

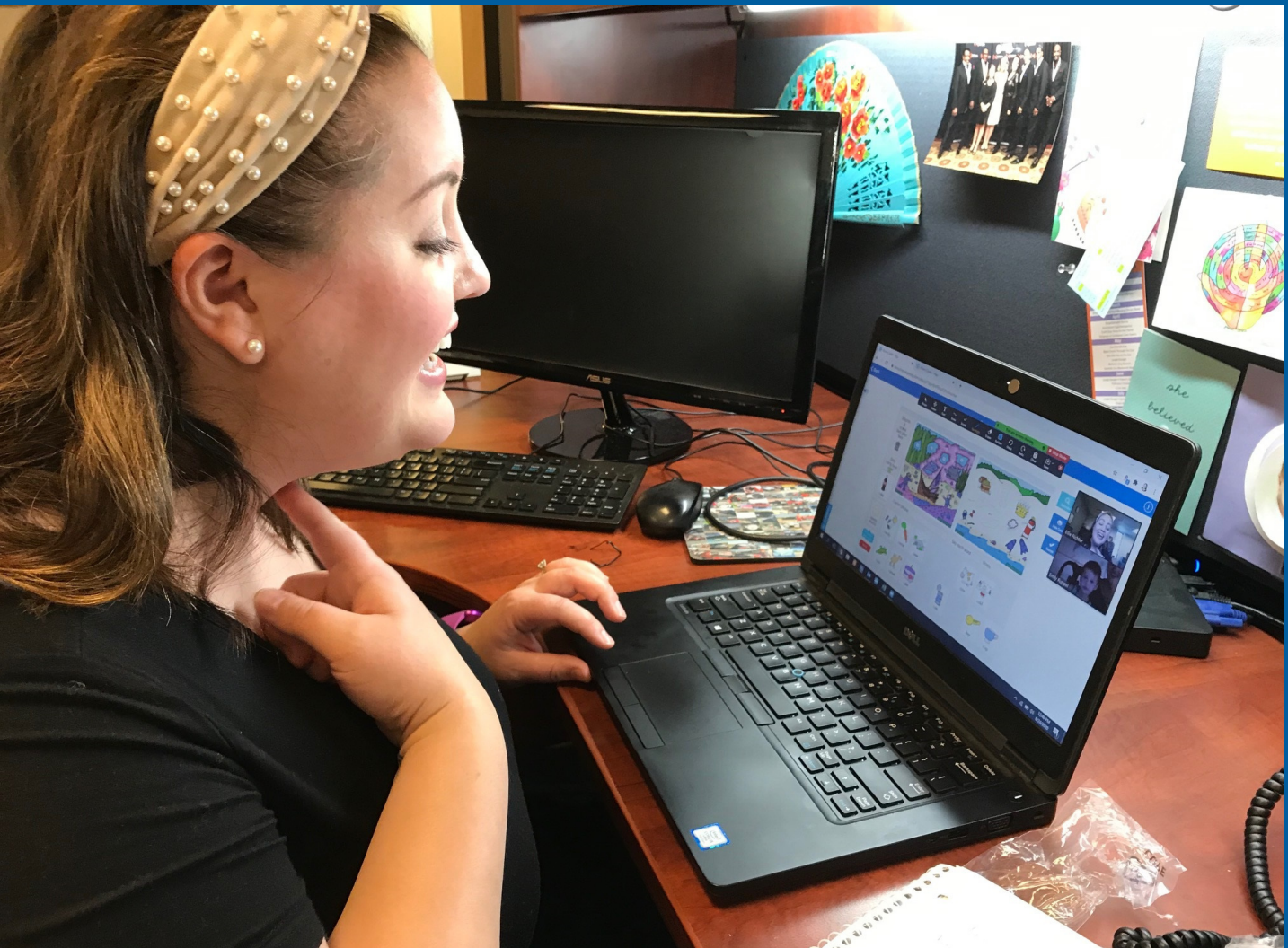


WALKER SCOTTISH RITE CLINIC



MARYVILLE
UNIVERSITY

IMPACT REPORT 2020



"Helping Children Communicate"



