Sensory modulation training

Evaluation report for the 2019 and 2020 workshops
List of Figures

Figure 1. Evaluation for the sensory modulation workshops................................. 10
Figure 2. Knowledge of clinical principles before and after the workshop............... 12
Figure 3. Knowledge of therapeutic use of self before and after the workshop .......... 13
Figure 4. Knowledge of people-centred approaches before and after the workshop..... 14
Figure 5. Knowledge of cultural responsiveness when using sensory modulation before and after the workshop. ................................................................. 14
Figure 6. Knowledge of sensory assessments before and after the workshop .......... 15
Figure 7. Knowledge of sensory modulation therapeutic activities before and after the workshop. ............................................................................................................. 16
Figure 8. Knowledge of personal safety tools before and after the workshop .......... 16
Figure 9. The gender profile of survey respondents (96 respondents)..................... 20
Figure 10. Ethnicity of survey respondents (98 respondents who selected all applicable ethnics groups). ................................................................. 20
Figure 11. Years of experience among survey respondents (98 respondents) .......... 21
Figure 12. Time period since participants’ previous sensory modulation training (150 respondents). ................................................................. 22
Figure 13. Workshop feedback (101 Respondents). ................................................ 23
Figure 14. People’s experiences in the past six-months since the workshop (33 respondents). ................................................................. 24
Figure 15. Frequency of using sensory modulation since the workshop (33 respondents). 25
Figure 16. The types of sensory modulation related activities undertaken since the workshop (30 respondents). ................................................................. 25
Figure 17. Post-workshop activities most commonly ranked in the top three (25 respondents). ................................................................. 27

List of Tables

Table 1. Sensory Modulation Workshops ................................................................. 9
Table 2. The Discipline or Profession of the Respondents ..................................... 21
Executive Summary

Background

Sensory modulation (whakaāio ā-rongo) is utilised by mental health and addiction services across Aotearoa New Zealand, in community and inpatient settings. Te Pou has supported mental health and addiction services in the implementation of sensory modulation since 2009, with a focus on supporting staff learning and development. More recently, Te Pou co-delivered a new series of sensory modulation workshops in 2019/2020 to equip the workforce with the knowledge and skills to use sensory modulation.

The purpose of this evaluation report is to identify whether participants’ values, attitudes, knowledge and skills in the application of sensory modulation increased as a result of attending the workshop. The key evaluation questions are outlined below.

1. How effective was the workshop in improving participants’ knowledge about
   a. sensory processes and issues?
   b. therapeutic use of self and people-centred approaches?
   c. strategies to support cultural responsiveness when using sensory modulation?
   d. application of formal and informal sensory modulation assessments?
   e. developing and facilitating sensory modulation plans?
   f. developing personal safety plans in the use of the sensory modulation?
2. How well were participants able to implement sensory modulation in their work settings?

Method

The workshops were co-delivered by Dr Gilbert Azuela and Caro Swanson, Te Pou project lead and service user lead respectively, in collaboration with the local DHBs. Registration was open to DHBs and government-funded mental health, addiction and disability workers who had previously undertaken introductory training in sensory modulation. Six sensory modulation workshops were delivered between November 2019 and January 2020. A total of 188 people attended the workshops.

Evaluation surveys were sent to workshop attendees one week prior to the workshop, immediately after the workshop, and six-months after the workshop. An adapted version of the Sensory Modulation Core Competency Questionnaire (Azuela and Robertson, 2016) was used to measure changes in knowledge amongst respondents. A section about cultural responsiveness was added to the questionnaire to reflect the workshop objectives and evaluation questions.
Results

The pre-workshop survey was completed by 156 respondents. The post-workshop survey was completed by 111 out of 188 workshop participants, reflecting a 59 per cent response rate. A total of 33 people responded to the six-month follow-up survey, reflecting an 18 per cent response rate.

Overall, nearly all post-workshop survey respondents agreed the workshop was useful and relevant. Most respondents were occupational therapists and registered nurses.

The pre- and post- workshop evaluation indicated knowledge increased in the following areas:

- sensory processes and issues
- therapeutic use of self and people-centred approaches
- strategies to support cultural responsiveness
- sensory modulation assessments
- sensory modulation plans
- personal safety plans.

