

An evaluation of client satisfaction with studentdelivered speech-language pathology services in private practice

Carl Sokkar, Merrolee Penman, Jacqueline Raymond and Lindy McAllister

Student placements have become increasingly difficult to attain. Yet, private practice remains an under-utilised resource for clinical education, despite the rapid growth seen in this sector in recent years. A commonly perceived barrier to having students in private practice is the concern that clients will not want, or be satisfied with, student-delivered services. To better understand the views of clients, this study evaluated client satisfaction in receiving student-delivered services in speech-language pathology private practice. Clients completed surveys exploring their levels of satisfaction and their perceptions of the effectiveness of the service they received from students. All clients surveyed were satisfied with receiving student-delivered services and almost all were happy to continue receiving this service. Thematic analysis of data from open-ended questions revealed themes and subthemes that contribute to our understanding of the aspects of studentdelivered services with which clients were satisfied. The results suggest that a lack of client willingness and satisfaction may not be a barrier to supervising students in speechlanguage pathology private practice as traditionally perceived.

C linical education is an integral and necessary component in the education of future speechlanguage pathologists (SLPs) (Speech Pathology Australia [SPA], 2018), yet attaining sufficient quality clinical placements has become increasingly difficult for universities (Sheepway, Lincoln, & McAllister, 2014; SPA, 2018). Workplace and funding policy reforms have led to traditional clinical education sites offering fewer placements (SPA, 2018). Although over 53% of registered SLPs now work in private practice as their main role (SPA, 2014), this sector is an underutilised source of student placements, with Sokkar and McAllister (2015) reporting as few as 3% of SLP paediatric student placements and 0% of adult placements at their university occurred in private practice. Numerous researchers and agencies have argued that the private sector needs to play a larger role in clinical education to ensure the capacity and capability of the future workforce of health professions (Dean et al., 2009; Health Workforce Australia [HWA], 2014; Sokkar, McAllister, Raymond, & Penman, 2019).

There is growing evidence in other allied health professions (Doubt, Paterson, & O'Riordan, 2004; MacPhail, Alappat, Mullen, & Napoli, 2011; Maloney, Stagnitti, & Schoo, 2013; Sloggett, Kim, & Cameron, 2003) and recently in SLP (Sokkar & McAllister 2015; Sokkar et al., 2019) of the benefits of providing student placements in private practice. Students bring new ideas and knowledge, increased treatment dosage for clients leading to improved therapeutic outcomes, and increased productivity and breadth of services, which result in higher levels of job satisfaction for clinicians. Sokkar et al. (2019) argued that despite the emerging body of evidence showing student placements are doable and effective for all stakeholders in SLP private practice, the perceived barriers appear to continue to hinder placement offers from the private practice sector. Common barriers perceived by private practitioners include time pressures, concern regarding loss of income, and confusion regarding university expectations (Maloney et al., 2013; Sokkar & McAllister, 2015). One of the most commonly reported barriers is a perception held by private practitioners that clients will not want, or be satisfied with, student-delivered services (Doubt et al., 2004; Kauffman, Maloney, & Schoo, 2010; Maloney et al., 2013; Sokkar & McAllister, 2015).

There is a large body of literature in the field of medicine and nursing to show that clients are highly satisfied with having students involved with their care. A systematic review conducted by Vaughn, Rickborn and Davis (2015) found that client satisfaction was not significantly affected by the participation of medical students. Further, numerous studies have shown a high level of client satisfaction with student-delivered health clinics (Asanad et al., 2018; Ellett, Campbell, & Gonsalves, 2010; Fröberg et al., 2018; Lawrence, Bryant, Nobel, Dolansky, & Singh, 2015). These studies also found that clients were highly likely to recommend the service to others. Although these studies occurred in student-delivered free clinics and therefore may be somewhat limited in their generalisability to feepaying clients in private practice, similar high levels of client satisfaction have also been found in student-delivered allied health services in university clinics where clients normally pay a fee for service (Forbes & Nolan, 2018; Larson & Kallail, 1987; Pershey & Reese, 2003). Clients reported

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valuing students' communication styles, professionalism, enthusiasm, knowledge and confidence. They also reported they were happy with the results and outcomes of the intervention they received from students. As with studentdelivered free clinics, clients attending university clinics were highly likely to recommend the service to others. However, once more it is difficult to generalise these findings to a typical private practice as clients choosing to attend university clinics would do so knowing they will be receiving student-delivered services.

