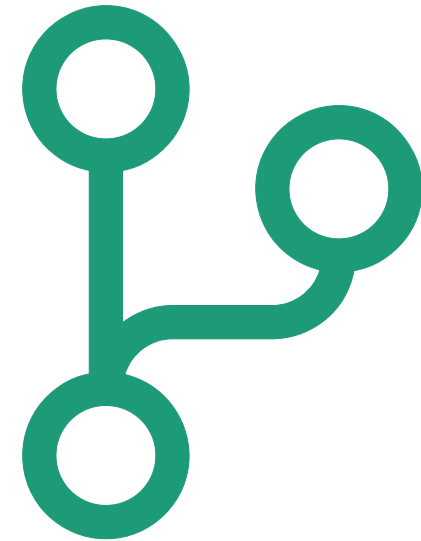# Top of the License

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ASHA Faculty Development Institute

September 21,2019

Disclosures

Full time salaried employee at Mass General Hospital and non-salaried faculty member at MGH Institute of Health Professions

Invited speaker to ASHA Faculty Development Institute (AFDI)

Today's session

- Background & MGH
- Understanding Top of the License
- Top of the License in SLP & Audiology
- Cultivating Top of the License Practitioners

Background and MGH

My Journey as SLP
MGH: The Hospital & Department
Departmental Structure

My journey

- SLP practice for 40 years
- Clinical experiences – pediatric and adults
  - Health care settings across the continuum: Acute Care, Rehab, Home Care, Outpatient
  - Elementary schools, pre-school programs & early intervention
  - Day programs for Adults with developmental challenges
  - Most communication and swallowing disorders
  - All socioeconomic levels – from homeless to extreme wealth
- Clinical educator and faculty member

THIS IS REAL AND YOU ARE COMPLETELY UNPREPARED

Current Role & Setting

Massachusetts General Hospital (MGH)

- Founding member of the Partners HealthCare System
- 1,050 bed medical center in Boston
- Teaching hospital affiliated with Harvard Medical School & MGH Institute of Health Professions
- Largest hospital-based research enterprise in US
- Community health centers
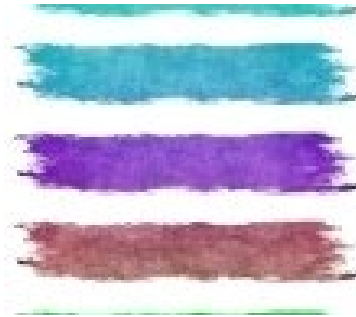
MGH Department of Speech, Language and Swallowing Disorders & Reading Disabilities

45 Speech-Language Pathologists

Three sites: Main Campus, Chelsea Healthcare Center, Revere Healthcare Center

Teams

- Inpatient Adult and Pediatric (16)
- Outpatient
  - Adult Swallow (5)
  - Adult Speech, Language and Cognition (4)
  - Pediatric Language and Speech (3)
  - Pediatric Feeding and Swallowing (6)
- Health Centers (11) – pediatric practice
- Expanding – pediatric SLP-MD partnerships in community settings

Redesign & Restructure

- Economic landscape
- Commitment to excellence and a philosophy of practice grounded in guiding principles
- Clinical research
- Clinical education
- Community health & engagement
- Individual autonomy and collective responsibility
- Self-managed teams, some with rotating coordinators
- New models of care
  - Imposed
  - Self-generated

Understanding
Top of the License

Top of License in Speech-Language Pathology & Audiology

Top of License: What and why?

- Effective approach:
  - Practice to the full extent of your education and training
  - Delegate a task that could be effectively done by someone else

- Economic challenges:
  - Maximize the limited hours
  - Spend money wisely

Top of the License

- *Each professional's routine activities should utilize the full extent of their education, training, and experience, and that their time should not be spent doing things that could be effectively done by someone else with a different sets of skills*
  (Philip Masters, MD, American College of Physicians)

- *Focusing attention on the clinical activities that require our unique knowledge, skills and attitudes* *(Lemmietta McNeilly, PhD, CCC-SLP, ASHA)*

- *Places greater emphasis on the cognitive work of the nurse such as EBP and less emphasis on the task work of the nurse* *(Buck et al, JONA)*

