 630 mins 10 contacts

(Categories: Change in Impairment, Change in Activity, Change in Participation, Change in Wellbeing, Change in Carer Wellbeing)
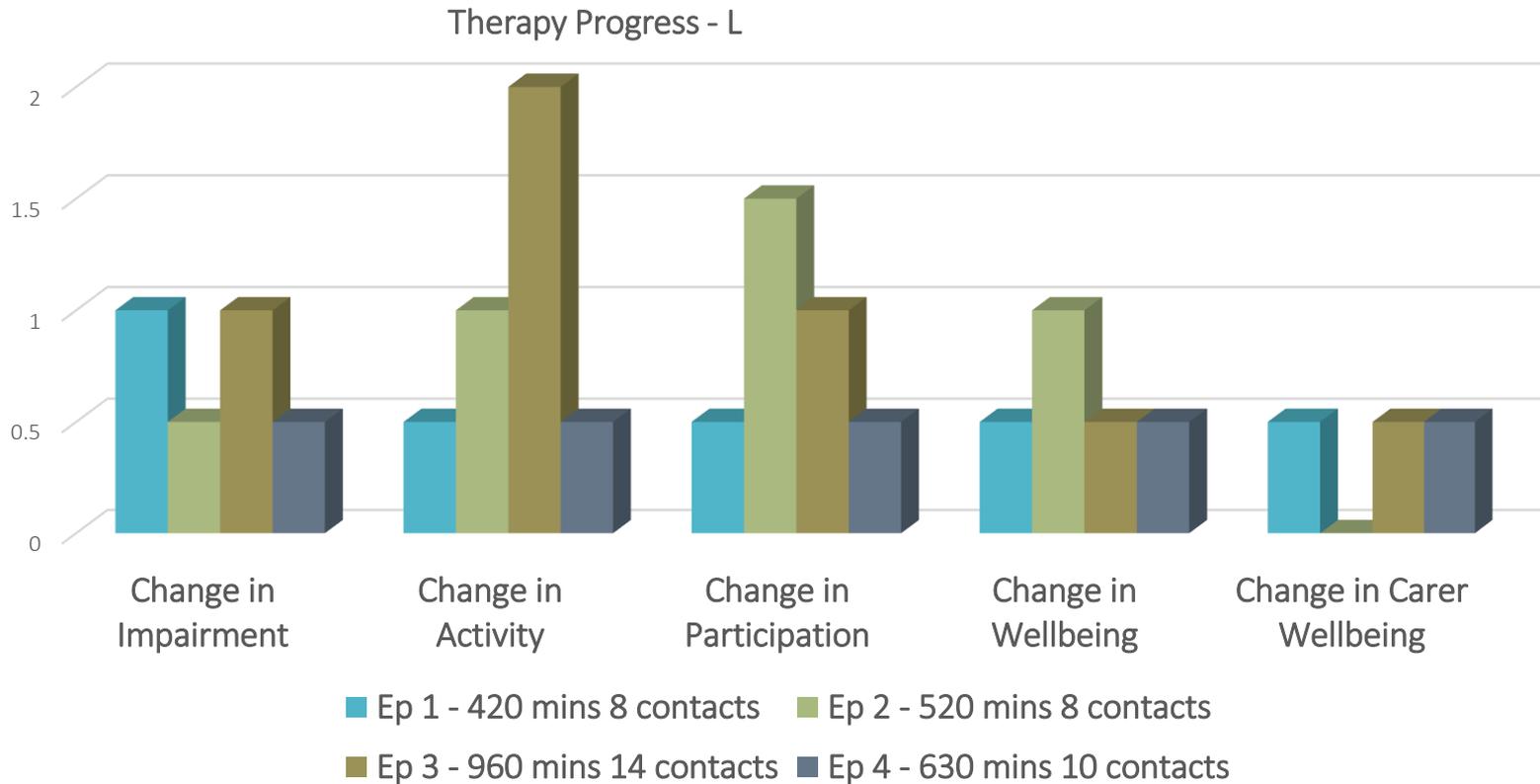
Child R: Mainstream Class with Statement of Educational Needs