DIRECTOR'S STATEMENT

The Clinic's rapid and necessary adoption of telepractice due to COVID-19 in 2020 has been both a tremendous challenge and an unexpected opportunity. Largely unstudied in early childhood speech-language intervention, telepractice adoption requires planning, additional training and capacity building. Yet, this became our only viable option when the pandemic hit. Our staff has been implementing new technologies and techniques in real time. Thanks to your generous support, we have been transmitting thousands of sessions of speech-language therapy into children's homes since April. Our clinicians report that telepractice has proven effective for most children, provided they are able to engage and connect remotely.

Unfortunately, we have encountered a wide range of disparities between each family's access to technology. Despite the ubiquity of cell phones, these devices are not adequately functional for pediatric speech-language telepractice. So the Clinic began piloting a device lending program to connect with families who lack access to computers. These iPads (made possible by tremendous support) are equipped with data plans that allow us to reach children anywhere a cell phone can locate a signal. With your help, telepractice is extending our reach.

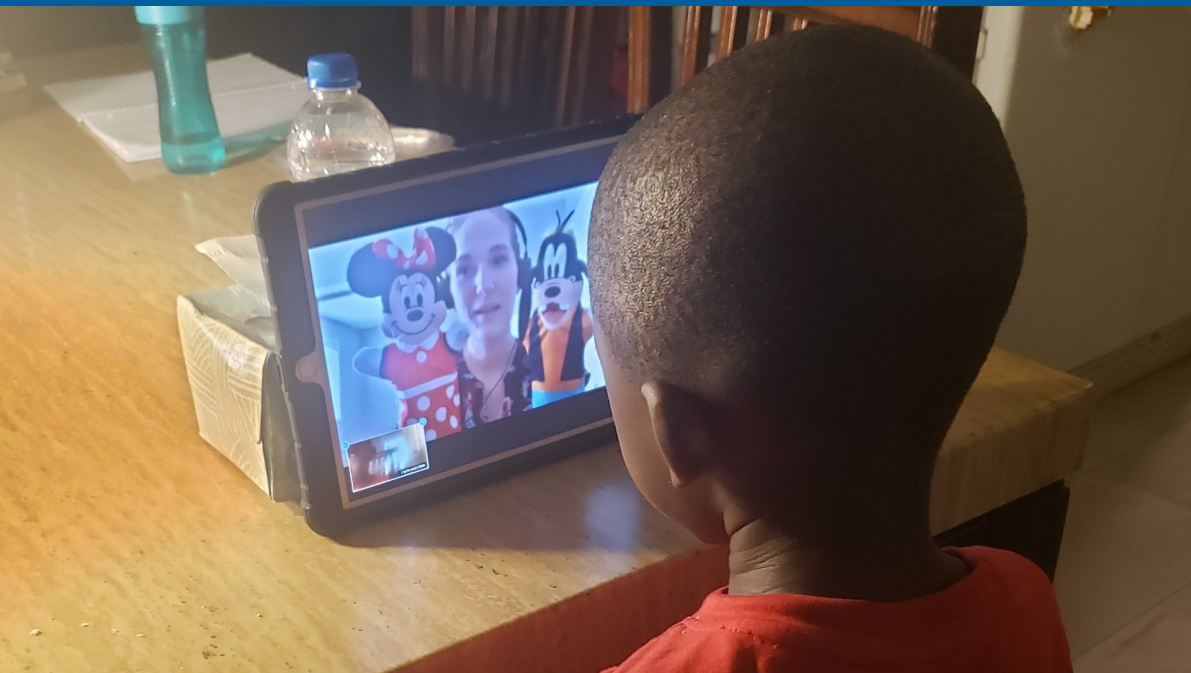
JACOB GUTSHALL, MHS, CCC-SLP

Director, Walker Scottish Rite Clinic

CAPACITY BUILDING

"Just had my first session with my client, Daniel, using the loaner iPad. It went great! Internet connection was much more stable and mom was relieved she didn't have to take off work to let him use her phone."

