

RCSLT Online Outcome Tool (ROOT) Briefing Pack

1.0 Executive summary

- 1.1. The RCSLT Online Outcome Tool (ROOT) has been developed to support speech and language therapy (SLT) services to record and report outcomes data, to assist with demonstrating the impact of intervention for individuals with speech, language, communication and/or swallowing needs (Sections 2.0 and 3.0).
- 1.2. The RCSLT is using a phased approach to rolling out the ROOT to the wider profession. SLT services interested in using the ROOT should register at: <https://rcslt-root.org/public/register>

2.0 Background

- 2.1. The Royal College of Speech and Language Therapists (RCSLT) is working to support its members to improve the collection of outcomes data to assist with demonstrating the impact of speech and language therapy for individuals with speech, language, communication and swallowing needs.
- 2.2. Therapy Outcome Measures (TOMs) (Enderby and John, 2015; 2019) was selected as the 'best fit' against a set of criteria developed to identify an existing outcome measurement tool to enable comparable, valid and reliable data to be gathered from across the speech and language therapy profession (Annex 1). An online tool has been developed to collect and collate TOMs data and generate aggregated data reports. The reports generated by the RCSLT Online Outcome Tool (ROOT) can be utilised by speech and language therapists (SLTs) to inform clinical decision making and offer the potential to demonstrate the impact of SLT interventions for individual service users and cohorts of service users. The reports can be used to assist with service evaluation and quality assurances purposes, and to inform those funding speech and language therapy services.
- 2.3. Following a successful pilot, the RCSLT Board of Trustees approved a phased roll-out of the ROOT to the wider profession (Annex 1). This briefing pack has been developed to provide information about the ROOT to speech and language therapy teams and services interested in using the ROOT.

3.0 Overview of the RCSLT Online Outcome Tool (ROOT)

3.1. The RCSLT Online Outcome Tool (ROOT) is a stand-alone online tool that has been developed to collect and report on outcomes data. SLTs, teams and services can enter TOMs data for service users directly to the ROOT, or alternatively, data held in existing electronic system can be uploaded and incorporated (Figure 1).

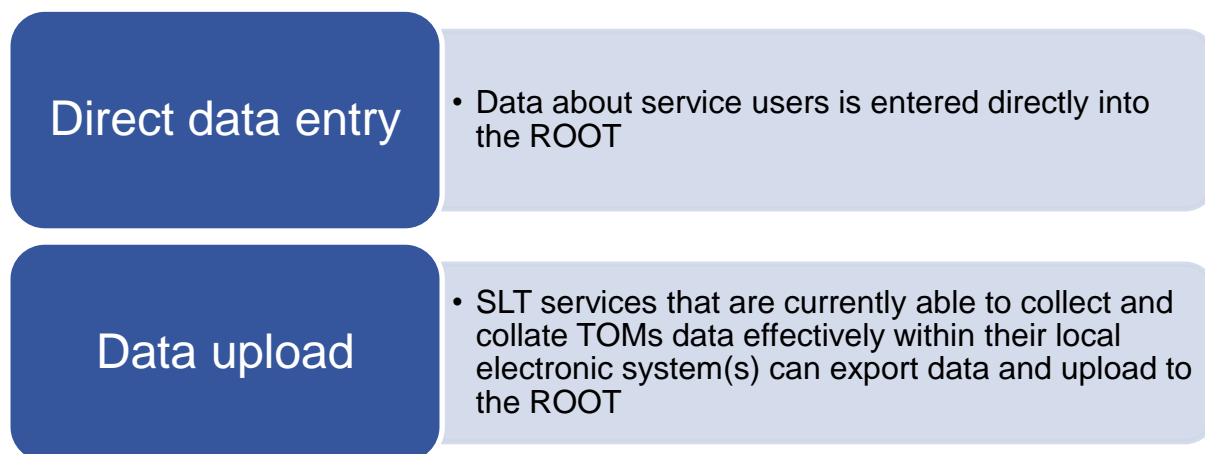


Figure 1: ROOT data collection methods

3.2. The ROOT collects data about the individual's age, gender, diagnoses and TOMs ratings at different points in time. Clinicians can use the tool to record and monitor outcomes for individual service users and access reports that show change over time in association with SLT interventions (Annex 2).

