Move towards a hybrid way of working in cleft speech and language therapy

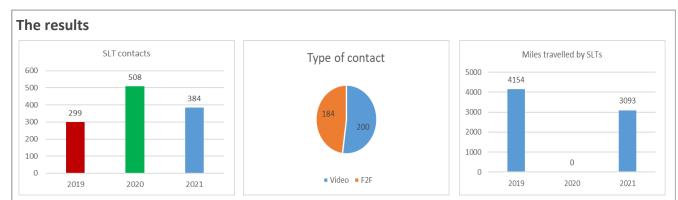
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Context and background

- The Northern & Yorkshire Cleft Lip & Palate service covers the whole of the north of England.
- Babies born with cleft palate are at high risk of speech problems.
- COVID-19 pandemic changed the way we interacted with our patients. Overnight we moved from seeing all patients face-to-face often in their homes or at school to seeing them all using video consultations.
- Evaluation showed parents felt comfortable using video consultation. It worked well for some appointments, but not all. We plan to begin working in a hybrid manner once we commence face-to-face clinics.

The project

Data from patient contacts on E-record was collected for the period 1/4/21 to 31/7/21 to allow comparison with the initial project in 2020 (lockdown) and in 2019 (pre-COVID working). Numbers of video and face-to-face contacts were compared. Data on miles travelled in all the periods above was gathered from Sel-Expenses and the amount of carbon emission in kgCO2e estimated.



An extra 100 patient contacts in a four-month period were made compared to pre-COVID working. Over 1000 fewer miles were travelled.

Conclusions

Hybrid working saves travel, which in turn helps reduce our carbon footprint. Annually we estimate that hybrid working will save 878 kgCO₂e. This is equivalent to a return flight from the UK to New York or four flights to Europe.

Hybrid working also allows us to see more patients. Annually we estimate that cleft SLTs will be able to see over 300 more patients per year, an increase of over 33%.

Next steps

- To discuss further ways of reducing travel with SLT colleagues and ensure contact methods continue to match patient and SLT needs
- Complete project evaluating speech assessment virtually versus face-to-face
- Evaluate the changes to the cleft MDT in terms of patient numbers seen and travel
- Investigate use of electric pool cars further

