

Social Communication Intervention Programme: Single Cases in Practice (SCIP²): Lay Summary

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What was already known?

Children who have social (pragmatic) communication disorder (SPCD) find it hard to understand and use language in social contexts. Speech and language therapy (SLT) may be provided but practice has little evidence to support it. The Social Communication Intervention Programme (SCIP) has shown benefits over treatment as usual when delivered by research speech and language therapists and specially trained therapy assistants. However, we don't know if the intervention can be delivered by SLTs in routine practice or whether it will be acceptable to service users (parents and children). There are no data available on how many children with SPCD are on SLT caseloads or on what therapy is routinely provided to these children. In this study, we aimed to find answers to these issues so that we can develop evidence about SCIP practice.

What was planned?

1. A national electronic survey was used to:
 - Find out if enough children with SPCD (aged 6-11) are available to be recruited to a large scale national clinical trial of SCIP
 - Work out how many participants would need to be recruited to prove effectiveness
 - Gather information about SLT services to children with SPCD
 - Ask SLTs if they are willing to take part in a national clinical trial, and what would enable them to do so.
2. A small-scale intervention study was conducted to:
 - Train and supervise SLTs to deliver SCIP to a child with SPCD on their caseloads
 - Develop a new outcome measure based on parent priorities for intervention
3. A consensus survey of expert opinion was used to make realistic plans for a clinical trial and further implementation into routine practice.

Who took part?

A total of 76 SLTs completed the survey. Fifteen practitioners and 20 children with SPCD were recruited to the intervention study. An expert panel of 15 SLT practitioners and managers took part in the consensus survey.

What was discovered?

From our survey we found that:

- There are enough eligible children aged 6-11 years old with SPCD to carry out a larger study.
- Children with SPCD would be recruited from NHS and non-NHS SLT services.
- SLTs were willing to support a trial given sufficient time and resource to do so.
- Routine therapy is highly variable across England currently.

In the intervention feasibility study, 15 SLTs completed training in SCIP intervention, received a copy of the manual and had 6 hours of supervision from a Research SLT. Twenty children received a maximum of 20 direct SCIP therapy sessions.

Outcomes were measured by parents and practitioners who used an individualised scale of progress - a Goal Attainment Scale (SCIP-GAS). All children except one made some progress on parent ratings and all children made progress on practitioner ratings. The SCIP-GAS outcome measure was acceptable to parents and practitioners.

Parents strongly valued the individualised approach of SCIP intervention and preferred delivery of intervention in school time and at school. Children were also asked to rate their intervention. Most children were positive in how they would describe SCIP to a new child.

What next?

This feasibility study has been a crucial step prior to providing definitive data in a follow-up trial. Experience of recruitment, intervention planning, training and supervision has enabled us to make realistic plans for a future large scale clinical trial and further implementation of SCIP into routine SLT practice. Critical aspects of the future trial design and acceptability of intervention and methods have been identified and agreed by experts. A future large scale clinical trial of SCIP would be the first robust evidence anywhere associated with this population and intervention method.

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