3.3. The ROOT also aggregates data collected across a SLT team/service and generates reports (Annex 3). These can be used by service managers and leaders to evaluate the outcomes delivered and support them with monitoring outcomes for specific clinical groups and evidencing the impact of SLT. Filters can be applied to the reports to drill down to specific clinical groups at the required level for data analysis and reporting. SLT services using both methods of data collection will have access to aggregated data reports about the outcomes delivered by their service.

4.0 Signing up to use the RCSLT Online Outcome Tool (ROOT)

4.1. During the pilot, 12 SLT teams/services tested the ROOT and contributed to its development. The RCSLT is rolling out the ROOT using a phased approach. Members who are interested are encouraged to register at: <https://rslt-root.org/public/register>

4.2. ROOT ready flowchart

- 4.2.1. The [ROOT-ready flowchart](#) has been developed to guide members through the typical sequence of steps involved in implementation, but the time required to implement the ROOT in your team/service will depend on a number of factors.
- 4.2.2. After completing the initial stage of the [online registration process](#), members will be asked to fill in their progress with the steps in the ROOT ready flowchart, and update this over time.
- 4.2.3. The ROOT is available to speech and language therapists as part of their membership of the RCSLT.

4.3. Supporting resources

- 4.3.1. Support will be provided to SLT services that are selected to implement the ROOT. Resources include:
 - Information governance resource pack
 - Data specification for teams/services using the data upload method to ensure database compatibility with the ROOT
 - ROOT Training resourcesThese are available at: <https://rcslt-root.org/Content/getting-ready-to-use-the-root>
- 4.3.2. For more information, please contact ROOT@rcslt.org

5.0 References

Enderby P, John A. *Therapy outcome measures for rehabilitation professionals*, Third Edition. Guildford: J&R Press Ltd; 2015.

Enderby P, John A. *Therapy Outcome Measure User Guide*. Croydon: J & R Press Ltd; 2019.

Annex 1: The RCSLT Outcomes Programme and Proof of Concept Pilot

In 2013, RCSLT members devised a list of criteria to identify an existing outcome measurement tool to enable comparable, valid and reliable data to be gathered from across the profession. Over 60 outcome measures, frameworks and systems commonly used by speech and language therapists (SLTs) were appraised against this set of criteria. *Therapy Outcome Measures for Rehabilitation Professionals* (Enderby, John and Petheram 2006)¹ was selected as the 'best fit'.

TOMs scales address 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

Additionally, TOMs looks at the individual's well-being and the carer's well-being where appropriate. Each dimension is rated by the therapist (preferably in consultation with the individual and /or family) on an 11-point ordinal scale with six defined descriptors, ranging from 0 (worst case scenario), to 5 (best possible presentation).

The adoption of TOMs by the speech and language therapy profession was acknowledged to be an 'opt-in' process, enabling members to monitor local performance as well as contributing to a national dataset that could potentially be used for benchmarking and promoting the role and the impact of the profession.

In 2015, the RCSLT Board of Trustees approved the development of a proof of concept online tool to support collection of TOMs data. The RCSLT Online Outcome Tool was developed using feedback from RCSLT members using an approach known as Agile, in which the software is developed in stages gathering feedback from users in services and using it to shape the next iteration of the development.

Twelve SLT teams/services from across the UK piloted the ROOT. Following an evaluation of the pilot, the RCSLT Board of Trustees approved a phased roll-out of the use of the ROOT more widely across the profession in July 2017.

More information about the ROOT is available on the RCSLT webpages: <https://www.rcslt.org/speech-and-language-therapy/guidance-for-delivering-slt-services/outcome-measurement/outcome-tool-overview>