Therapy Progress - R

Legend:
- Ep 1 - 2325 mins 31 contacts
- Ep 2 - 2235 mins 29 contacts
- Ep 3 - 3675 mins 42 contacts
- Ep 4 - 1500 mins 20 contacts
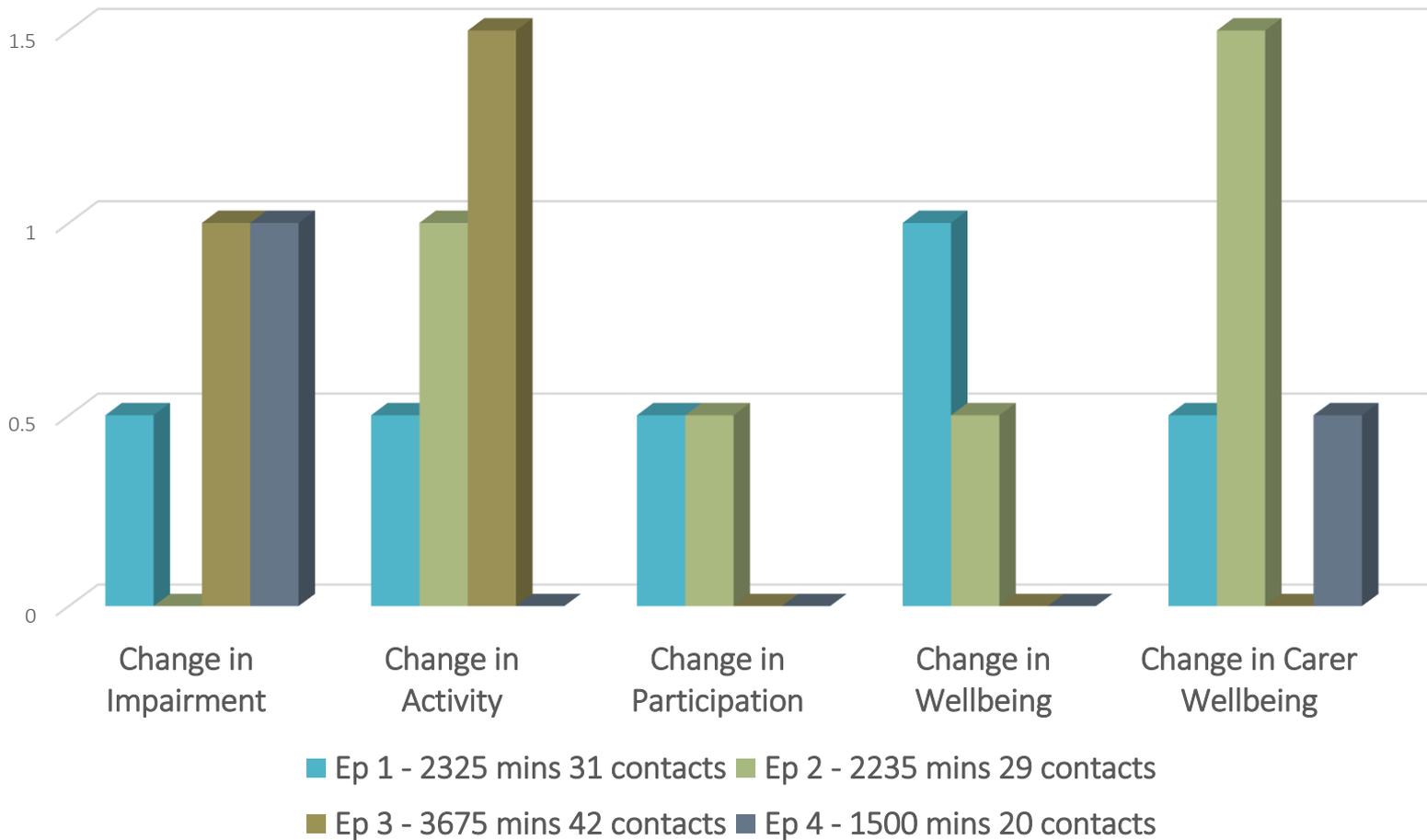
Dysphagia

