

Remote Speech and Language Therapy: patient perspectives in a secure autism unit

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Background

Speech and Language Therapy (SLT) is a fundamental treatment for patients with autism spectrum disorder (ASD) and plays a vital role in our secure service. SLT sessions are tailored to the individual communication needs of patients, but broadly focus on three main areas; social communication skills, relationship skills, and assessment of communication and language skills. SLT interventions which focus on the development of social skills have been shown to significantly improve non-verbal skills, conversation and assertiveness¹. This subsequently leads to improved quality of social interactions and relationships with others.

SLT's are hard to recruit across the UK and with the advent of Covid-19, innovative ways of dealing with this problem need to be established. Studies have shown that similar outcomes are found whether SLT was delivered in person or remotely^{2,3}. In the United-Kingdom, the Royal College of Speech & Language Therapists (RCSLT) has rapidly published guidance for the implementation of SLT telehealth clinics, advising therapists to ensure patient goals are re-discussed regularly and actively seek feedback⁴.

Method

Seven patients underwent six weeks of remote SLT therapy with the same therapist as their previous face-to-face sessions. Microsoft Teams was the platform used. Due to internet access restrictions, it was decided that sessions would be undertaken on a trust computer, and supervised by a member of nursing staff.

Results

A questionnaire was designed and distributed to our seven patients with a Likert scale and also space for free text feedback. All seven patients undergoing SLT therapy were keen to complete the questionnaire.

Average Likert scores are reported below regarding use of MS teams for SLT.

1 = Strongly agree 5 = Strongly disagree

I could get my point across	1.43
The audio / video quality was good	1.29
I didn't get frustrated or annoyed	1.29
I do not miss face-to-face sessions	4.14
I would recommend to a friend	2.00

Free-text feedback

"I miss collecting all the paperwork after the sessions"

"Dislike other staff being there"

"I like it because I enjoy using computers"

Our therapist reported *"patients have commented that it's more interesting as it involves screen sharing, animation and videos"* and *"some patients are engaging in sessions longer than they used to. One patient used to leave after 10 minutes but he is often staying for 30 minutes now"*

Discussion

Feedback suggests using technology as an interface can be equally as effective as face-to-face therapy for some individuals. A blended form of therapy including both face to face and virtual sessions, may actually encourage improved interaction with some ASD patients, who struggle with social skills. The use of technology enables the development of more interactive tools, further enhancing the SLT's tool-kit, resulting in improved patient experience.

While the virtual sessions were positively received, they did not appear to quench the need for basic face to face human interaction as most patients reported still missing their non-virtual sessions.

We hope that if this method of delivering therapy continues to be accepted by staff and patients, scope for different therapies to be undertaken virtually could be considered. There are obvious cost benefits such as reduced travel costs and part time employment. With a push for further remote working, it is likely that a broader range of remote therapists will become available to employ in the future.

References

1. Kelly A. Developing social skills. Tizard Learning Disability Review. 2017;22(3):159-163.
2. Grogan-Johnson S, Alvares R, Rowan L, Creaghead N. A pilot study comparing the effectiveness of speech language therapy provided by telemedicine with conventional on-site therapy. Journal of Telemedicine and Telecare. 2010;16(3):134-139.
3. Dimer NA, Canto-Soares ND, Santos-Teixeira LD, Goulart BNG. The COVID-19 pandemic and the implementation of telehealth in speech-language and hearing therapy for patients at home: an experience report. Cogas. 2020 Jun 22;32(3):e20200144.
4. Royal College of Speech & Language Therapy. COVID-19 Telehealth Guidance [Internet]. 2020. Available from: <https://www.rcslt.org/members/delivering-quality-services/telehealth/telehealth-guidance#section-1>