

Speech Therapy Questionnaire for Families of Children born with a Cleft.

This questionnaire is entirely anonymous. The questionnaire has been designed to gather information and opinions from our Cleft community regarding the system for Speech Therapy. Services and access to Speech and Language Therapy (SLT) differs around New Zealand. In order to effectively advocate for increased resources in both Health and Education SLT services, we need your help to properly assess the situation and present your issues.

Please help us by filling out the following questionnaire and returning it to: Cleft Lip & Palate Support Group, Freepost 131468, PO Box 13 385, Onehunga, Auckland.

Section 1:

Where in New Zealand do you live? _____

How old is your child now? _____

What type of cleft was your child born with? _____

Did your child require Speech Therapy? Yes / No

If no, thanks for your time. There is no need for you to continue. However, if you have some comments or opinions about the system in your region, please add those in the *Additional Comments* section at the end.

If yes, for how long did he/she attend? _____

At what age(s) did he/she attend? _____

What agencies supplied the service? Child Development Services Cleft Clinic SLT Special Education (SE) Early Intervention Team Special Education (SE) School Team Private

Were the speech difficulties directly related to the cleft? Yes / No

Did he/she require surgery (like pharyngoplasty) to rectify the speech difficulties? Yes / No

Did you use the public system or private system for speech therapy?

Public  Did you see the cleft team Speech Therapists? **Yes / No**

Did you receive visits from Child Development SLTs? **Yes / No**


Did you see SE, Early Intervention team? **Yes / No**

Did you see SE at school? **Yes / No**

Did you have to wait to commence speech therapy? **Yes / No**

If so, how long and with which agencies? _____

_____ If you could have afforded it, would you have considered private SLT? **Yes /No**

Private  How did you fund this? _____

Both

Section 2: Tick all that apply to your situation.

We chose the private system because:

My child's needs were immediate and we didn't want to wait.

My child's speech difficulties were not severe enough to be eligible for the public service.

We believed our child would get the best treatment.

It was more convenient.

Other (Please Explain) _____

We chose the public system because:

That's what we could afford.

My child's needs were directly related to the cleft, so cleft experience was necessary.

The public system worked well and was something we knew.

We believed our child would get the best treatment.

It was more convenient.

Other (Please Explain) _____

Section 3: Respond to these statements by circling the most appropriate option

I am happy with the treatment my child received.

Strongly Agree Agree Not Sure Disagree Strongly Disagree

I was satisfied with the public health system for Speech Therapy. (Child Development Services)

Strongly Agree Agree Not Sure Disagree Strongly Disagree

I was satisfied with the public SE system for Speech Therapy. (Education Department)

Strongly Agree Agree Not Sure Disagree Strongly Disagree

My child received Speech Therapy when needed.

Strongly Agree Agree Not Sure Disagree Strongly Disagree

My child received speech therapy for as long as needed.

Strongly Agree Agree Not Sure Disagree Strongly Disagree

My child received speech therapy when we could afford it.

Strongly Agree Agree Not Sure Disagree Strongly Disagree

My child's speech therapy put financial strain on the household.

Strongly Agree Agree Not Sure Disagree Strongly Disagree

My child could have benefited from more speech therapy.

Strongly Agree Agree Not Sure Disagree Strongly Disagree

Section 4 :

How has the transition from Child Development based Speech Therapy to Education Services based Speech Therapy worked for your family?

Do you feel that your family have the skills & knowledge to confidently deal with speech issues?

What do you do when you have a Speech related issue to overcome?

Section 5: Additional Comments

Do you have any additional comments you would like to make about Speech Therapy for children with cleft conditions?

THANK YOU