~ Speech Therapist Brittany Musholt, MA, CCC-SLP, August, 2020



Victories such as this - finally being able to connect and engage Daniel in therapy - were made possible with donor support. Transitioning speech-language pathology (SLP) treatments into equivalent digital services has required additional equipment, materials, and collaboration. Below are some of the new adaptations we were able to implement thanks to generous contributions:

Equipment:

- Zoom HIPAA Compliant Software
- Document Cameras
- Noise Reducing Headsets
- Green Screens
- Loaner iPads
- Data SIM Cards

Materials:

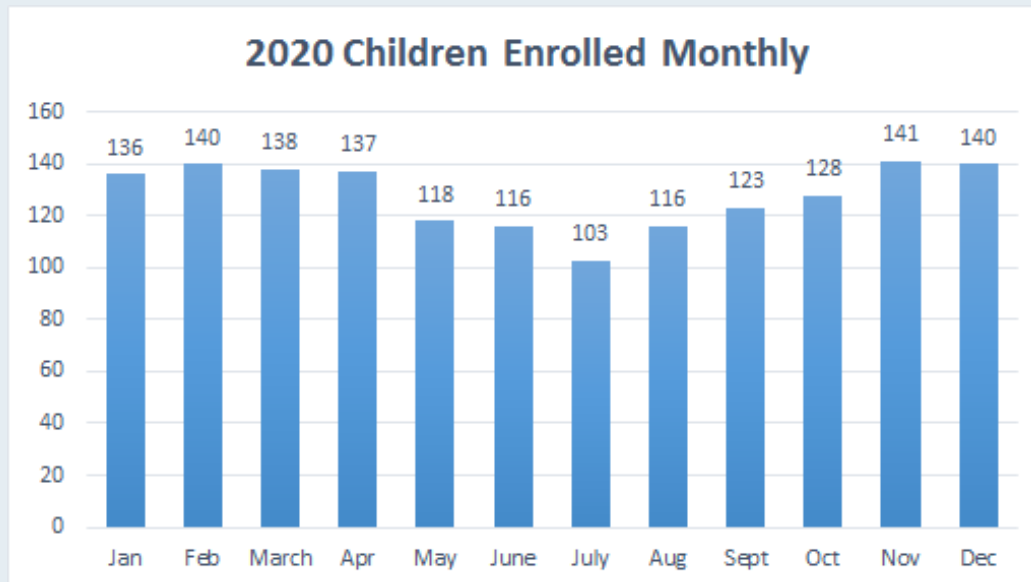
- "Pearson Q Global" - Digital Tests
- "Ultimate SLP" - Online Games
- "Super Duper" - Digital SLP Materials
- "Boom Learning" - Create & Share Site
- "GoGo Speech" - Interactive Scenes
- YouTube - Creation of Training Videos

Collaboration:

- *RiteCare Conversations* - WSRC led national Zoom chats about telepractice
- *Youth In Need Partnership* - New expansion of Spanish therapy via telepractice

