

“Analysis of the effect of changes to Speech Pathology service delivery methods on stroke client’s outcomes using AusTOMs: exploring the challenges”

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Background: The Stroke Detours Program (SDP) provides early supported discharges for stroke clients by delivering an intensive, interdisciplinary, home based rehabilitation service. Initial funding for Speech Pathology was 0.4EFT. This was increased to 0.8EFT, as well as employing an Allied Health Assistant (AHA) at 0.6EFT working across disciplines.

Aim: To compare the effect of increasing Speech Pathology and introducing AHA hours on client’s Speech Pathology outcomes during their SDP admission.

Method: AusTOMs were recorded for clients on admission and discharge pre and post change of Speech Pathology and AHA hours. The number of Speech Pathology and AHA sessions per client and the number of referrals required post discharge were recorded. This data was then analysed.

Results: There were 62 participants in total (21 pre-change). Results showed the post-change group had more sessions ($p=0.008$) and a greater number of impairments ($p<0.001$) than the pre-change group. Within the speech impairment domain of both groups, those with the greatest number of impairments made the greatest improvements ($p=0.003$). In the majority of domains, the groups made similar progress ($p>0.05$) despite the disparity in number of impairments.

Discussion: This has been the first use of AusTOMs in their entirety to measure outcomes in stroke clients from a change of service delivery. Whilst participant numbers were small, more complex Speech Pathology clients were admitted to the service post-change. The two groups were non-homogenous and therefore difficult to compare. This presentation will explore the challenges in using AusTOMs to analyse client outcomes based on service delivery models.