

Breakfast Groups: what are the training needs of Allied Health Professionals working in stroke to deliver interdisciplinary breakfast interventions?

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“Difficult to find time” – (OT 5)

Introduction

- Involvement in Breakfast Group Interventions in Stroke (BISTRo) prompted an evaluation of the training needs of staff who are delivering interdisciplinary breakfast groups with Stroke survivors.
- Stroke Guidelines highlight the importance of group therapy for patients and evidence shows positive outcomes for those cared for by a Multidisciplinary Team (MDT)^{1,2}
- There is a demonstrated need for regular training for staff working in Stroke³.

Methods

- A mixed methods service evaluation completed as part of an NIHR-HEE Integrated Clinical Academic Internship with Sheffield Hallam University.
- A survey was distributed to 40 Allied Health Professionals (AHPs) across the local inpatient stroke pathway.
- Braun and Clarke’s Thematic Analysis along with descriptive statistics were used to analyse the data and develop themes⁴.

Results

There were two themes identified; 1. competence and 2. translation into practice, each had two subthemes.

- Competence was related to the knowledge and skills respondents perceived to have and awareness of existing online training packages for stroke competence.
- Theme 2 describes the training received, how this translates into practice and how confident staff were with aspects of the intervention.

Theme 1: Competence

Subtheme: Knowledge & Skills

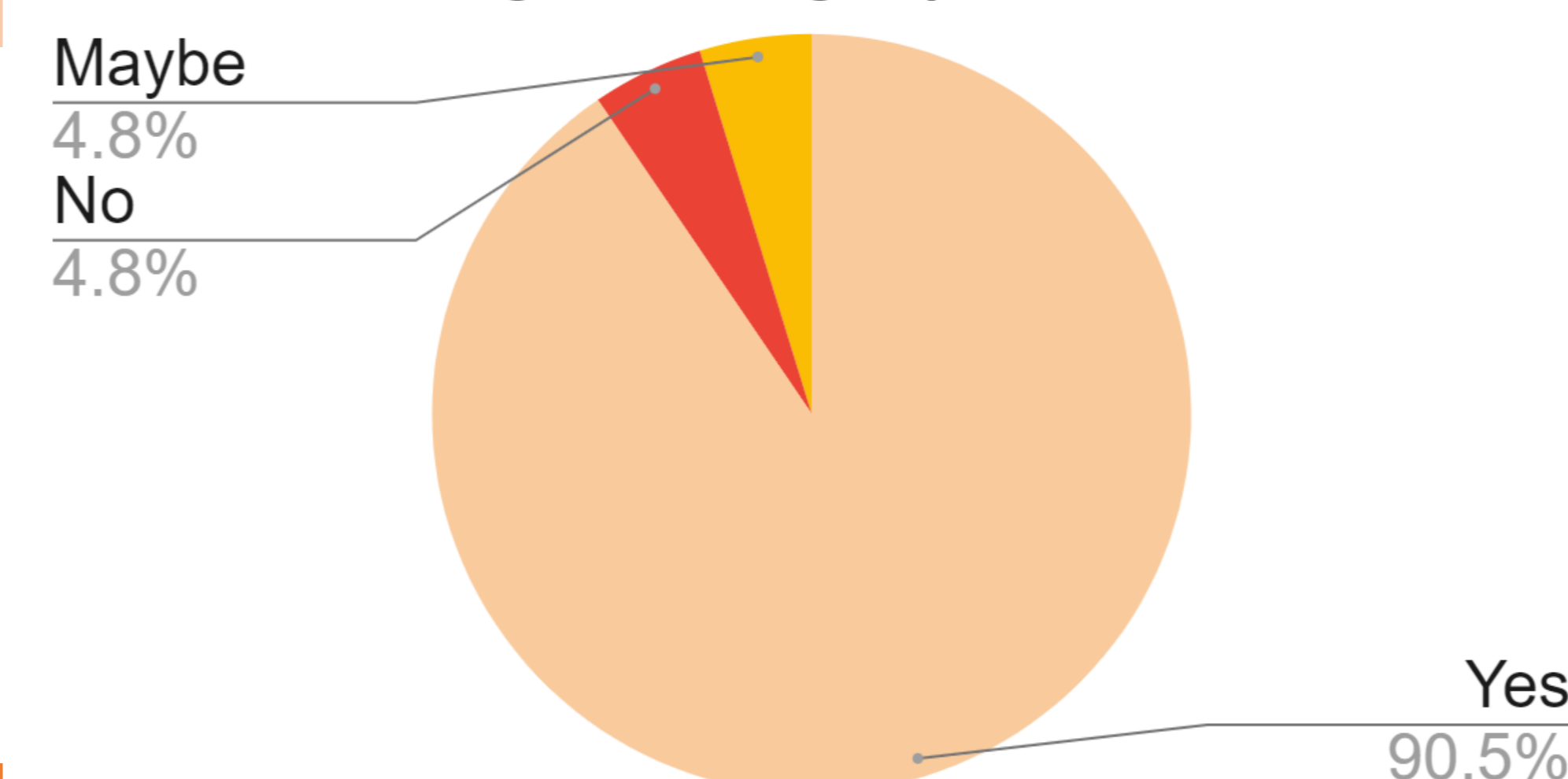
- Under 50% of respondents felt only slightly or moderately satisfied with how the local induction covered the knowledge and skills needed to deliver breakfast group interventions.
- There were potential joint areas of interdisciplinary development in goal setting and understanding of self-management strategies.

Subtheme: Awareness

- Staff showed a lack of awareness of the availability of online Stroke training packages.
- Respondents felt that they would benefit from having more information given to them regarding available training packages when they started working.
- Stroke Training and Awareness Resources (STARs) was the most used package (71.4%) but only 52% found this gave sufficient training needed to deliver breakfast groups.

“I feel I would need more support and training in helping patients to prepare food and drinks” - (TA 4)

Do staff feel they would benefit from training specific to delivering breakfast group interventions?



Theme 2: Translation into practice

Subtheme: Workplace pressure

- 86% of respondents cited the word “time” within their responses when asked about the barriers and facilitators to completing online training. It was important to staff that protected time was given during working hours for training.
- Large and unpredictable caseloads along with fluctuations in staffing levels were a significant barrier to accessing training.

Subtheme: Confidence

- Therapy assistants were the most confident in the greatest amount of areas.
- Each profession had a clinical area in which they felt the most confident, which generally sat within their area of expertise. For example;
 - Speech and Language Therapists showed the greatest confidence in choosing breakfast options for patients on modified diets.
 - Occupational Therapists felt most confident demonstrating the use of small aids and adaptations.
 - Dietitians demonstrated the highest confidence in having conversations with patients about healthy lifestyles, portion size and weight.
 - Physiotherapists were most confident assisting a patient to complete an activity in supported standing.

Conclusion/Analysis

- Managers need to consider raising awareness of the existing stroke training packages that could support learning needs for delivering group eating and drinking interventions.
- A bespoke approach to training could be implemented, however an interdisciplinary approach could save time and provide opportunities for integrated working and learning.