

Time to Telepractice

Technology and health care

Telepractice is the use of technology to deliver health care. The technology used may vary from phone to internet, and the health care delivered from physiotherapy to intensive care. Speech Pathology has embraced telepractice, using this to deliver care to clients with voice disorders, speech and language delay, and even swallowing difficulty.

Stuttering and Telepractice

Arguably, within the speech pathology field, using telepractice to deliver stuttering treatments has been most extensively researched. Randomised controlled trials (or experiments) have been done using the Lidcombe Program¹ and The Camperdown Program². Randomised controlled trials compare two groups, for example a group of children receiving the Lidcombe Program at the clinic, and a group of children receiving the Lidcombe Program at home via the internet, and assess whether one group benefits more from therapy than the other. This type of evidence is convincing because randomised controlled trials attempt to control biases that are common in non-randomised trials.

Stuttering treatments by telepractice

There is randomised controlled evidence supporting the use of telepractice to deliver both the Lidcombe Program and Camperdown Program. Both of these treatments achieve the same reductions in stuttering whether they are provided to clients in clinic, or at clients' homes, by telepractice. Furthermore, research has identified a number of additional benefits to receiving therapy at home: clients have found it to be more empowering, time saving, and cheaper (because no travel time is needed)^{2,3}. Another benefit of telepractice is that it allows clients to receive therapy whether they are unwell, or travelling. This allows their child's therapy program (or their own therapy program) to be more continuous and more consistent. Continuity of care is known to improve results for both the Lidcombe Program and Camperdown Program.

Telepractice and Covid-19

Covid-19 means that soon our clients may not have the luxury of choice in whether to come in to the clinic, or to have their child's therapy by telepractice. We have been warned to "be prepared for the equivalent of a very, very bad flu season, or maybe the worst-ever flu season in modern times."⁴ While fortunately young people will be least likely to experience the virus severely, their schools, child-care centres, and non-essential services may be closed. Our centre and all others like it may similarly be required to close temporarily.

Forewarned is forearmed

By preparing for this possibility, less stress and disruption to your child's (or to your own) therapy is likely in the future. Our centre is well equipped to provide telepractice therapy, having commenced our telepractice service more than ten years ago. With clients in country regions of Australia, as well as in many countries internationally, our practitioners routinely provide a telepractice service to clients.

If you are already receiving therapy by telepractice, you are all set, there is no need to do anything. If, on the other hand, you have not ever used our telepractice service, we suggest you ask our administration team (Jo, Ellie, Maddie) for our *Telepractice Service Information Sheet* when next at the clinic, or email them for an e-copy. This will provide you with instructions on how to prepare for

a telepractice service if it is needed in the future. Further, you might consider booking a telepractice session in lieu of your in-clinic appointment in the coming months, well before the virus is expected to peak in Australia. That way you will have ironed out any teething problems, and can go forward in the knowledge that if the worst case scenario eventuates and services are shut down, you are well prepared. From this inconvenience may come a new preference!

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1. Bridgman, K., Onslow, M., O'Brian, S., Block, S., & Jones, M. (2016). Webcam delivery of the Lidcombe Program for preschool children who stutter: A randomised controlled trial. *J Speech Lang Hear Res*, 59(5), 932-939.
2. Carey, B., O'Brian, S., Onslow, M., Block, S., Jones, M., and Packman, A. (2010). A randomised controlled non-inferiority trial of a telehealth treatment for chronic stuttering: the Camperdown Program. *International Journal of Language and Communication Disorders*, 45, 108–120.
3. Carey, B., O'Brian, S., Lowe, R., and Onslow, M., (2014). Webcam delivery of the Camperdown Program for adolescents who stutter: A Phase II trial. *Language, Speech and Hearing Services in Schools*. 45, 314–324.
4. Prof. Marc Lipsitch, Prof. of Epidemiology, Harvard School of Public Health, Feb. 11, 2020