Knowledge about performing a basic sensory assessment and justifying assessment results showed the biggest increases, followed by knowledge about the use of sensory modulation activities. In comparison, a smaller change was observed in knowledge about therapeutic use of self, people-centred approaches, recognising signs of distress and cultural responsiveness, as the majority of respondents already felt knowledgeable in these areas prior to the workshop.

The six-month follow-up evaluation indicated three-quarters of respondents agreed they felt confident to apply the workshop learnings in practice and had opportunities to use sensory modulation in their work setting. Since the workshop, nearly one-quarter of respondents used sensory modulation to support people on a daily basis (24 per cent) and almost half on a weekly basis (42 per cent). The evaluation identified a need for practical resources and ongoing support after sensory modulation training to help people apply their learnings into practice.

Conclusion

The workshops aimed to advance participants’ values, attitudes, knowledge and skills in the application of sensory modulation. Overall, the evaluation findings show the workshops have met this intended purpose. Most respondents agreed the workshops were relevant to their roles and services. The workshop improved people’s knowledge across all competency areas covered in the training, with the largest improvements observed in knowledge about sensory modulation assessments and activities. Thus, it is recommended that similar workshops continue to be delivered to equip people working in the mental health services as
well as the addiction and disability sectors with the knowledge and skills to use sensory modulation.

Whilst the response rate to the six-month follow-up was modest, findings indicated most respondents were able to apply the workshop learnings in their work settings. The majority of respondents felt confident to apply the workshop learnings in practice and had opportunities to use sensory modulation in their work setting. The evaluation identified future opportunities for improving workforce access to sensory tools, practical resources, and ongoing support to further strengthen the sustainability of sensory modulation practice. Based on the survey findings, it is recommended that future workshops can further support the application of sensory modulation in work settings by providing toolkits or other practical resources, access to guidance and support through service-led activities or initiatives, and coaching or mentoring systems.
Background

Sensory modulation (whakaāio ā-rongo) is utilised by mental health and addiction services across Aotearoa New Zealand, in community and inpatient settings. The intention of sensory modulation is to support people using sensory tools or activities to help increase self-regulation, resilience, and enable participation in everyday life (Sutton & Nicholson, 2011). Sensory modulation has strong links to trauma informed approaches and is regarded as a useful tool for supporting least restrictive practice (Lloyd, King, & Machingura, 2014; Te Pou o te Whakaaro Nui, 2010). Local research shows sensory modulation is perceived as an effective tool for facilitating calmness; improving therapeutic experiences; and supporting the development of trust and rapport between staff and people accessing services (Sutton & Nicholson, 2011; Sutton, Wilson, Van Kessel, & Vanderpyl, 2013). Thus, sensory modulation is in line with He Ara Oranga (Government Inquiry into Mental Health and Addiction, 2018) and the recommendations around the use of people-centred therapeutic approaches within services.

Te Pou has supported mental health and addiction services in the implementation of sensory modulation since 2009, with a focus on supporting workforce learning and development. This included the delivery of sensory modulation workshops for district health board (DHB) mental health services in 2011 and 2012 to support staff training and set up of sensory rooms. This was followed by train-the-trainer workshops in 2012.

Five years later, a stocktake survey indicated the sustainability of sensory modulation training and practice remains a work-in-progress for some services. Key challenges include a need for up-to-date resources about sensory modulation, as well as dedicated time and trainers to support ongoing training (Te Pou o te Whakaaro Nui, 2017).

Against this background, Te Pou developed a new workshop to address the gaps in sensory modulation training. The workshop aimed to support people working in mental health services to advance their knowledge, skills, values and attitudes in advancing their practice in the application of sensory modulation.

Evaluation objectives

The purpose of this evaluation report is to identify whether participants’ values, attitudes, knowledge and skills in the application of sensory modulation increased as a result of attending the workshop. The key evaluation questions are outlined below.

1. How effective was the workshop in improving participants’ knowledge about
   a. sensory processes and issues?
   b. therapeutic use of self and people-centred approaches?
   c. strategies to support cultural responsiveness when using sensory modulation?
d. application of formal and informal sensory modulation assessments?
e. developing and facilitating sensory modulation plans?
f. developing personal safety plans in the use of the sensory modulation?