References

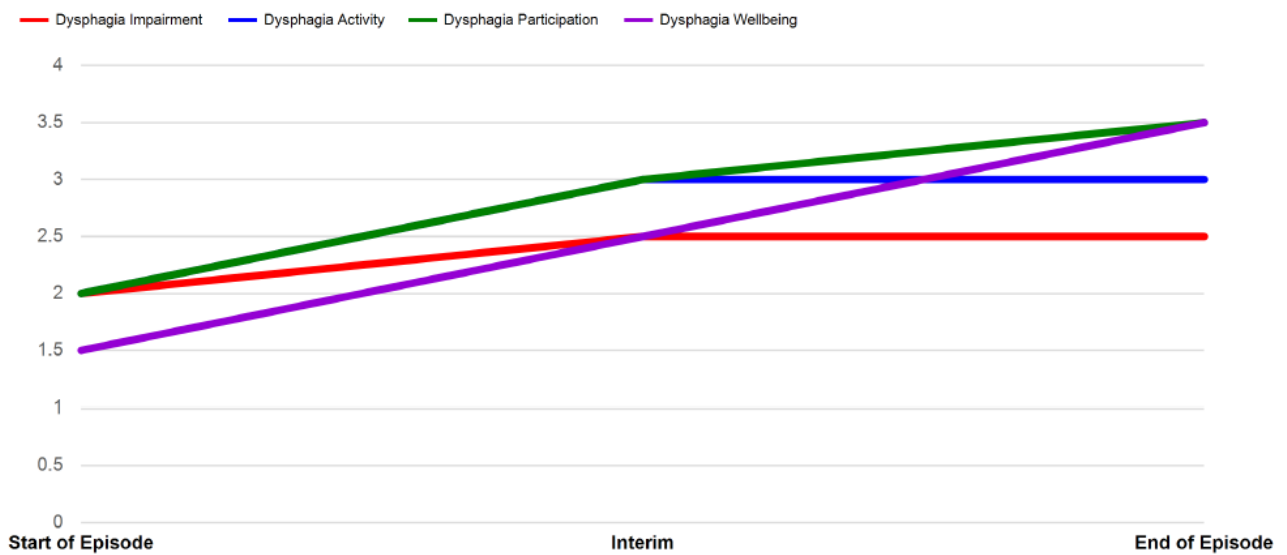
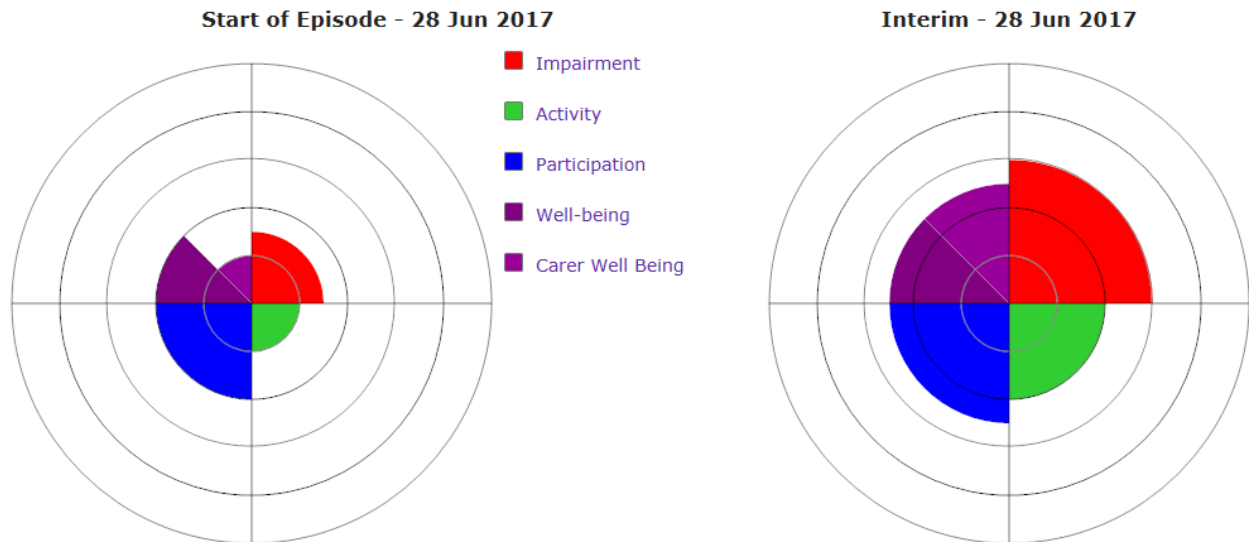
Enderby P, John A, Petheram B. *Therapy outcome measures for rehabilitation professionals*, Second edition. London: Wiley 2006

¹ Third edition and User Guide now available:

