# Improving the implementation of family-centred care in adult audiology appointments: An intervention study

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# Why Do This Study?

- There is mounting evidence for benefits of family-centred care (FCC) in adult audiology services.<sup>1,2</sup>
- However, research has shown that FCC is not typically implemented in adult clinical practice.<sup>3,4</sup>

## What Were The Aims?

- 1) To evaluate the changes in family attendance and family involvement in adult audiology appointments following a two-phase intervention.
- 2) To evaluate whether changes to family attendance and involvement impacted client outcomes and client satisfaction with services.

## **Procedure** Data collection for standard care phase Two-month (n=27 clients) follow-up Intervention I workshop focusing on family member attendance Two-month Data collection for Intervention I phase follow-up (n=30 clients) Intervention II workshop focusing on room set up and family member **involvement** in appointments Two-month Data collection for Intervention II phase follow-up (n=23 clients)

## What were the interventions?<sup>5,6</sup>

The interventions had a **whole-of-clinic** approach, i.e., they targeted <u>all</u> staff at four private audiology clinics, including front-of-house staff (n=4), clinicians (n=4).

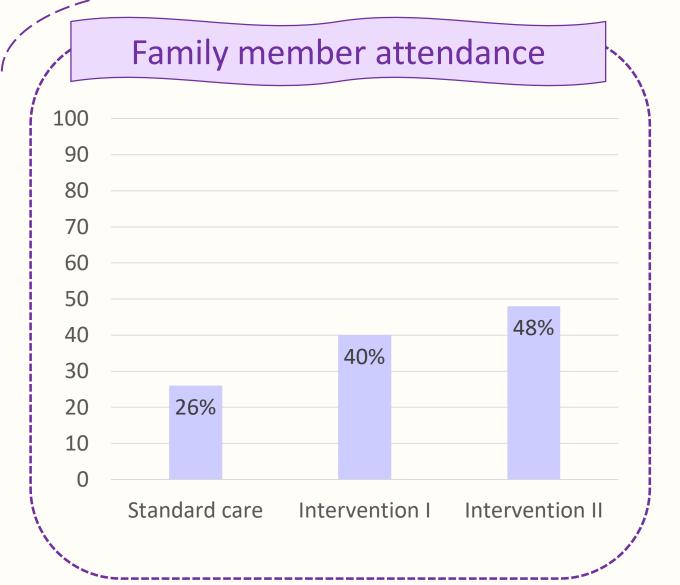
#### Intervention I:

- Training workshop asking a family member to attend an appointment during appointment booking phone calls/texts.
- Prompt cards provided with script guides.
- Individual 1:1 coaching following workshop.

#### **Intervention II:**

- Training workshop setting up the room to include a family member, and inviting involvement of family member in the appointment.
- Prompt cards provided with script guides.
- Individual 1:1 coaching following workshop.

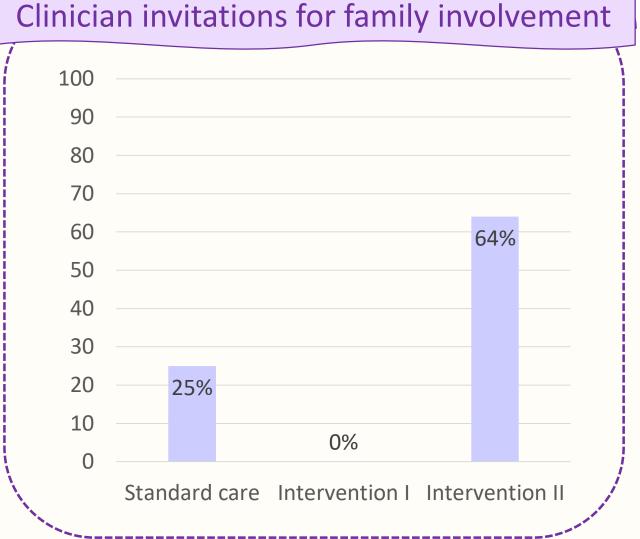
# What Did We Find?

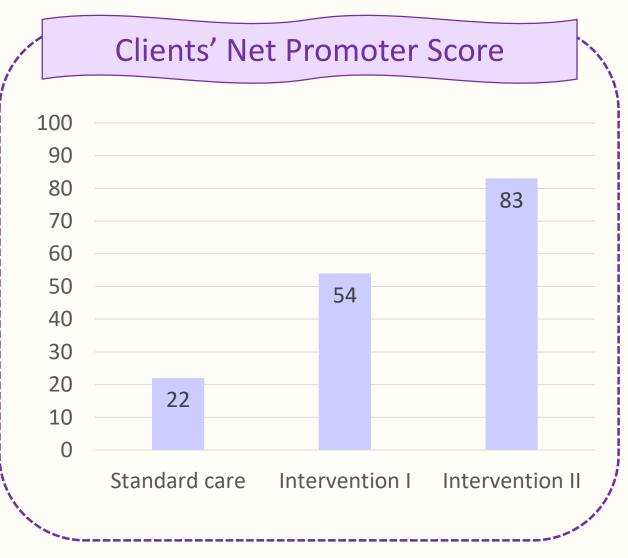


### Client outcome measures

- Measures of Processes of Care Adults
   (MPOC-A) significant differences across
   phases were found for the *Providing General Information, Providing Specific Information,* and *Coordination and Comprehensive Care* subscales. Upward trends on other subscales
   of MPOC.
- Upward trends on Satisfaction with Activities of Daily Living (SADL) and International Outcomes Inventory - Hearing Aids (IOI-HA) completed at 2 months follow-up.

# Room set-up Examples of room set-up for each phase (A = Audiologist, C = Client, F = Family member) Standard care: 0% triangle arrangement of chairs. Family member further away from Camera view clinician than client <u>Intervention I:</u> 29% triangle arrangement of chairs. **Intervention II:** 100% triangle arrangement of chairs.





# What Can We Conclude From This Study?

- The interventions were successful in increasing family member attendance and family member involvement in adult audiology appointments.
- The results also showed **benefits to client and service outcomes** from improving the implementation of FCC, particularly Net Promoter Score.
- The implementation of FCC in audiology clinics needs to be a whole-clinic approach, including staff in all roles (front-of-house staff, clinicians, and managers).
- One-on-one coaching was required to change staff behaviours beyond the initial training workshops.
- Clinicians may need more training to implement an explicit agenda at the beginning of appointments which stipulates the inclusion of both client and family member in the conversation during the appointment.

## References

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This study was funded by Sonova, AG