Report Date Range: Between - Thursday, April 26, 2018 and Friday, April 26, 2019

Key: Down, Same, Up

Abertawe Bro Morgannwg University Health Board	Impairment (E =13)	Activity (E = 13)	Participation (E = 13)	Wellbeing (E = 12)	Carer Wellbeing (E = 13)

Quarter 1 July Between - Thursday, April 26, 2018 and Thursday, July 26, 2018 **Episodes:** (13) **Patients:** (13)

- Impairment: 23.1%, 0%, 76.9%
- Activity: 23.1%, 0%, 76.9%
- Participation: 7.7%, 0%, 92.3%
- Wellbeing: 16.7%, 0%, 83.3%
- Carer Wellbeing: 84.6%, 0%, 15.4%
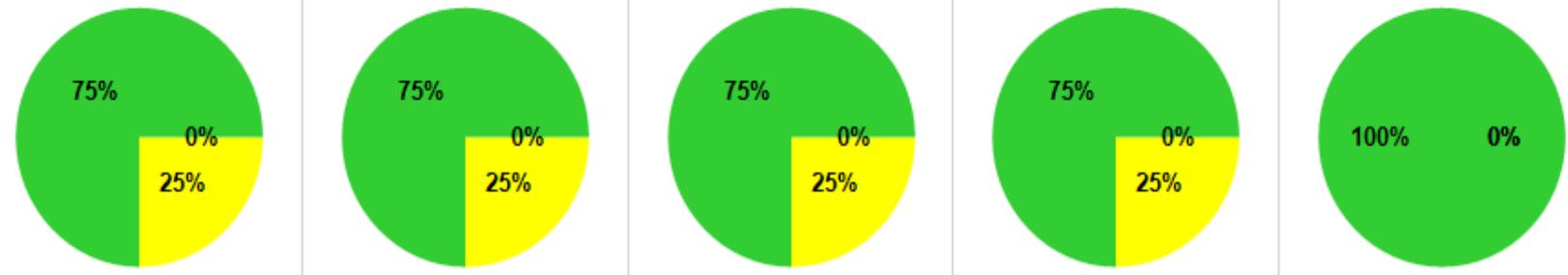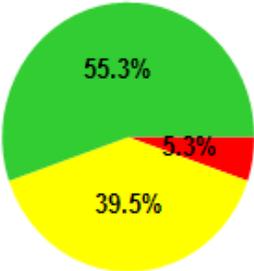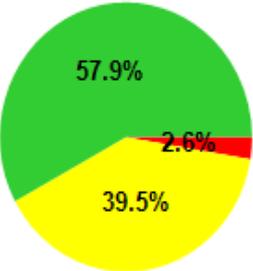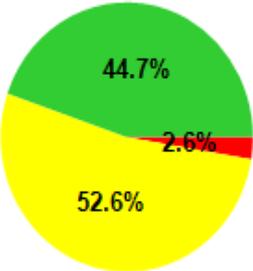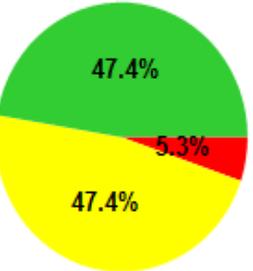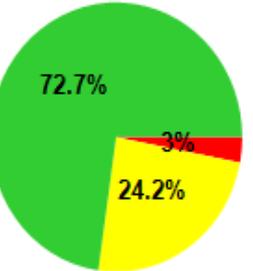
Quarter 2 October Between - Thursday, July 26, 2018 and Friday, October 26, 2018 **Episodes:** (7) **Patients:** (7)

- Impairment: 28.6%, 0%, 71.4%
- Activity: 42.9%, 0%, 57.1%
- Participation: 42.9%, 0%, 57.1%
- Wellbeing: 16.7%, 0%, 83.3%
- Carer Wellbeing: 85.7%, 0%, 14.3%