Top-of-License Nursing Practice

Buck, et al

- Top of License Practice
  - Professional Nursing Care
  - Critical Thinking
  - Interprofessional Communication
  - Patient Education
- Scope of Nursing Practice
  - Delegate Non-nursing Tasks
    - Administrative, secretarial, housekeeping, transportation

Top-of-License ~~Nursing~~ SLP/Audiology Practice

- Top of License Practice
  - Professional ~~Nursing Care~~ interventions
  - Critical Thinking
  - Interprofessional Communication
  - Patient/family/student/client Education

- Scope of ~~Nursing~~ SLP/Audiology Practice
  - Delegate ~~Non-nursing~~ Tasks
    - Administrative, secretarial, housekeeping, transportation

Practicing at the top of the license is not always easy

"It is easier if I do it myself"(time-sensitive)
or "I need to do it myself" (intentionality vs. appearance)

Why We Need to Practice at the Top of the License:
To demonstrate true value and effectiveness

Lemmeitta McNeilly, PhD, CCC-SLP

- Top of License Practice
  - Assessment
  - Skilled intervention
  - Consultations with colleagues regarding functional goals and treatment options
  - Working with clients and their families on self-management
  - Delegation and supervision of support personnel, students, clinical fellows
  - Education or professional development on challenging and emerging practices

Enhanced Service Delivery to Increase Value and Access to Services

Lemmietta McNeilly, PhD, CCC-SLP

- Value and Effectiveness…
  - Consider Social Determinants of Health
  - Expand beyond traditional models
  - Focus on functional effectiveness vs. impairments
  - Link outcomes to quality of life

A Deeper Understanding of Top of the License: Increasing Access, Value & Effectiveness

Consider Social Determinants of Health

Social Determinants of Health

Figure 1
Social Determinants of Health

Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social integration	Health coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training		Discrimination	
Medical bills	Playgrounds	Higher education		Stress	Quality of care
Support	Walkability				
	Zip code / geography				

Health Outcomes
Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

KFF
HENRY J KAISER
FAMILY FOUNDATION

Chelsea

1.8 square miles

One of the nation's most densely populated places, with about 39,000 people squeezed into the one-third of the city that is zoned for housing.

63% Hispanic

44% Foreign-born

35 Languages spoken

Challenges: substance abuse, pollution, obesity, homelessness, and violence.

Chelsea

Typical caseload

Immigrant Families
- Families who are LEP (Limited English Proficiency)
- Languages significantly different
- Lack of familiarity with city and USA

Low levels of literacy
- Parents with limited to no formal education and minimal exposure to books
- Shame

Psychological safety
- Social issues: domestic abuse, fear of deportation
- Trust, myths

Limited understanding educational and healthcare systems
- Challenged by the complexity of our systems
- Unable to navigate the systems

Housing and Food Insecurity
- Hunger
- Worry and Fear
- Lack of stability and routines

Considering Social Determinants of Health as a Top of the License practitioner in the Chelsea Healthcare Center
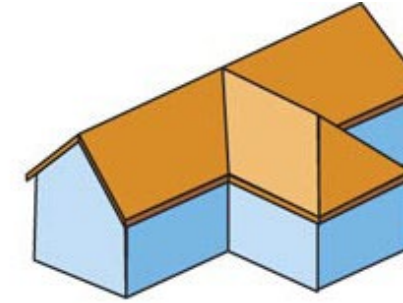
- Scheduling appointments
  - Collaboration with front desk
  - Reminder calls: interpreter
  - Intake inquiry: transportation, date/time
  - YouTube instructions
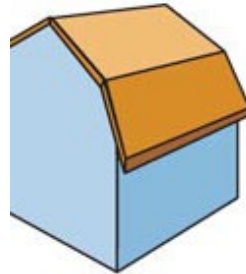- Advocacy - many different shapes
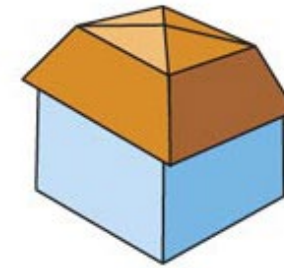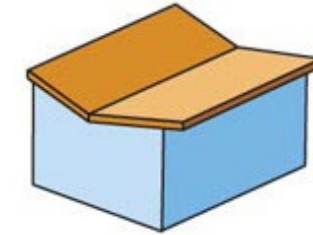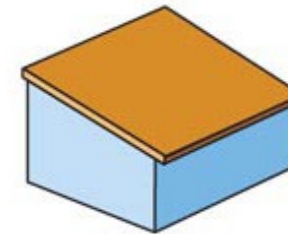 - Pro-bono lawyer
  - IEP meetings
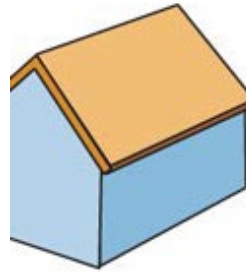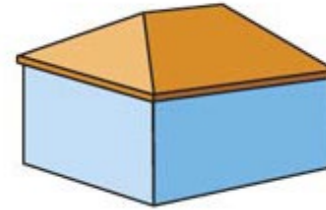
ABLE ROOF   HIP ROOF   INTERSECTING ROO