2. How well were participants able to implement sensory modulation in their work settings?

**Method**

**Workshops and participants**

The workshops were co-facilitated by three facilitators, Dr Gilbert Azuela and Caro Swanson, project lead and service user lead respectively from Te Pou, in collaboration with a person from the local DHB. Local lived experience, cultural or clinical facilitators were included whenever possible.

Registration was open to DHBs and government-funded mental health, addiction and disability workers who had previously undertaken introductory training in sensory modulation. The workshop objectives are outlined in Appendix A.

Six sensory modulation workshops were delivered between November 2019 and January 2020. A total of 188 people attended the workshops. The details of the workshops are presented in Table 1.

<table>
<thead>
<tr>
<th>Workshop location</th>
<th>Host DHB</th>
<th>Workshop date</th>
<th>Number of participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tauranga</td>
<td>Bay of Plenty</td>
<td>6 November 2019</td>
<td>28</td>
</tr>
<tr>
<td>Dunedin</td>
<td>Southern</td>
<td>8 November 2019</td>
<td>27</td>
</tr>
<tr>
<td>Porirua</td>
<td>Capital and Coast DHB (MHAIDS)</td>
<td>15 November 2019</td>
<td>31</td>
</tr>
<tr>
<td>Hamilton</td>
<td>Waikato</td>
<td>18 November 2019</td>
<td>29</td>
</tr>
<tr>
<td>Palmerston North</td>
<td>Mid Central</td>
<td>26 November 2019</td>
<td>37</td>
</tr>
<tr>
<td>Whangarei</td>
<td>Northland</td>
<td>29 January 2020</td>
<td>36(^1)</td>
</tr>
</tbody>
</table>

\(^1\) The total number of participants were not confirmed for the Whangarei workshop, the count provided is a close estimate.
Evaluation surveys

In line with the key evaluation questions, the method involved a pre-post workshop comparison of participant knowledge and a six-month follow-up about the use of workshop learnings in practice. The data collection occurred in three-stages (see Figure 1).

Pre- and post- workshop surveys
People who registered for the workshop were emailed a link to an online pre-workshop survey approximately one week prior to the workshop, and then another link to the post-workshop survey immediately after the workshop. Paper copies of the pre-workshop evaluation were available at the start of the workshop for anyone who did not respond to the online survey.

The surveys asked workshop participants to rate their knowledge, skills and attitudes before and after the workshop using an adapted version of the Sensory Modulation Core Competency Questionnaire (Azuela & Robertson, 2016). This questionnaire covered the following key areas of sensory modulation:

- knowledge of clinical principles
- therapeutic use of self
- use of a sensory assessment
- selection of a sensory modulation therapeutic activities
- displaying supportive attitude when using sensory modulation
- personal safety tools.

A section about cultural responsiveness was added to the questionnaire to reflect the workshop objectives. Respondents rated their self-perceived knowledge across these competency areas on a 5-point Likert scale ranging from 1 (none) to 5 (excellent).

General feedback about the workshop and respondents’ demographic information were also collected in the post-workshop survey. These results are presented in Appendix B.

Six-month follow-up
At the end of the workshop, participants were asked to complete a learning activity within the following six-months to demonstrate how the workshop learnings have impacted on their practice. This was a written activity involving a one-page description of either a case study, service evaluation or education activity related to sensory modulation. However, the
response to the activity was low as only a few people submitted a written description within the six-month post-workshop period.

Instead, a short survey was developed to evaluate how the workshops have impacted on people's practice. Workshop attendees were sent a link to an online follow-up survey approximately six months after the workshop. The survey yielded a higher response rate than the learning activity (18 per cent compared to 5 per cent). The survey questions asked about people’s experiences since the workshop, their use of sensory modulation in the work setting, and preferences for different types of post-workshop activities. Results for the six-month follow-up survey are presented in Appendices C and D.

**Analysis**

Survey data was analysed through descriptive analysis using Microsoft Excel. During the analysis of the Sensory Modulation Core Competency Questionnaire, ratings indicating average (3), good (4) and excellent (5) knowledge were collated and used to calculate the proportion of participants who rated themselves as knowledgeable on each competency area. Key themes were identified for open-ended survey data.
Results

Change in participant knowledge was measured via the pre- and post-workshop surveys. The pre-workshop survey was completed by 156 respondents. The post-workshop survey was completed by 111 out of 188 workshop participants, reflecting a 59 per cent response rate.