Dysfluency

Specific Speech Disorder
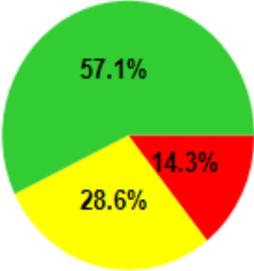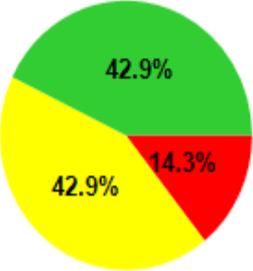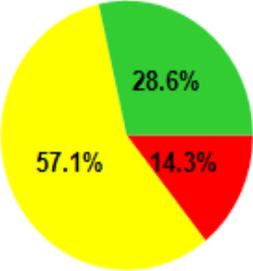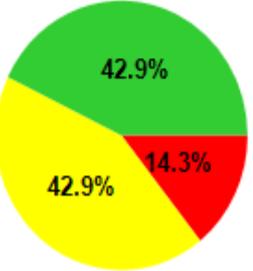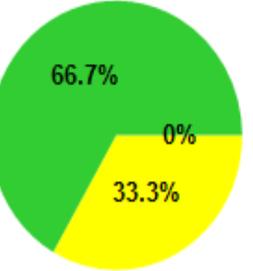
Influencing Service Change