AMBREL ROOF   MANSARD ROOF   BUTTERFLY ROO

SHED ROOF

SLP interventions have to be different

Referrals

- Educating physicians
  - Staff meetings, 1:1
- Collaborating with Behavioral health providers
  - 1:1 conversations
  - Screening questions
  - Attend family orientation meeting

Beyond traditional model of interventions

- Menu of interventions
  - Pollitos group
  - Mom and child
- Evaluation + second session
- Dosage: Frequency and intensity
- Length of intervention: Setting as a bridge
- New initiative: Language and communication is everyone's responsibility at the HealthCare Center (TedTalk: Dr. Brenda Fitzgerald)

ToL includes understanding and addressing *Social Determinants of Health*

Prevention

- City-wide events
  - Language development
  - Helmet education

Identifying populations at risk

- Domestic Violence team

Partnerships

- Community engagement
- Schools and early intervention programs
- Interpreters
- Patient navigators

Social Determinants of Health

- At Chelsea, access and effectiveness warrants a wider lens:
  - Are they hungry?
    - Social Services; food pantry
  - Do they feel safe?
    - Potential signs of abuse and neglect (selective mutism)
  - How often can the family bring the child to appointments?
    - Beyond the traditional service model
  - What else is impacting this family's life?
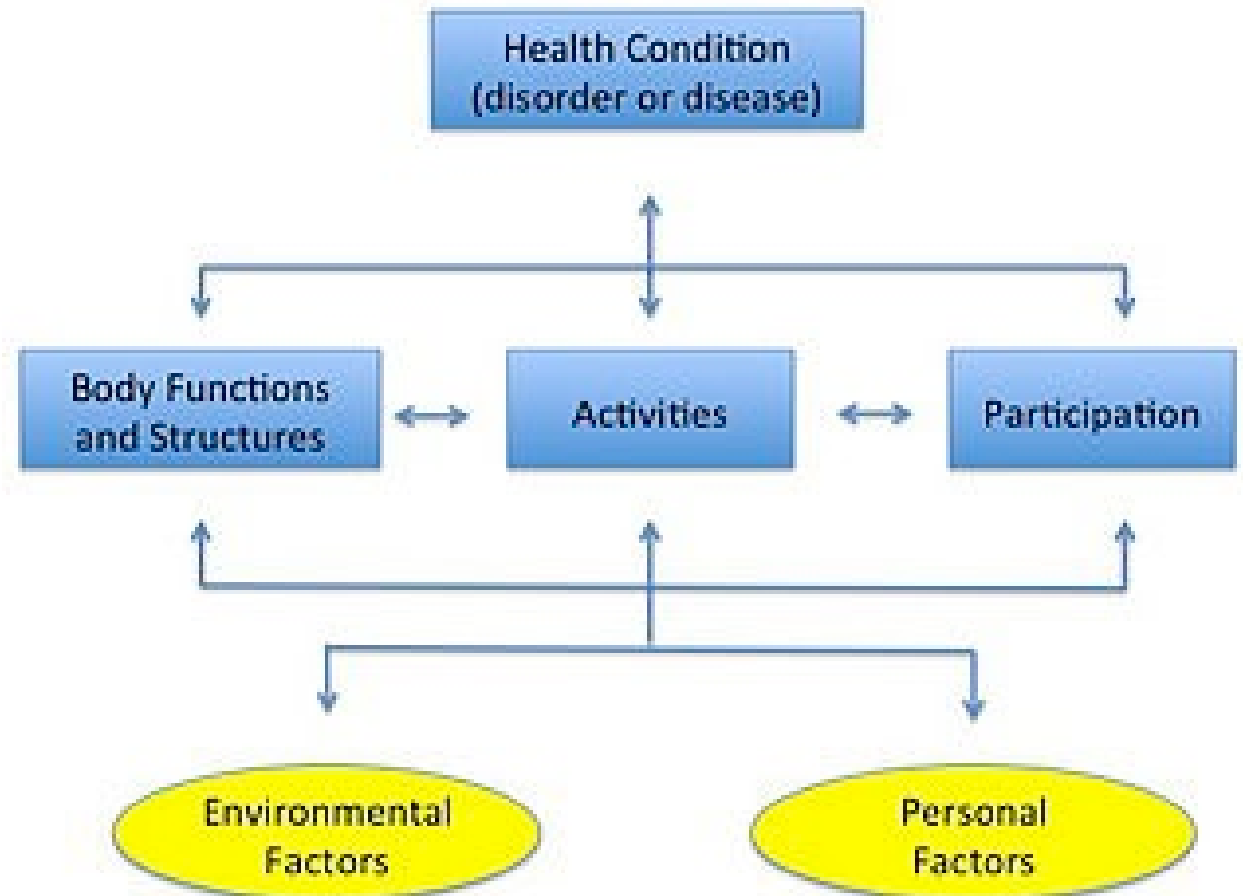 - Who else lives in the house?