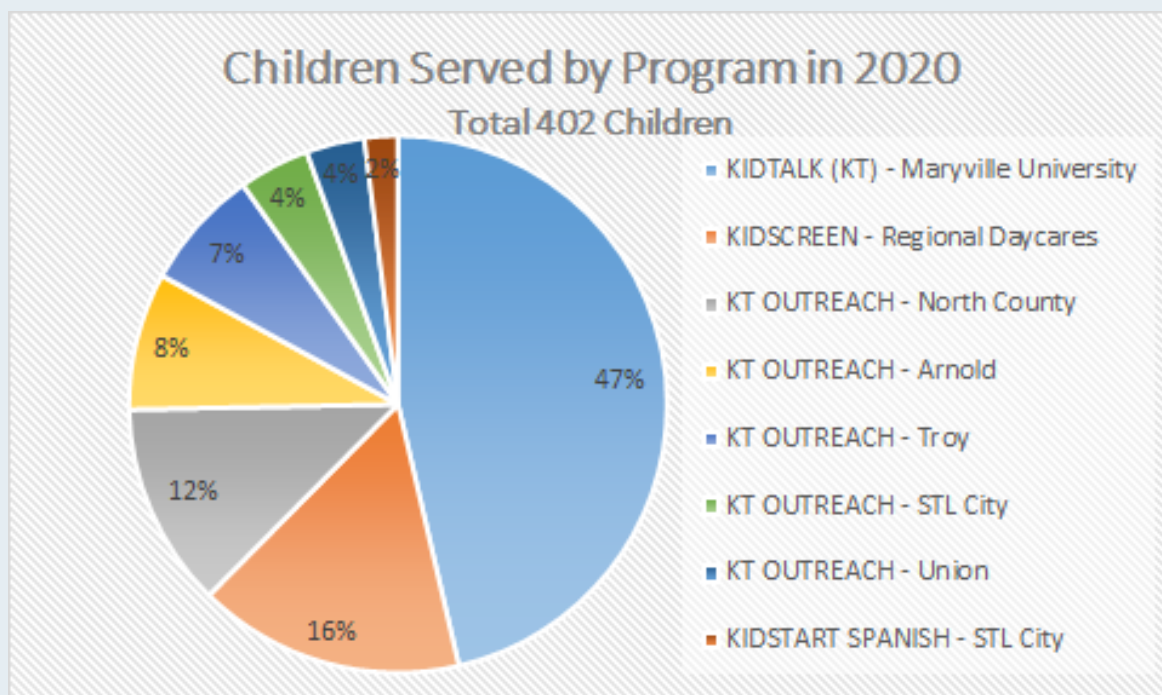
CHILDREN SERVED

The pandemic had a negative impact on our monthly enrollment, but with additional support and new technologies we were able to reattain average enrollment prior to year's end.



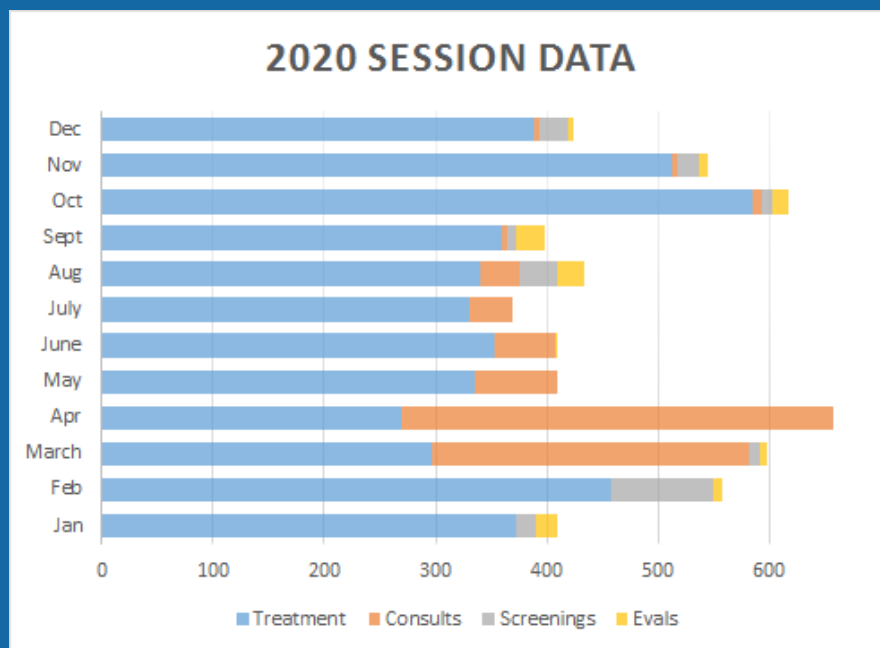
TOTAL SERVED

Diagnostic services were halted during the pandemic closures. As a result, total children served was lower than year-over-year average (typically 650+).