There remains limited research exploring client satisfaction with student-delivered services in private practice. One study surveying clients in a single physiotherapy private practice found that students did not negatively impact client satisfaction (MacDonald, Cox, & Bartlett, 2002). When compared to services delivered by qualified therapists in both public and private settings, equally high levels of satisfaction for student- and therapistdelivered services were reported across both settings. In addition, very little is known about client satisfaction in SLP private practice. In one study exploring the benefits and challenges of student placements in SLP private practice, Sokkar and McAllister (2015) found private practitioners who had supervised students in the past felt that clients were satisfied with student-delivered services, with most clients agreeing to have students again in the future. However, these were perceptions of private practitioners; clients' views were not obtained. Armstrong, Fordham and Ireland (2004) reported on their experience facilitating a

Ireland (2004) reported on their experience facilitating a student placement in a SLP private practice. They surveyed a small number of clients (n = 4) following the completion of the student placement and found clients to be satisfied with receiving student-delivered services and agreeable to having a student again in the future. Yet this study was only a descriptive report of their experience in facilitating a student placement in one private practice.

Jacqueline Raymond (top) and Lindy McAllister

Ensuring a high level of client satisfaction is paramount for private practitioners as they feel client satisfaction impacts on the reputation of their practice, hence affecting their business (Kauffman et al., 2010). Understanding the satisfaction of clients with having student-delivered services in private practice is crucial to encouraging the private sector's willingness to offer student placements. The aim of this study was to evaluate client satisfaction with receiving student-delivered services in SLP private practice.

Method

This study was part of a larger study exploring the benefits. challenges and impact of supervising student placements in SLP private practice. Five predominantly paediatric-focused private practices from four urban (metropolitan and western Sydney) and one rural region of New South Wales participated in this study, hosting either one or two students at a time (student SLPs n = 7). The students were undertaking their intermediate or advanced paediatric clinical placement. There was no prescribed model for how private practitioners structured these placements. Student placements were typically 16-24 days in total, ranging from 1 day per week to block placements of 4 days per week. Private practitioners structured the placements to suit their unique practice structure and available resources. Some private practitioners offered clients extra free sessions or extra time in the session with the student, whereas other private practitioners passed the responsibility of the client sessions to the student without offering any free sessions or extra time. Four of the five practices taking part were clinic-based; the other practice was school-based, where

schools contracted the private practice to provide the service within schools.

The client satisfaction data will be reported on in this paper. This study was approved by The University of Sydney Human Research Ethics Committee.

Recruitment

Any client of the private practice that was receiving services from a student was eligible to participate. For clinic-based practices, the clients were parents or caregivers of the children receiving the SLP service (referred to as "parents" from here on). For the school-based practice, the clients were teachers and principals involved in the studentdelivered service (referred to as "teachers" from here on). A purposive sampling procedure (Etikan, Musa, & Alkassim, 2016) was used whereby the private practitioner supervising the placement or the practice administrator invited clients once the student placements were completed to participate in the study. The invitation was issued face-to-face and followed a prepared script. Potential participants were provided with written surveys and return envelopes. A return rate was not established to limit burden in this indirect recruitment procedure.

Data collection

A broad review of the literature for an existing survey did not identify any that could address our research questions, and consequently a survey was designed to canvass participant satisfaction levels. Survey questions included a mix of forced-choice, rating scales, and open-ended items which were used to elicit comments to clarify participant reasoning for forced-choice and rating scale responses. The survey contained seven questions pertaining to client satisfaction, their perceptions of the effectiveness of the management they received, whether they enjoyed and benefited from student-delivered services, and any aspects they did not appreciate. Surveys took 5–10 minutes to complete. The survey is available on request by contacting the corresponding author.

Data analysis

Descriptive statistics were used to summarise forcedchoice and rating scale responses. An inductive approach to thematic analysis (Braun & Clarke, 2006) was utilised to analyse the client's text responses. The first author read and re-read the text responses to become familiar with the data. Line-by-line open coding was then used to develop an initial framework of codes. To ensure authenticity was maintained, where possible the words of the participants were used as codes. Codes were examined and grouped into broader preliminary themes. The themes and associated extracts from the data were reviewed and refined with a second research team member to promote rigour (Thomas & Magilvy, 2011). Any differences and emerging themes were discussed and re-coded until consensus was achieved. Themes were identified when codes represented the ideas of at least 50% of participants. Finally, related themes were grouped into overarching themes and defined. On completion of the analysis, it was determined that inductive thematic saturation was achieved when coding of later participants did not reveal any new codes or themes (Saunders et al., 2018).