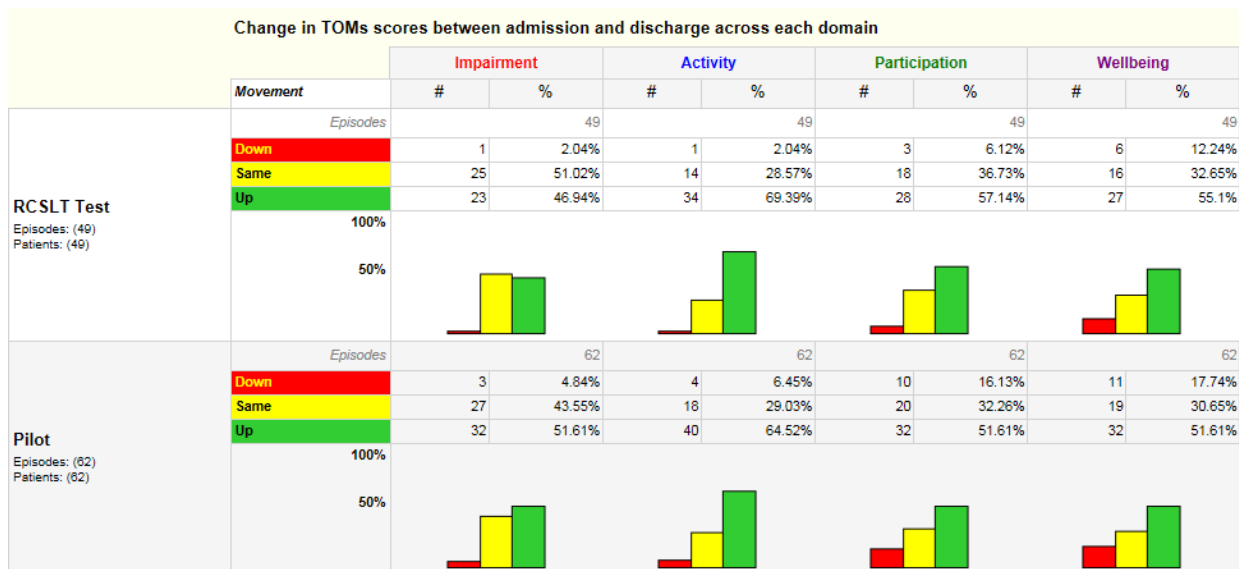
- Enderby P, John A. *Therapy outcome measures for rehabilitation professionals*, Third Edition. Guildford: J&R Press Ltd; 2015.
- Enderby P, John A. *Therapy Outcome Measure User Guide*. Croydon: J & R Press Ltd; 2019.

Annex 2: Sample reports generated by the ROOT showing individual service users' outcomes over time

TOMs Scores Chart



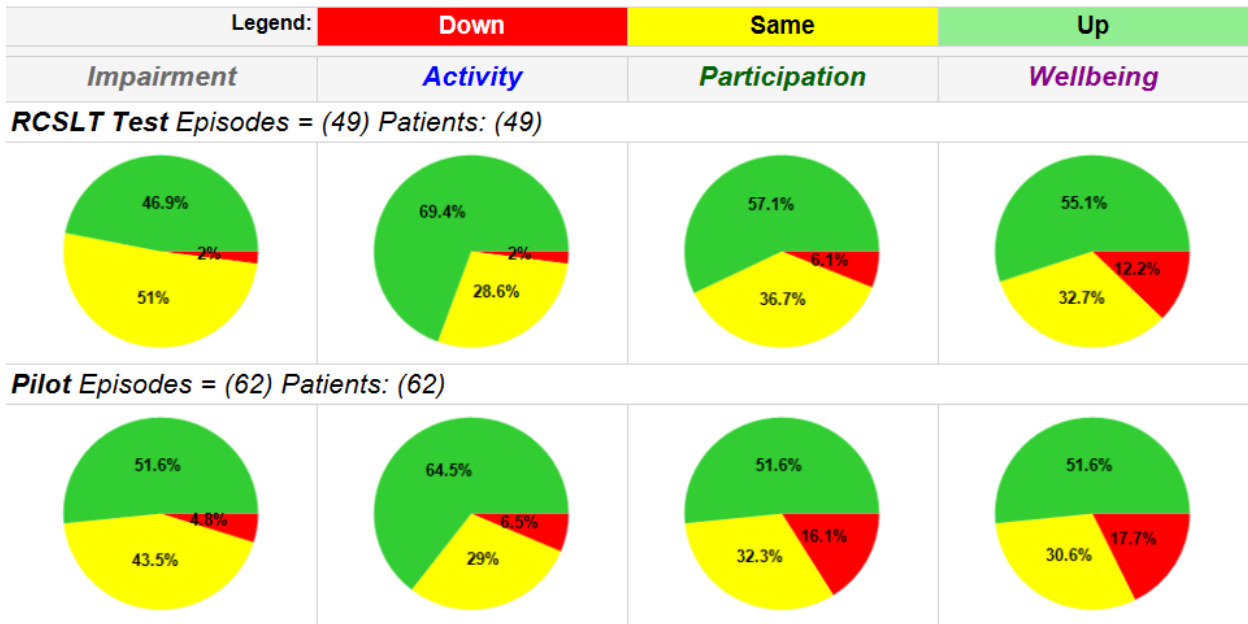
Annex 3: Aggregated reports on service users' outcomes generated by the ROOT