OUTPUTS

In March 2020, with mandated closures, we were uncertain about conducting therapy during a pandemic. But after consultation with our knowledgeable supporters and Maryville partners, telepractice became a reality within two weeks. For many children, remote therapy began right away. But for others remote parent training and consultations became the only alternative.



SESSIONS

The input of additional resources led to a rebound of new client enrollments, beginning in August 2020; with new technologies and limited in-person sessions using personal protective equipment (PPE). Treatment sessions, conducted primarily through telepractice, exceeded normal levels by October.

3,460
TREATMENT SESSIONS
CONDUCTED VIA TELEPRACTICE
IN 2020

OUTCOMES

When Ava began services, she had difficulty being understood - even by family members. Her receptive and expressive language scores were classified as severe. She struggled with vocabulary and grammar, and with answering

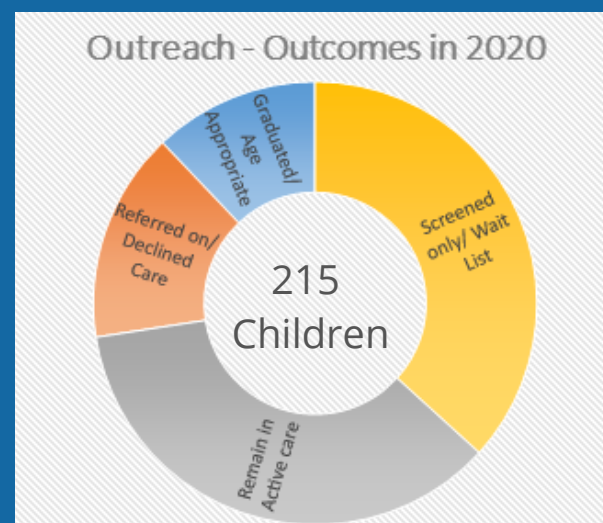
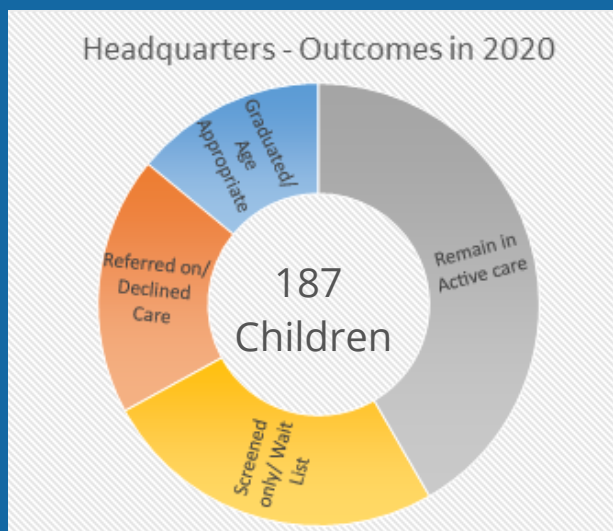


and asking questions.

In addition, her speech disorder was classified as profound. At her initial evaluation, she had 160 phonological errors and could not be understood by even familiar listeners. Now, her total number of errors is four (on one sound that is considered age-appropriate at this time) and she can be understood by everyone.

She is able to demonstrate her academic knowledge in the classroom,

ask for help when needed, make friends and express herself. Her confidence has grown and she is quite the chatterbox.



Ava, Daniel, and hundreds more children have a brighter future thanks to your support. The pandemic has challenged the way we provide speech and language therapy - while opening up unexpected pathways to reach even more children with communication disorders.