A Deeper Understanding of Top of License: Increasing Access, Value & Effectiveness

Focus on functional effectiveness vs. impairments
Link outcomes to quality of life

World Health Organization

International Classification of Functioning, Disability and Health ((ICF) framework

International Classification of Functioning, Disability and Health

Application of model

Practice Setting

Deep understanding of the impairment

Deeper Dive: patient and family

- What does the patient, client, student, family, caregivers need from me in this setting right now?
  - Environmental Factors
  - Personal Factors

Focus on functional effectiveness vs. impairments : What does the patient, client, student, family, caregivers need from me in this setting right now?

ToL is increasing access, value and effectiveness

It has been a mental shift for me. In grad school we learned about fixing the problem, but some of our kids need life-long services and the problems never go away.

I like the word therapy, not treatment, because therapy is a process.

It is really hard sometimes because I see the impact of the problem. It is about helping patients accept the new normal.

It is hard for me to predict what will happen given that the patient has limited resources and support systems.

Beyond traditional models: What does the patient, client, student, family, caregivers need from me in this setting right now?

ToL is increasing access, value and effectiveness

New settings and partnerships:

Clinical skills & Teamwork

Flexibility and Organization

- Clinics: Airway, Down Syndrome, Tumor Board, HNCa, Center for Feeding & Swallowing, cleft palate, ALS, HD, etc.
- Partnerships: PTT, Developmental Clinic, Developmental Assessments, Waltham, Braintree, etc.

New models of care

- Outpatient Setting: Menu of models
  - Intensity
  - Outcome
- Telepractice
  - Innovative approaches to telepractice

ToL=QoL

- Patient/Family Centered Care
- Goals of care
- Individualized Educational Plan

What do people need to achieve individualized care?

What does value and effectiveness mean?

It is personal.

Thursday, September 12th

- Patient with chronic dysphagia s/p head and neck cancer
- Recurrence
- Severe dysphagia
- Team thoughtful and wrestled with options
- Laryngectomy and G-tube
- Patient agreed; consented for procedures
- 24 hours post-discharge

How can we explained what happened?

- Team
  - Thoughtful, compassionate and caring
  - ? Team communication breakdown
  - ? Communication with patient
  - ? Time pressures
  - ? Family involvement
  - Nothing they could have done differently

- Patient
  - Physical pain
  - Emotional pain
  - Depression
  - Isolation
- Patients need time to make decisions
- Patients need a clear understanding of the decisions they make
- Patients need empathy and compassion