# Parkinson's Disease Groups   Mild Difficulties - Median Score 4
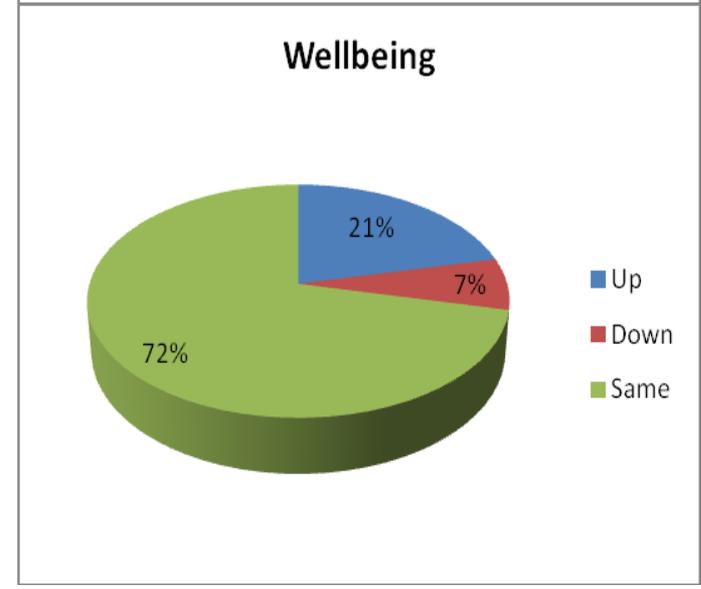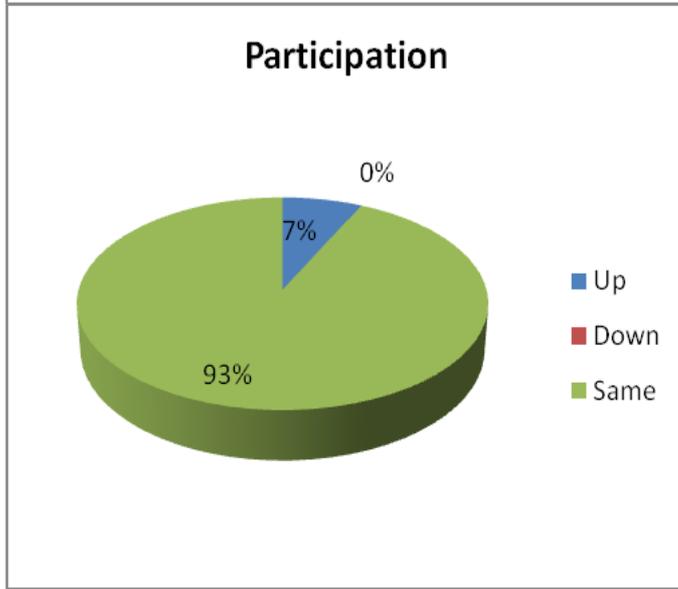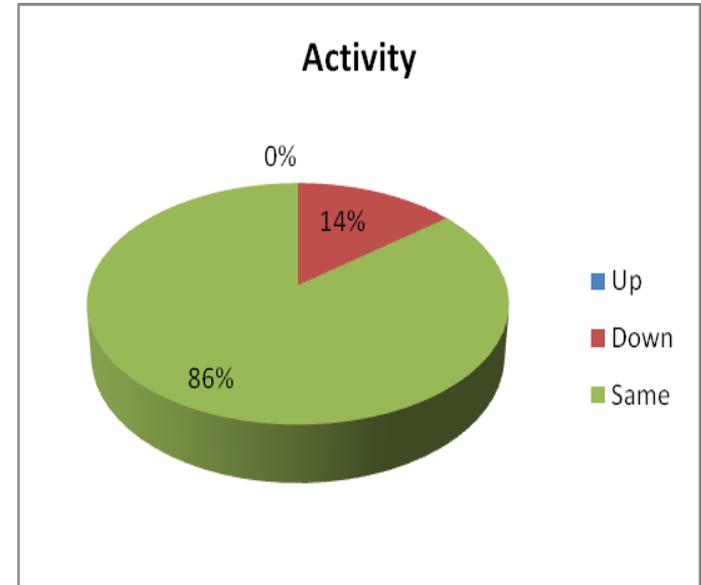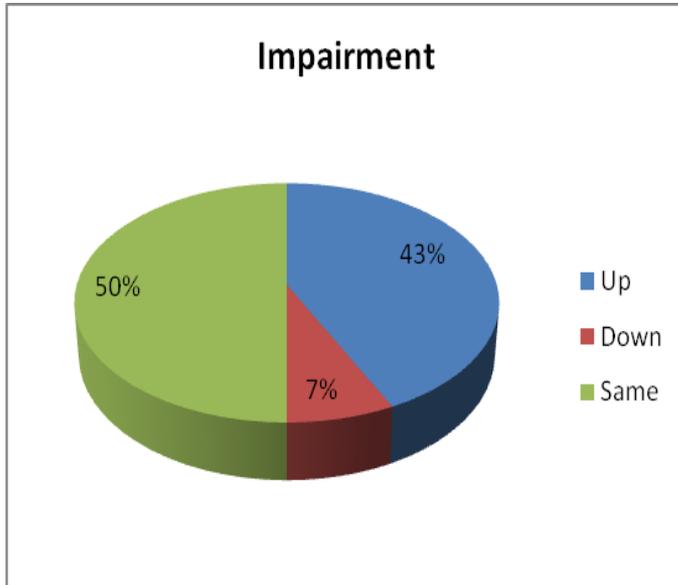
Outcomes – Mild Difficulties Group