In line with the evaluation questions, this section is presented under the following competency areas:

- sensory processes and issues
- therapeutic use of self and people-centred approaches
- strategies to support cultural responsiveness
- sensory modulation assessments
- sensory modulation plans
- personal safety plans.

Sensory processes and issues

Knowledge of clinical principles about sensory processes and issues showed improvement. After completing the workshop, the proportion of respondents knowledgeable\(^2\) about charting basic patterns of responses and interpreting characteristics of sensory stimulation nearly doubled (see Figure 2). A smaller improvement was observed in knowledge about classifying different body senses as most respondents (87 per cent) rated themselves as knowledgeable prior to the workshop.

\(^2\) Average, Good and Excellent ratings were interpreted as being knowledgeable; whereas None and Limited indicate insufficient knowledge.
Therapeutic use of self and people-centred approaches

The therapeutic use of self and people-centred approaches are foundational principles for sensory modulation. It is important to establish a trusting relationship between staff and people accessing services when facilitating assessments and activities. Prior to the workshop, more than four in five respondents (80 to 94 per cent) reported being knowledgeable about therapeutic use of self, which increased to all respondents (100 per cent) after the workshop (see Figure 3).

![Knowledge about therapeutic use of self showed small increases](image)

**Figure 3.** Knowledge of therapeutic use of self before and after the workshop.

After completing the workshop, nearly all respondents (95 to 96 per cent) rated themselves as knowledgeable in people-centred approaches when using sensory modulation. The proportion of respondents who reported being knowledgeable about explaining the therapeutic use of sensory spaces to people accessing services nearly doubled after the workshop (see Figure 4).
Knowledge of people-centred approaches showed notable increases in two areas

<table>
<thead>
<tr>
<th>Percentage of knowledgeable respondents</th>
<th>Pre-workshop (153 respondents)</th>
<th>Post-workshop (107 respondents)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Explaining the therapeutic use of sensory space to people accessing services</td>
<td>51%</td>
<td>95%</td>
</tr>
<tr>
<td>Managing a safe environment while using the sensory space</td>
<td>69%</td>
<td>96%</td>
</tr>
<tr>
<td>Displaying a supportive attitude towards people accessing services</td>
<td>85%</td>
<td>96%</td>
</tr>
</tbody>
</table>

Figure 4. Knowledge of people-centred approaches before and after the workshop.

Strategies to support cultural responsiveness

The workshop included a group activity to help people think about cultural considerations when using sensory modulation and explore useful strategies and sources of cultural support. After completing the workshop, nearly all respondents (95 per cent) rated themselves as knowledgeable about cultural responsiveness when using sensory modulation, compared to around three-quarters (69 to 76 per cent) before the workshop (see Figure 5).

Knowledge of cultural responsiveness showed some increases across all areas

<table>
<thead>
<tr>
<th>Percentage of knowledgeable respondents</th>
<th>Pre-workshop (152 respondents)</th>
<th>Post-workshop (107 respondents)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understanding the importance of cultural responsiveness in the use of sensory modulation</td>
<td>69%</td>
<td>95%</td>
</tr>
<tr>
<td>Recognising when people are likely to benefit from the integration of cultural practices (e.g. tikanga Māori practices)</td>
<td>76%</td>
<td>95%</td>
</tr>
<tr>
<td>Supporting the involvement of local cultural resources (e.g. Māori health workers and advisors)</td>
<td>74%</td>
<td>95%</td>
</tr>
</tbody>
</table>

Figure 5. Knowledge of cultural responsiveness when using sensory modulation before and after the workshop.
Sensory modulation assessments

Before using sensory modulation to support people accessing services, it is essential to conduct a formal or informal assessment to identify individual preferences for sensory tools or activities. Around two in five respondents (40 to 46 per cent) reported being knowledgeable about sensory assessments prior to the workshop. This doubled to nearly all respondents (89 to 92 per cent) after completing the workshop (see Figure 6). Knowledge about performing a basic sensory assessment and justifying assessment results showed the biggest improvements across all areas of the competency questionnaire.