Erosion of empathy and compassion

- Fragmentation and discontinuity of care and relationships
- Increased operational and administrative requirements
- Suboptimal staffing and market pressures to increase productivity and efficiency
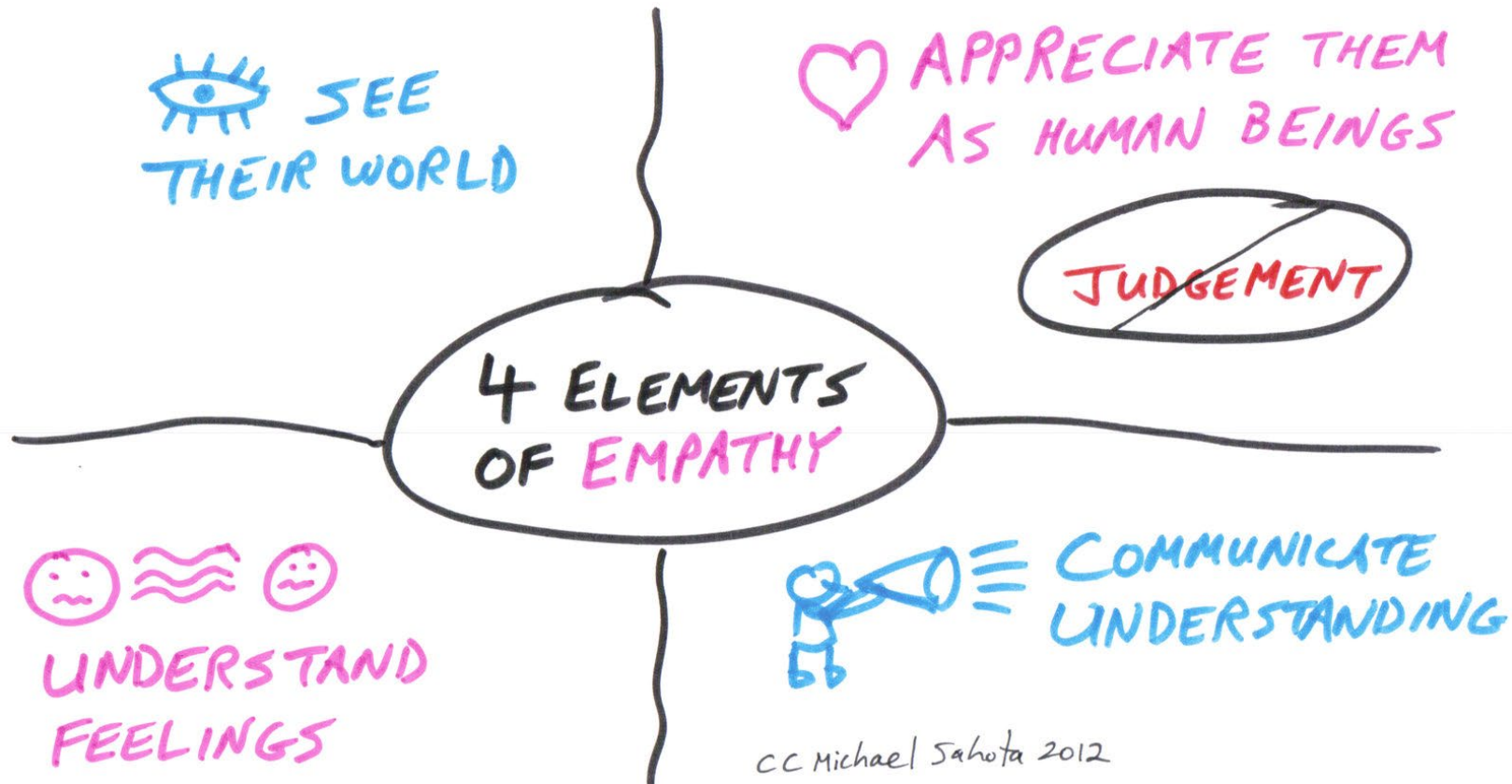- Uncaring attitudes and behaviors by those affected by the environment
- Burnout and emotional exhaustion
- Low sense of personal accomplishment