Results

Surveys were returned from four of the five private practices taking part. In total, 17 responses were received, 5 from teachers and 12 from parents. Table 1 summarises participant responses to the forced-choice and rating scale questions.



 Table 1. Client satisfaction with student-delivered

 services

Question	Number of participants $(n = 17)$
Overall, I was satisfied with having a student speech pathologist	35% agreed (n = 6), 65% strongly agreed (n = 11)
Was there anything you did not like about having a student speech pathologist?	6% yes (n = 1), 94% no (n = 16)
Do you feel the service (or your child's management) was any less effective as a result of having a student speech pathologist?	100% no (n = 17)
Would you agree to having a student speech pathologist again in the future?	94% yes (n = 16), 6% maybe (n = 1)

Overall, all participants agreed that they were satisfied with the services offered by the student SLP. The clients were unanimous in expressing that they felt the service they received was no less effective as a result of receiving student-delivered services. All but one client agreed to having students again in the future, with the one client stating it would depend on the commitment of time required of them to attend extra sessions.

Thematic analysis of open-ended questions revealed themes and subthemes pertaining to reasons why clients were satisfied with having a student SLP as summarised in table 2. Themes and subthemes are presented in italics and illustrated by exemplar quotes.

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Theme	Subtheme
Students appeared as professional and competent as qualified clinicians	 Students behaved like qualified clinicians Students possessed many positive attributes and characteristics Students worked positively with clients Clients enjoyed working with the students Students delivered effective therapy and management
Students value-add to the service	 Parents valued the benefits of extra sessions and therapy Students increased the access clients had to a service Students enabled more individualised therapy Students made the service more effective
Clients enjoyed and benefited from change in clinician	 Parents and teachers valued the different approaches and perspectives
Clients acknowledged the importance of on-the-job experience for students	Parents enjoyed being part of the student learning experience

Theme 1: Students appeared as professional and competent as qualified clinicians

It was clear that clients found students to be professional. They felt that *students behaved like qualified clinicians*. One parent stated, "I liked the fact that unless I was told she was a student you would not have known" (Parent 2), and one teacher commented, "They seem every bit as professional as the regular speechie" (Teacher 1). They also described students as *having many positive attributes and characteristics* such as being confident, knowledgeable, organised, enthusiastic and possessing a positive attribute. They felt *students worked positively with clients*, reporting students engaged and interacted positively with the children. Participants clearly felt that *clients enjoyed working with the students*.

It was also evident from the data that clients felt students delivered as effective therapy and management as a qualified clinician would. They made comments such as: "therapy was consistent with previous sessions" (Parent 12) and "it worked well and my daughter continued to develop skills during this time" (Parent 11).

Theme 2: Students value-add to the service

Participants commented on and appreciated the numerous ways students added value to the service they were receiving. Parents valued the benefits of extra sessions and therapy. This was demonstrated by one parent saying, "I loved having extra sessions to enhance my four-year-old's needs... it benefited his speech therapy as he was bombarded and he mastered concepts and sounds at a faster rate" (Parent 9). There was a strong feeling among the teachers surveyed that students were able to increase the access clients had to a service. They made comments such as: "There were extra people to help with the very heavy load we have at our school" (Teacher 5) and "[with students] more children can have access to a speech therapist" (Teacher 2). They also appreciated that students enabled more individualised therapy for children at their school: "Having the students meant we could work effectively in small groups. The students were able to work closely with a group rather than the whole class" (Teacher 3). This teacher also explained that by having students there was "opportunity for one on one assessment as well as close monitoring of the targeted students" (Teacher 3). Many participants went on to say that students made the service more effective when asked if the service was any less effective by having student SLPs. They made statements such as, "guite the opposite" (Teacher 1), "students enhance the service" (Teacher 3) and "if anything, it was more effective" (Teacher 5).

Theme 3: Clients enjoyed and benefited from change in clinician

Parents and teachers felt that the children benefited from having a change in clinician. Not only did they comment that children enjoyed the change, but they also valued the benefit for children in learning to interact with someone new. They made comments like, "It was a brilliant idea for my son who is starting school in 6 months to engage with other helpers/therapists/teachers" (Parent 10) and "[My son] was excited to go and interact with a new person" (Parent 1). Also, *parents and teachers valued the different approaches and perspectives* that resulted from having student-delivered services: "Offers new approaches/ strategies. Different perspectives" (Parent 7); "[Students] bring a new perspective to my child's problems" (Parent 3).