![Figure 6. Knowledge of sensory assessments before and after the workshop.](image)

Sensory modulation plans

Following an assessment, the next step is to develop a plan for facilitating and reviewing the use of sensory modulation tools and activities. Prior to the workshop, around half of respondents (53 to 58 per cent) reported being knowledgeable about the use of sensory modulation activities. This nearly doubled (94 to 96 per cent) after the workshop (see Figure 7).
Personal safety plans

Personal safety plans help to identify early warning signs, appropriate situations for using different sensory tools and activities, and are linked to crisis management plans. The proportion of respondents who reported being knowledgeable about itemising people’s preferences on sensory modulation therapeutic activities increased from 59 to 95 per cent after the workshop. Prior to the workshop, most respondents rated themselves as knowledgeable in recognising early warning signs for distress and helping people to avoid or minimise stress triggers, therefore only a small change in knowledge were observed for these measures (see Figure 8).
Summary

Overall, improvements were observed across all competency areas covered in the workshop. Nearly all respondents (87 to 100 per cent) reported being knowledgeable across all the competency areas after the workshop. Knowledge about performing a basic sensory assessment and justifying assessment results showed the biggest improvements, followed by knowledge about the use of sensory modulation activities.

In comparison, a smaller change was observed in knowledge about therapeutic use of self, people-centred approaches, recognising signs of distress and cultural responsiveness, as most respondents already felt knowledgeable in these areas prior to the workshop.

Participant demographics, workshop feedback, and results from the six-month follow-up survey are outlined in the Appendices.
Conclusion

The training workshops delivered in 2019/2020 aimed to advance participants’ values, attitudes, knowledge and skills in the application of sensory modulation. The evaluation findings show the workshops have met this intended purpose in addressing the current gaps in sensory modulation training. Most respondents were occupational therapists and registered nurses who provided positive feedback about the workshops and largely agreed the workshops were relevant to their roles and services. The workshop was effective for improving people’s knowledge across all competency areas covered in the training, with the largest improvements observed in knowledge about sensory modulation assessments and activities. Thus, it is recommended that similar workshops continue to be delivered to equip people working in the mental health services as well as the addiction and disability sectors with the knowledge and skills to use sensory modulation.

Whilst the response rate to the six-month follow-up was modest, findings indicated most respondents were able to apply the workshop learnings in their work settings. The majority of respondents felt confident to apply the workshop learnings in practice and had opportunities to use sensory modulation in their work setting. To strengthen future implementation, it is recommended that future workshops provide participants with toolkits or other practical resources to support learning and development after a workshop. Providing guidance and support through service-led activities or initiatives and coaching or mentoring systems is also recommended. Moreover, designated funding and time are required to help services replenish and maintain their sensory tools and spaces to support ongoing sensory modulation practice.
Appendix A – Workshop objectives

This workshop will support participants to develop their values, attitudes, knowledge and skills in advancing their practice in the application of sensory modulation.

The workshop is comprised of six topics presented in modules with specific learning objectives.

After the workshop, participants will be able to:

1. **identify** and **interpret** sensory processing presentations and issues in people experiencing mental health and addiction needs
2. **identify** systems and processes (strategies) for ensuring cultural responsiveness in using sensory modulation
3. **review** the application of formal and informal sensory modulation assessment through process mapping
4. **develop** a sensory modulation plan
5. **design** a health and safety plan in the context of the sensory modulation approaches
6. **advance** their practice in the application of sensory modulation in their work setting by participating in one of the post-workshop learning activities.
Appendix B – Demographics and workshop feedback

Gender, age, and ethnicity

Based on the post-workshop survey, 88 per cent of respondents identified as female/wāhine and 11 per cent were male/tāne (see Figure 9). Respondents’ age ranged from 18 to 65+ years, with almost two-thirds aged 40 years and over (65 per cent). Nearly all respondents identified as New Zealand European/Pākehā (69 respondents) and 22 respondents were Māori (see Figure 10).

Figure 9. The gender profile of survey respondents (96 respondents).