Group started with median score of '4' (mild difficulties)across all parameters.

86% of patients either maintaining or improving their scores in all domains.

This can be seen as a significant improvement.

Advanced Difficulties - Median Score 3

Activity

- Up 75%
- Down 8%
- Same 17%

Participation

- Up 83%
- Down 0%
- Same 17%

Wellbeing

- Up 75%
- Down 0%
- Same 25%

Impairment

- Up 75%
- Down 0%
- Same 25%
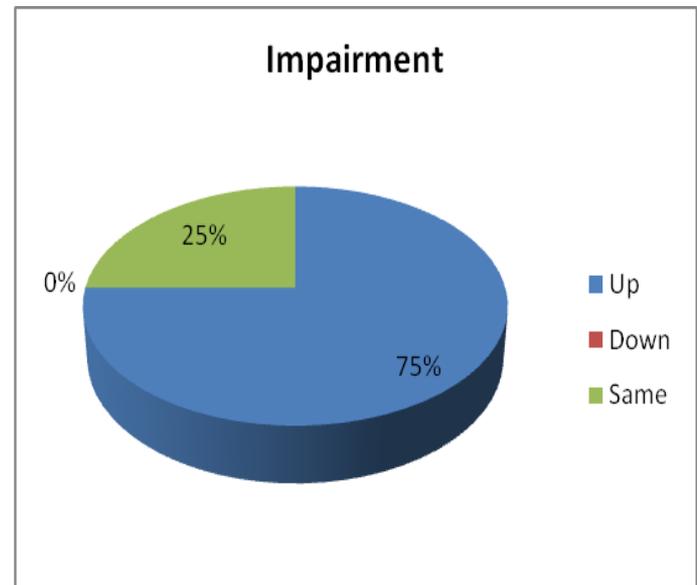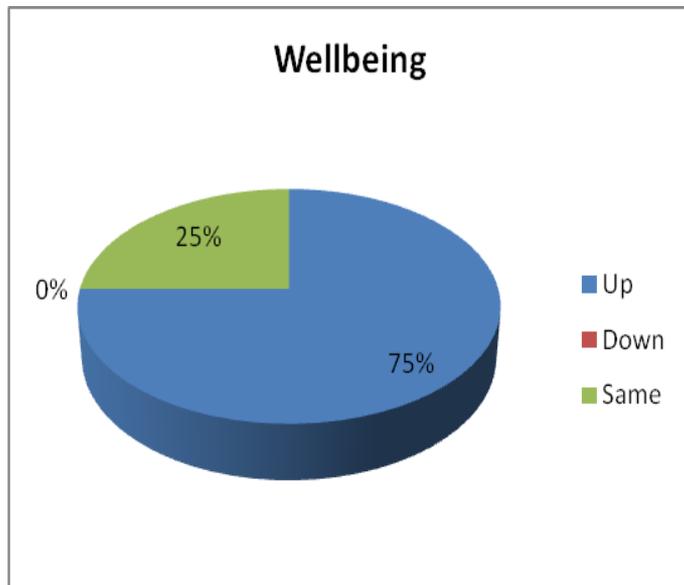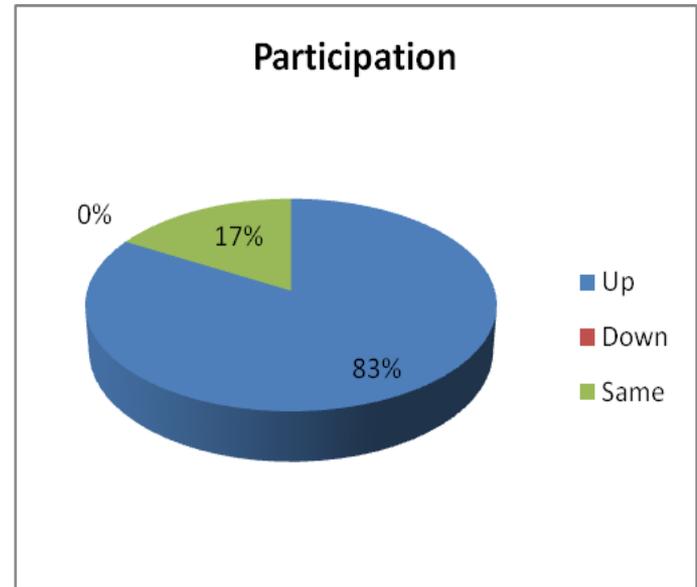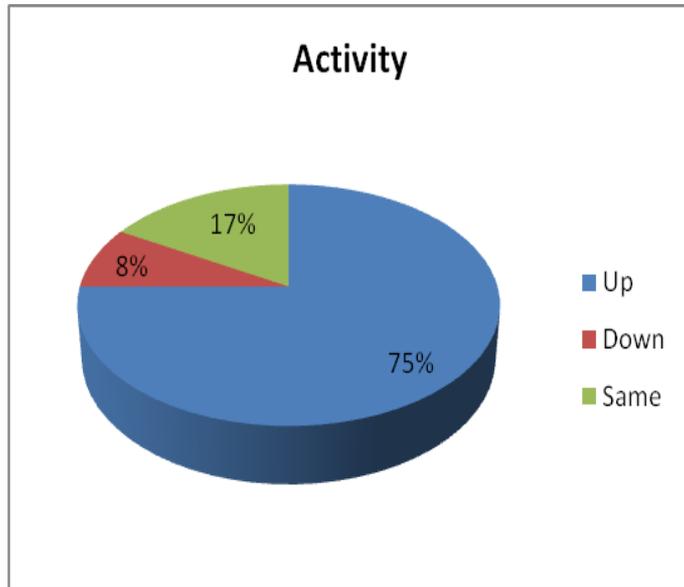
Outcomes Advanced Difficulties Group

Positive outcomes with either maintenance or improvement in all domains

SLT intervention was successful for this cohort as well as those with milder difficulties.