Quality of Life: The Human Connection

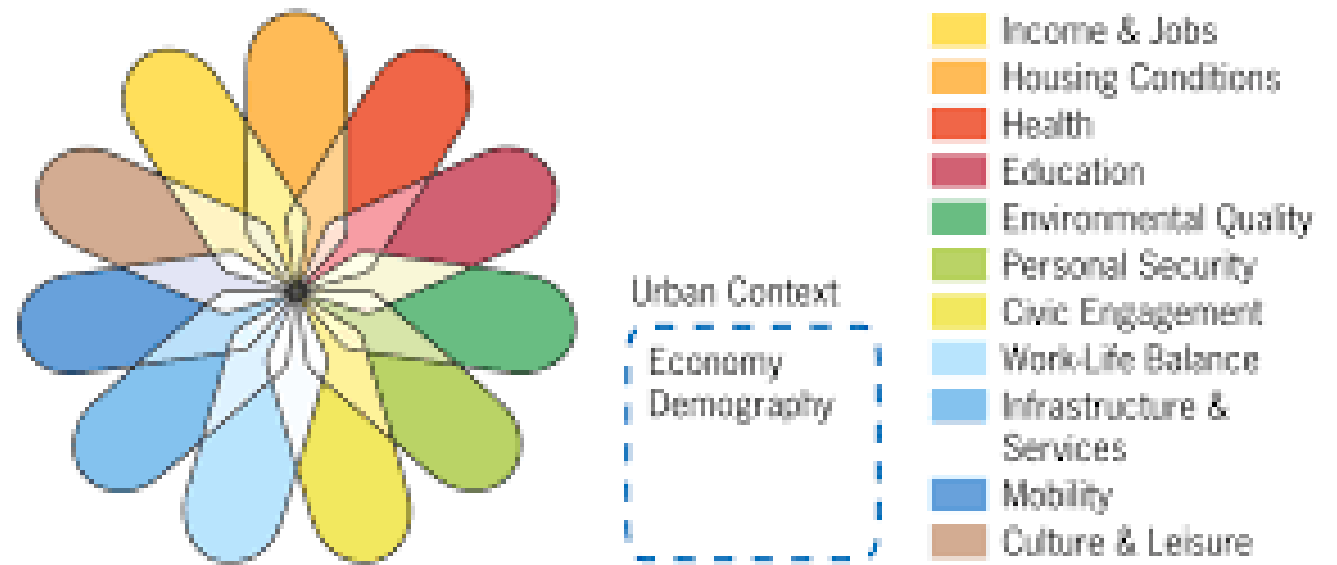https://m.youtube.com/watch?v=cDDWvj_q-o8

ToL=QoL: Understanding Empathy and Compassion

CC Michael Sahota 2012

Linking communication and swallowing outcomes to quality of life

- Establishing trust
- Compassion and Empathy
  - Us AND them
  - Perspective taking
  - Dr. Helen Reiss: The Empathy Effect
- Implicit Biases

Quality of life dimensions

Urban Context

Economy
Demography

Income & Jobs
Housing Conditions
Health
Education
Environmental Quality
Personal Security
Civic Engagement
Work-Life Balance
Infrastructure & Services
Mobility
Culture & Leisure

Source: OECD (2014), How's Life in Your Region?: Measuring Regional and Local Well-being for Policy Making, OECD Publishing, Paris;

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Linking communication and swallowing outcomes to quality of life

- Institute of Healthcare Improvement: *What matters to you* campaign; not "What is the matter"?
- Advocacy for patients, clients or students
  - Not what the *person in charge* wants but what the patient wants
- Self-Advocacy: Time and Resources
  - Etiology matters: deep understanding
    - Brain tumor; Acute Care
  - Setting matters:
    - Early Intervention
  - Understanding Operations & Systems
    - IEP – RHC - CF; New staff
  - Designing and implementing initiatives
    - AAC
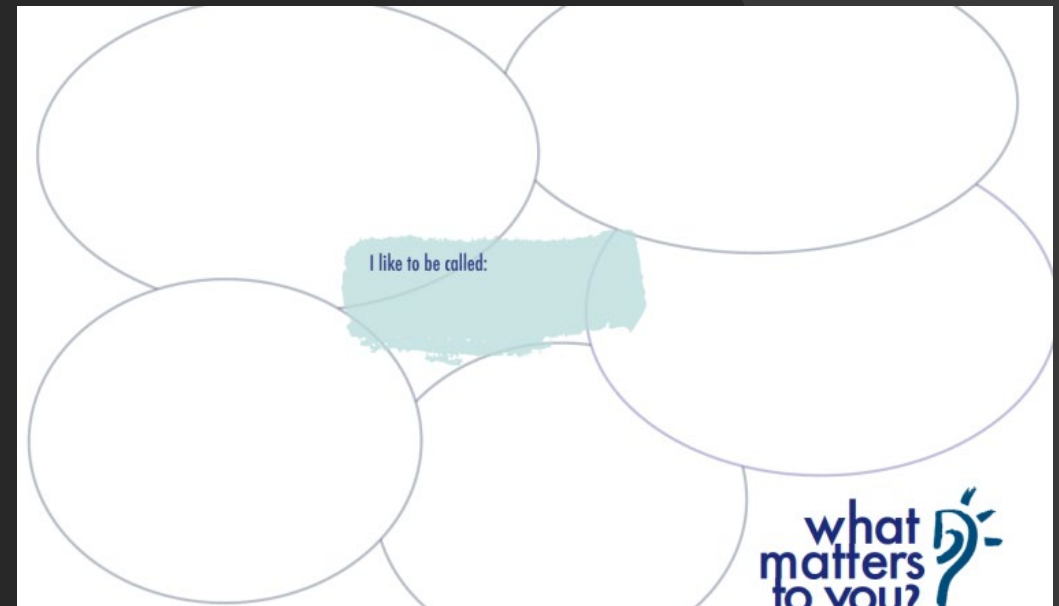
ToL + Access, Value & Effectiveness = The whole person