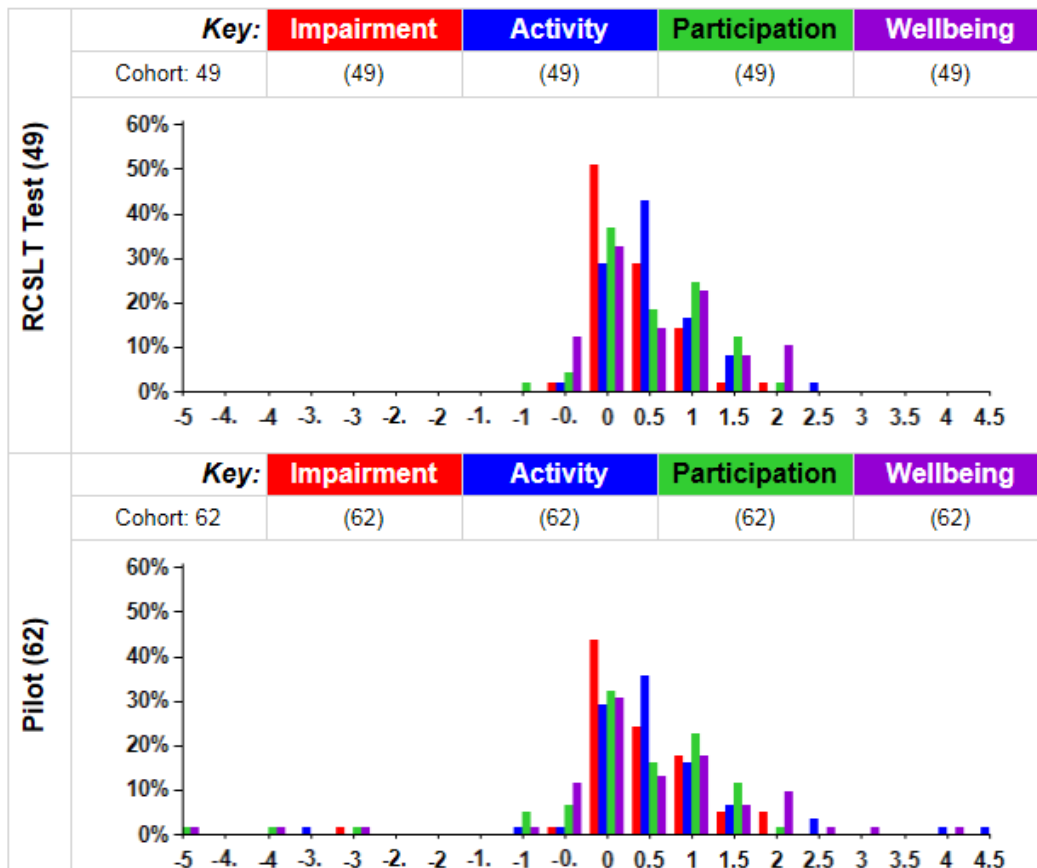
Sample report 1: Change in TOMs scores between initial and final ratings across each domain

RCSLT Test	Average Type	Impairment			Activity			Participation			Wellbeing		
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: (10) Patients: (10)	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	2.13	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

Sample report 2: Average change in TOMs scores between initial and final rating across each domain



Sample report 3: Change in TOMs scores between initial and final ratings across each domain



Sample report 4: Distribution of change in TOMs scores between initial and final rating across each domain