Preschool Service

Paper based triage of referrals leading to initial assessment

42% children attending for initial assessment closed after one contact.

Clinicians strongly felt assessment was still appropriate as Parents valued advice given and this had positive impact on their wellbeing.

Analysed 120 children attending Core SLT appointments who were closed after 1 contact

TOMs data supporting need for change:

Change within session
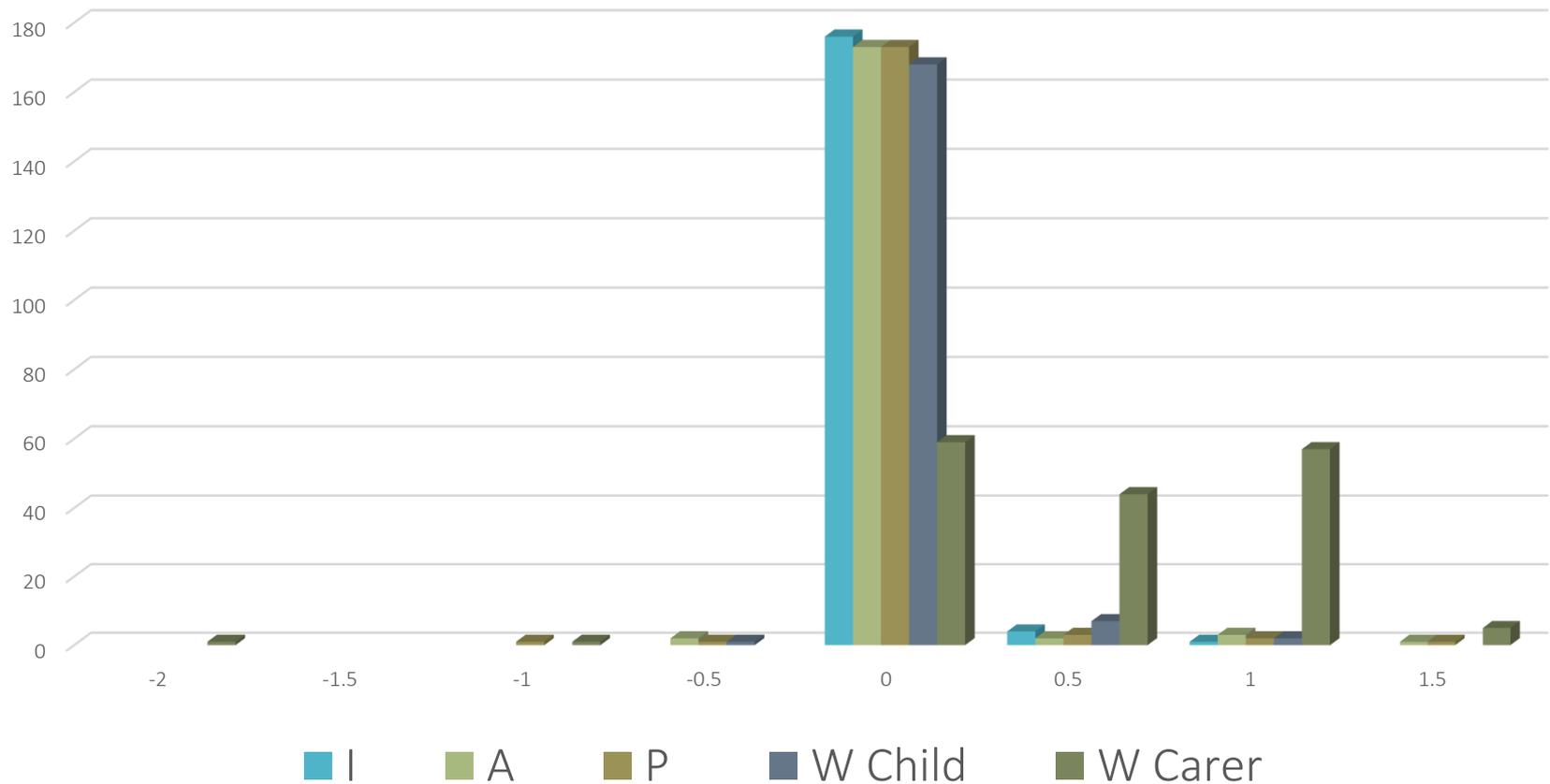
Example of Influencing funding