- Thinking beyond the hear and now
- Thinking beyond communication or swallowing
- Varied service-delivery models
    - Using extenders (who else?)
    - Consultations
    - Menu of options for interventions
    - Practice setting, e.g. Clinics
- Interprofessional practice
    - Partnerships
    - Who is your team, especially in an outpatient "solo" practice"?
    - Understanding the definition of team – varies over time…

Cultivating *Top of the License* Practitioners

Awareness and Knowledge

- Institutional culture
  - subcultures
- Hierarchy: power differentials
  - Empowering novices
- Interprofessional practice
  - Team members and dynamics

Deeper Dive into Top of License: Developing Agency

A professional identity grounded in having a sense of agency

- Control and action
- Effectiveness
- Autonomy of practice
- Self-advocacy and Advocacy

Philosophy of practice: Guiding principles and values

Patient-level vs. system-level issues

Transformational leaders and change agents

"

"Thank you SO much for truly sparking this entire path!!! It started with "one hour a week" and then "you can have an initial meeting and we'll buy lunch . . ." Thank you for all of your support!! I'm really excited to see our next steps and I feel that we have some concrete ideas! I think the meeting was really successful! "
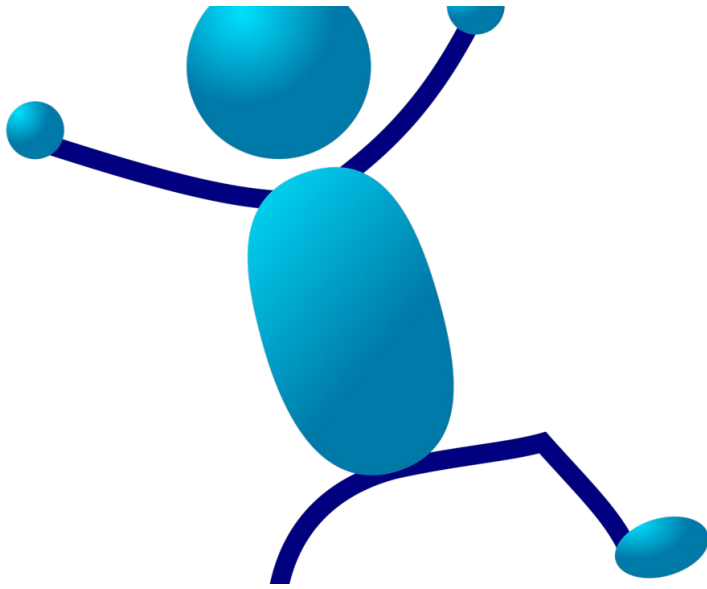
Community Research at MGH Chelsea

Learning to Delegate

- When is a task, *just a task* that could be delegated and when is it not?

- What?

- Why?

- When?

- How?