Figure 10. Ethnicity of survey respondents (98 respondents who selected all applicable ethnics groups).
Profession and experience

Occupational therapists (39 per cent) and registered nurses (32 per cent) were the key disciplines or professions among respondents (see Table 2). Around two-thirds of respondents (65 per cent) have been in practice for five years or more and a large proportion of these respondents have been in practice for 20 years or more (see Figure 11).

Table 2. The Discipline or Profession of the Respondents

<table>
<thead>
<tr>
<th>Discipline or profession</th>
<th>Number of respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupational therapist</td>
<td>38</td>
</tr>
<tr>
<td>Registered nurse</td>
<td>31</td>
</tr>
<tr>
<td>Social worker</td>
<td>14</td>
</tr>
<tr>
<td>Other</td>
<td>8</td>
</tr>
<tr>
<td>Psychologist</td>
<td>3</td>
</tr>
<tr>
<td>Enrolled nurse</td>
<td>2</td>
</tr>
<tr>
<td>Support Worker</td>
<td>1</td>
</tr>
<tr>
<td>Peer Support Worker</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total responses</strong></td>
<td><strong>98</strong></td>
</tr>
</tbody>
</table>

Figure 11. Years of experience among survey respondents (98 respondents).

From the pre-workshop survey, nearly half of respondents (44 per cent) had undertaken previous sensory modulation training within the last two years (see Figure 12). Most people
have previously completed in-house training organised by their service, and a few others were trained via tertiary education or external training provider. Twenty-nine respondents reported they had no previous training in sensory modulation.

**Figure 12.** Time period since participants’ previous sensory modulation training (150 respondents).

**Workshop feedback**

Overall, nearly all survey respondents agreed the workshop was useful and relevant (see Figure 13). Respondents found the workshop valuable, particularly the co-facilitation of the workshop by knowledgeable facilitators who provided stories and examples from lived experience, cultural and clinical perspectives. Positive feedback also highlighted the usefulness of the workshop content about sensory processing, sensory modulation assessments, cultural responsiveness, case study examples and group discussions. Some respondents indicated an interest for more practical learning, such as role plays or hands-on practice with sensory modulation assessments and sensory tools.

Examples of the open-ended feedback from respondents about the parts of the workshop which had the most impact on them are outlined below.

- “The facilitators Gilbert and Caro were fantastic, each with their own perspectives.”

- “I thought that having Caro attend was fantastic. Lived experience is the best way that we can begin to inform our practice.”

- “The cultural aspects - made me think a lot about how to make this appropriate and relevant for Māori and other minority ethnic groups.”

- “Very valuable workshop to have been involved in. The group work and discussions were a great way of exploring other ideas and also voicing your own knowledge to the larger group.”
Summary

In summary, the majority of respondents were occupational therapists and registered nurses. Most respondents met the pre-requisite of having completed prior training in sensory modulation. Nearly all survey respondents agreed the workshop was useful and relevant. Positive feedback highlighted the value of co-facilitation which provided lived experience, cultural and clinical perspectives, as well as the workshop content about sensory processing and assessments, case study examples and group discussions.

Figure 13. Workshop feedback (101 respondents).
Appendix C – Application of workshop learnings (six-month follow-up)

A total of 33 people responded to the six-month follow-up survey, reflecting an 18 per cent response rate.

Experiences after the workshop

The survey asked respondents to rate their agreement with statements about their experiences after the workshop (see Figure 14). Three-quarters of respondents agreed to some extent that they felt confident to apply the workshop learnings in practice (76 per cent) and had opportunities to use sensory modulation in their work setting (75 per cent). In comparison, only half of respondents felt supported to apply the workshop learnings in practice, indicating a potential need for ongoing post-workshop support.

When asked about access to sensory tools in their work settings, ten respondents (30 per cent) disagreed to some extent. Challenges around accessing and buying sensory tools was further reflected in the open-ended comments (eg “I find it extremely time consuming to put together sensory resources […] staff are happy to use the resources, however replenishing supplies is a huge task on top of my case load.”).

Figure 14. People’s experiences in the past six-months since the workshop (33 respondents).
Use of sensory modulation

Since the workshop, almost one-quarter of respondents used sensory modulation to support people only a daily basis (24 per cent) and almost half on a weekly basis (42 per cent) (see Figure 15). Three respondents had not used sensory modulation since the workshop.