Theme 4: Clients acknowledged the importance of on-the-job experience for students

It was clear that parents and teachers valued the role and importance of clinical education. They understood that student placements are necessary for student learning and that their sessions provided "real life" experiences. Parents made comments such as: "I understand that all professions need on-the-job experience which is usually more valuable than theoretical components of uni. Students are then able to 'tie' theory to practice!" (Parent 8); "I am strongly supportive of students having 'real' experiences with [clients] in a practical environment" (Parent 12); "I think that students need to see real cases of speech problems to better understand the needs of some" (Parent 2); and "How else does a student learn?" (Parent 4). They not only expressed the need for student placements but also expressed that they enjoyed being part of the student learning experience: "I enjoyed being part of the student learning" (Parent 11). One parent commented, "[I was] privileged to be part of the teaching process between [the clinician] and student" (Parent 10).

Discussion

This study found that all clients surveyed were satisfied with receiving student-delivered services in SLP private practice and almost all were happy to continue to work with student SLPs. These results concur with the small body of evidence demonstrating high levels of client satisfaction with student-delivered services in fee-for-service models in university clinics (Forbes & Nolan, 2018; Larson & Kallail, 1987; Pershey & Reese, 2003) and private practice (Armstrong et al., 2004; MacDonald et al., 2002). As identified in these earlier studies, clients in this study also found the service to be effective and qualitative responses show they appreciated the many positive attributes students possessed such as their professionalism and knowledge. These results support the experiences of private practitioners who have offered student placements in the past (Sokkar & McAllister, 2015; Sokkar et al., 2019), reporting that their clients were satisfied with, and willing to continue, receiving student-delivered services for similar benefits.

The qualitative results revealed more in-depth understanding of the reasons for client satisfaction. Clients valued the benefits this afforded their children in having a change in clinician, bringing differing perspectives and approaches, and enjoyment children experience in having someone new to interact with. Also, clients appreciated the value students added to the service they receive, such as extra or longer treatment sessions, increased access to a service with reduced wait times and more children able to be serviced in schools, and the ability to provide more targeted and individualised treatment. This is a significant finding considering the current climate of difficulty meeting evidence-based intervention frequency and dosage, staff shortages and growing waitlists (Ruggero, McCabe, Ballard, & Munro, 2012). Offering student placements appears to be a successful means of increasing client access to, and frequency of, service provision, helping to reduce client wait times and offer intervention programs that are more aligned with evidence-based recommendations.

These results challenge the common perception that clients lack satisfaction with student-delivered services in SLP private practice. An additional finding further contradicting this perception was that clients in this study strongly valued their role and contribution in the clinical education of future speech pathologists, expressing the importance and need for student learning. This is commonly seen in medicine (Coleman & Murray, 2002); however, clients in medical practices were more willing when there was a lower degree of student involvement (Vaughn et al., 2015). In contrast, this study found high levels of client satisfaction for relatively high degrees of student involvement, despite the context of a fee-forservice. This may be attributed to the reported benefits of added value, enjoyment and effective outcomes experienced with student-delivered services.

Limitations and future directions

A number of factors may limit the generalisability of these findings to the general client population in private practice. The purposive sampling procedure utilised may have excluded clients who previously had student-delivered services but ceased as they were not satisfied. To limit bias, clients were recruited from a diverse range of private practices who utilised varying student placement models and frameworks. Also, as a return rate was not established in this study, estimation of client refusal was not possible; where clients who were less satisfied may have chosen not to participate in the study. Further, clients who did participate may have inadvertently felt pressured to rate high levels of satisfaction to please their SLP. However, the anonymity of the data collection process attempted to control for this.

It is not possible to comment regarding which aspects of student-placement models may have influenced client satisfaction levels as this study did not capture the specifics of the various models used, yet all clients were satisfied. Further research exploring and comparing client satisfaction levels across differing models of student placements used would be beneficial. This will better inform private practitioners wishing to offer student placements in the future and equip them with the knowledge of frameworks and models that will best suit their practice and preferences.

Conclusion

The results of this study suggest that clients are satisfied with receiving student-delivered services in private practice. They appreciated several aspects, such as the added value students bring to the service. With emerging evidence from previous studies that student placements in private practice are doable and effective, with benefits for clients, the supervising clinicians, and the private practices, the question remains: Why are more private practices not offering student placements? It seems private practitioners need more support understanding the benefits for and the views of clients, but also with the models and frameworks they can use to implement student placements successfully. The evidence suggests that private practice is an effective context for student placements from the perspective of clients and clinicians. However, understanding the experiences and perceptions of students undertaking their placements in private practice is needed. comparing these experiences to those in more traditional settings.

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