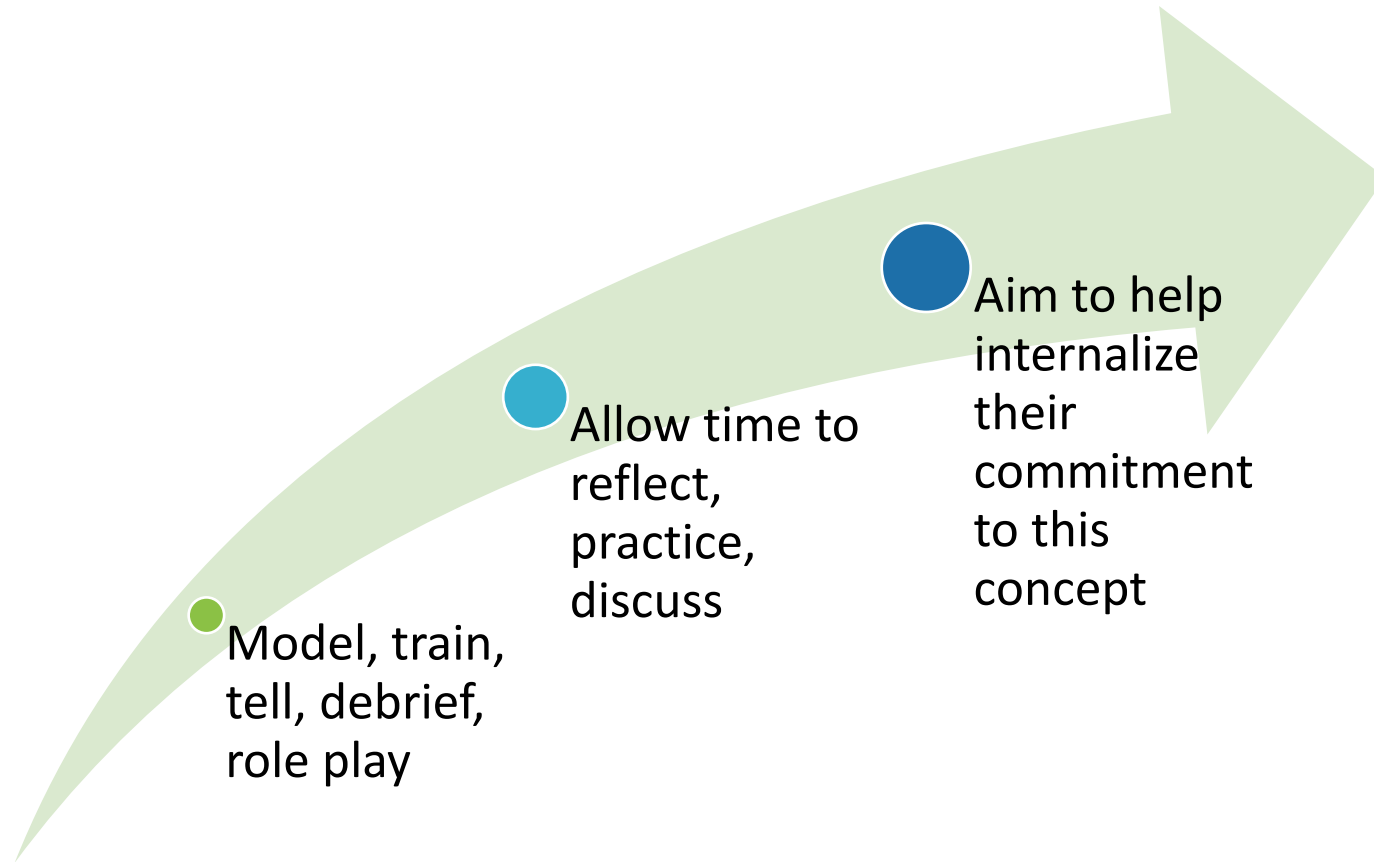# Top of License: Access, Value & Effectiveness
A **mental** shift

- How do we help students internalize their commitment to live in this context?

- How can they see that what they are learning and seems peripheral and unimportant is relevant to their future practice?

Creating opportunities to internalize the commitment to live in this context…

Perspective taking activities	Clinical cases "Book club" Role play
Simulation	Patient actors
IPE activities	Learning to understand and share perspectives and practice Learning to be curious by asking why
Debriefing clinical placements	Test of controllability, causes and solutions
Diagnostics at a system's level	Learning to see trends and systems' errors

Intentionality

Model, train, tell, debrief, role play

Allow time to reflect, practice, discuss

Aim to help internalize their commitment to this concept

Intentionality