Of the 30 respondents who used sensory modulation in the six months since the workshop, around 4 in 5 (26 respondents; 87 per cent) supported people using sensory approaches within their work settings (see Figure 16). More than half of respondents shared knowledge or provided education to their co-workers (63 per cent) and familiarised themselves with different types of sensory tools (57 per cent).

**Figure 15. Frequency of using sensory modulation since the workshop (33 respondents).**

**Figure 16. The types of sensory modulation related activities undertaken since the workshop (30 respondents).**
Respondents gave examples of how they applied these activities. Examples included discussions about sensory modulation with people accessing services and their whānau, as well as co-workers, student nurses, and emergency department staff. Some respondents completed a review of their services’ use of sensory modulation and others have set up new sensory spaces or resources for their services.

- “I feel more confident in applying sensory modulation techniques. Since the workshop I have adapted the sensory modulation assessment that I use. It now provides much more practical information.”

- “Education to [emergency department] staff, made up packs to be given out in ED, developed culturally specific packs.”

- “I have done the service assessment with my colleague and submitted this as the post-training exercise. I am looking at making a kit that includes resources that are culturally sensitive to Māori [people].”

Summary

Six-months after the workshop, the majority of survey respondents felt confident to apply the workshop learnings in practice and had opportunities to use sensory modulation in their work setting. However, lack of access to ongoing support and sensory tools were potential barriers to applying workshop learnings in the work setting. Many respondents have used sensory modulation to support people on a daily or weekly basis since the workshop, as well as other sensory modulation related activities such as sharing knowledge with co-workers and familiarising themselves with different sensory tools. Results identified a potential need for practical resources about places to buy sensory tools, examples of sensory activities, and hand-outs or posters to share with people accessing services.
Appendix D – Post-workshop activities

At the end of the workshop, participants were asked to complete a learning activity within the following six-months to demonstrate how the workshop learnings have impacted on their practice. A total of 10 post-workshop activities were submitted (5 per cent response rate); this included eight written case studies, one in-service staff education, and one service evaluation. Feedback was provided for each submission to further support the participant’s learning and development.

A total of 33 people responded to the six-month follow-up survey, reflecting an 18 per cent response rate. From the six-month follow-up survey, around three-quarters of respondents agreed the post-workshop activity seemed feasible and five people disagreed (see Figure 14). Open-ended comments indicated the impact of the COVID-19 alert levels and lockdown (from around March to May 2020) made implementation in the work setting difficult during this six-month period.

Given the low response to the post-workshop activity, survey respondents were asked to rank the types follow-up activities or resources they would find helpful to support learning and development after a workshop. Respondents indicated the most interest in having a toolkit or other practical resources, followed by a service-led activity or initiative and coaching or mentoring system (see Figure 17).

![Figure 17. Post-workshop activities most commonly ranked in the top three (25 respondents).](image)

Open-ended comments highlighted the potential need for practical resources that provide information about places to buy sensory tools, examples of sensory activities, and hand-outs or posters to share with people accessing services. Examples of these comments are outlined below.

- “I think the tool kit would be amazing, links to places to buy sensory things.”
- “Information on where to buy resources.”
• “Brief list of examples of activities that can be used with [people], to prompt creativeness and other ways of thinking.”

• “Resources and posters to hang in our clinic for [people] to view or use.”

In contrast, the following post-workshop activities were of interest to fewer people:

• online live Q&A with workshop facilitators
• lived experience online Q&A or panel
• community of practice or online forum
• written activity or assignment.

Summary

There was low response for the original post-workshop written activity, which partly reflected the impact of the COVID-19 lockdown on people’s work settings. When respondents were asked to rank the helpfulness of potential post-workshop activities, they indicated having a toolkit or other practical resources would be the most helpful. Respondents were also interested in having a service-led activity or initiative and coaching or mentoring system to support continued learning.
References


tepou.co.nz

Auckland
PO Box 108-244, Symonds Street
Auckland 1150, New Zealand
t +64 (9) 300 6770

Hamilton
PO BOX 307, Waikato Mail Centre
Hamilton 3240, New Zealand
t +64 (7) 857 1200

Wellington
PO Box 7443, Wellington South
Wellington 6011, New Zealand
t +64 (4) 473 9009