Patient J Complex Brain Injury

Therapy Progress - J
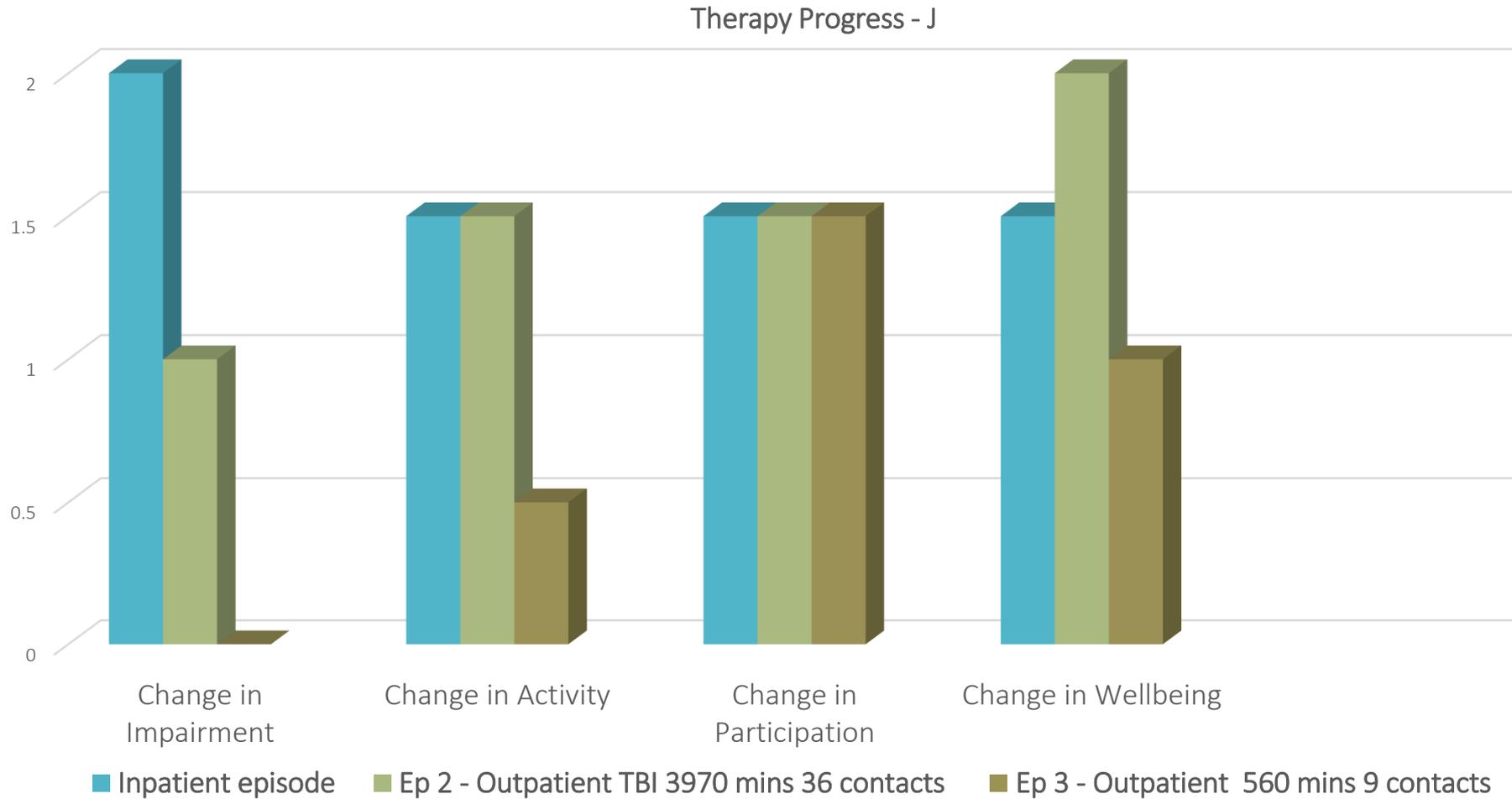
"the journey can be uphill, but you can always turn, admire the view and then carry on" (Koziel, 2017)