FEEDBACK

"My expectations were exceeded! I've seen drastic improvement in my child's communication. Initially most people never understood my child when she spoke. Her communication deficits even caused her peers to tease her... Currently her peers are able to understand most things she says and that has made her more confident in her social engagements ... Thank You! Thank You! Thank You!" ~ Clinic Parent, 2020 Clinic Satisfaction Survey

At the completion of therapy and upon exit in 2020, parents were asked to complete a satisfaction survey rating their family's experience and the success of the program using a 5-point Likert scale. The results were very positive, even with the transition and necessity of telepractice:

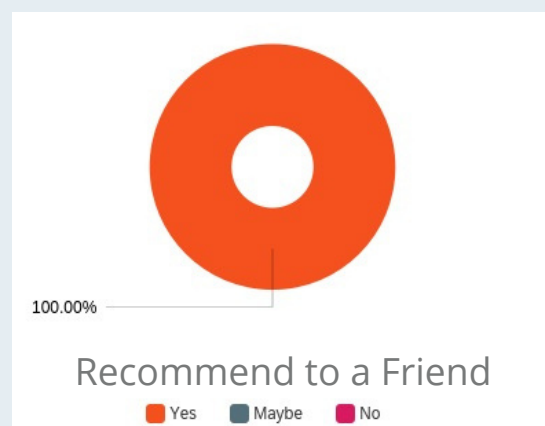
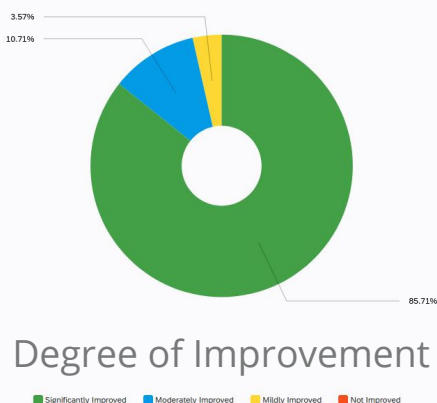
The Clinic overall



Success of the Program

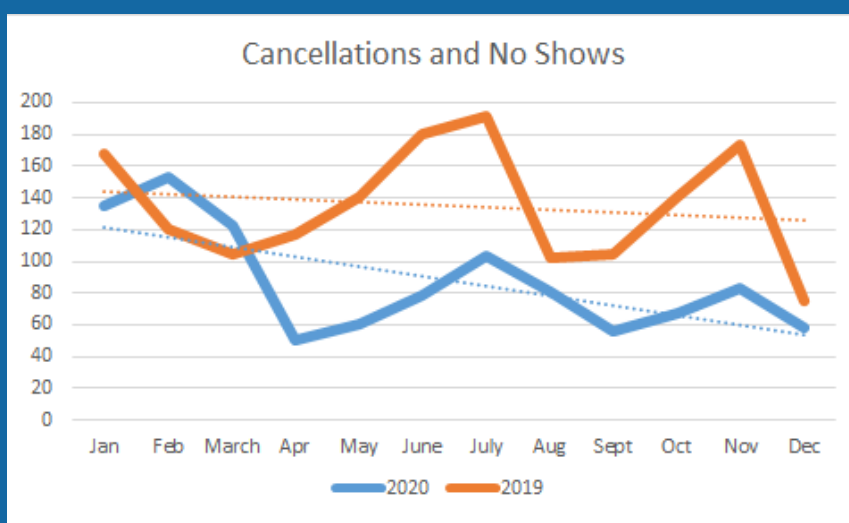


Parents were also asked to rate the degree to which their child's speech-language abilities improved during their time in treatment. The large majority of parents reporting (86%) indicated their child's skills had "Significantly Improved"; 10% had "Moderately Improved"; 4% "Mildly Improved"; and 0% had "Not Improved." All parents indicated they would recommend the Clinic to a friend.



OPPORTUNITIES

The speech-language pathologists and staff of the Walker Scottish Rite Clinic have met the pandemic challenges with adaptability and creativity. The results demonstrate that telepractice is a viable treatment model for early childhood speech therapy and is here to stay. Data already indicate that there are fewer client cancellations and "no shows," when issues such as transportation barriers and scheduling conflicts are alleviated through telepractice. When children attend therapy more often, they make progress more quickly.



Our current plans include using our iPad Lending initiative to reach more children by expanding our partnerships with Head Start centers. Through the use of technology and facilitators, children at multiple site locations can be seen by the same speech-language pathologist. With your help, we can extend our reach into more underserved areas of our community.

