**Transcription: Therapist 5**

Duration: 30 minutes 17 seconds

**Interviewer:** For some reason, it seems to be working.

**Therapist 5:** Good news.

**Interviewer:** Thank you. I appreciate the flexibility and I appreciate you taking your time out to do this.

**Therapist 5:** No problem.

**Interviewer:** It’s really appreciated. It might take 30-40 minutes, just depends on how we get into the conversation. Are you ok with that?

**Therapist 5:** Okay.

**Interviewer:** So, thank you for letting me record this and having the transcription, that saves me a lot of typing afterwards, really appreciate that. My voice is gone, I’m down with the cold so if my voice struggles a little bit bear with me.

**Therapist 5:** No problem.

**Interviewer:** Yeah, thank you [Therapist 5] again for letting me record this and for taking part. So, we’ve got some questions about PETAL and what that was like for you as you took part in the feasibility part of that. So just to get your experiences of delivering it and some of the benefits and challenges and I have some specific questions and some general ones and if there’s anything that you want to add into that as well that you think we should talk about and know about that would be most welcome.

**Interviewer:** So just a general one, what motivated you to take part in PETAL to be a therapist in the PETAL programme to begin with?

**Therapist 5:** Umm I wanted to, so I work in research, I’m a research assistant in [Organisation], so I just started last year and as part of research we work in recruitment and we work with community teams, with rehabs teams, and this is something we do. We also train as interventionists for various different studies, so this was my first experience. I wanted to have the experience of working on an intervention as part of a study and this intervention came up and I didn’t want to miss it.

**Interviewer:** Ok great, did you enjoy it?

**Therapist 5:** Oh I did yeah.

**Interviewer:** Good, good, this might be a little bit of a strange question but did you have sight of the participant information sheets at the beginning to know what the participants were coming in with?

**Therapist 5:** We had information that was given to us, but we didn’t take consent or anything like that. We were given those details from the team.

**Interviewer:** And another procedural question, at the end of each session there was a fidelity checklist as well. What was your experience of doing that?

**Therapist 5:** Ok, mine was quite different so as part of training we were informed to do it at the end of the sessions but what happened with mine was I had a very different scenario, so I started face to face then there was a 6-7 months break then I had to go online. So, fidelity checklist, I completed at the end of my session. So, my experience was to do a retrospective version of it at the end.

**Interviewer:** So, do you mean all the 7, for all the sessions, you did it all at the end?

**Therapist 5:** Yeah.

**Interviewer:** Ok, was that difficult to remember back?

**Therapist 5:** Yeah, yeah, it was. I mean it was, but we haven’t gone that far. We’ve had several sessions but we haven’t finished 7 modules.

**Interviewer:** Okay, are you still in the process of therapy then?

**Therapist 5:** No, no, we’ve finished.

**Interviewer:** You’ve finished but you didn’t get completing all 7 modules you’re saying?

**Therapist 5:** Yeah.

**Interviewer:** Ok. Was the PETAL what you thought it would be before you went into it? Did you have any expectations around it?

**Therapist 5:** No, not really actually. I didn’t think it would be this manualised in this way. When you think of a therapy it doesn’t seem, it’s very manualised, I didn’t think it would be this manualised.

**Interviewer:** OK did you experience that as a positive or a negative thing?

**Therapist 5:** I mean it can go both ways so it’s good as a structure you can follow, but at the same time because we are working with people disabilities, we are quite limited with how flexible we can go, I find it quite limited.

**Interviewer:** Did you feel prepared well enough to go in to deliver the sessions with the training and the manuals etc?

**Therapist 5:** I think preparation wise, there was a lot of resources, there was a lot of preparation, yeah.

**Interviewer:** Can you remember the training you got, was that useful, did that prepare you well?

**Therapist 5:** Yeah, I think the training wasn’t long enough I would say, as we did seven modules, it was quite heavy. We had 2 days training, or 2 and a half days, I’m not quite sure now. It wasn’t long enough, I think it should be, oh I don’t know it’s just a suggestion, it should be broken down, so if we are doing 7 modules we shouldn’t receive all 7 at one time, it’s not relevant at the time, it should probably be partial, maybe the first half at the beginning and the bit later at the end when it’s more relevant and makes sense. It’s a lot of information that’s manualised at the beginning and we don’t know the participant and so we don’t know how we will use it. But if we are working with the participant then having the manual be trained, it might make more sense, I don’t know.

**Interviewer:** Did you get supervision during it?

**Therapist 5:** Oh yeah plenty of supervision which was good.

**Interviewer:** How did that go – was that kind of generic supervision or was that specific to PETAL?

**Therapist 5:** I had PETAL supervision from my team, from the clinical team I am working in, it was weekly which was really amazing. At first it was 2 weekly, then we paused because I wasn’t working, I didn’t have a participant at the time, and then we resumed. I think it was quite nice because we were talking about each module and how we were helping, I mean because we were doing supervision in a group, so there were 2 of us, so we were sharing experience which was quite useful.

**Interviewer:** Good, good, and what was your experience of delivering PETAL, I know you said it was quite manualised that you would be used to, what was your experience of delivering it?

**Therapist 5:** I don’t know, when you put it like that, my experience was good, I would say quite challenging for me because I had to do it on zoom and a lot of other external technical issues, and I don’t think, believe that I did it to the best of my ability with the resources that I had, but I believe that because of the external I couldn’t the way that I would want to do it. There were certain activities where we couldn’t do it because of distance. Or because the manual was so set to be face to face, it required so much of me to be so flexible, it was really hard and I found that quite challenging for me to be so flexible. And it was so demanding of the carer as well and I think the carer found that quite challenging and I found the carers input, there was very little input from the carer so I was on my own, and the carer was changing constantly so that was quite difficult for me, different carers every week and no matter how much I tried to keep it constant, requests for this, no. That was a struggle, and I was left alone every week from the beginning, introduction and helping and asking and the task wasn’t completed outside of the sessions and so that was playing a huge role on the sessions, and I was then having to give so much time trying to catch up, play catch it, it was quite difficult I think.

**Interviewer:** Sounds like it.

**Therapist 5:** I had to do double to work.

**Interviewer:** Yeah, sounds like groundhog day every time. Have you had any benefits from taking part in this, have you learnt anything or grown in any way? Has there been any impact on you from taking part in the PETAL study?

**Therapist 5:** I would say, because I find it challenging, from my perspective it was good. At first I was like oh this is really challenging, we are not getting anywhere, is he even learning anything, this is such a waste of time, I was having these negative thoughts constantly but as I kind of got half way, near the end, I started to reflect a bit more. And when I did reflect, it was like no actually we did manage to get lots of things done, we completed all these things, I did it, he did it, we did it, we did achieve. Yes, the struggle was there during it, there was a lot of stomach ache but we did achieve a lot, and the achievements do count, and so when you count the achievements at the end it does make you happy and proud, so I did get a taste of that at the end.

**Interviewer:** Ah that’s good. Have you grown in any way from it?

**Therapist 5:** Have I grown, yeah patience, patience, you think you have patience in different ways, but I think you can, there’s always more patience you can gain. And I think I became a bit more understanding to the situation, more, more lenient, more patient, and always checking the information several times. I'm dyslexic myself so this this whole thing has become extra challenging for me, so I think it just was like what a mess did I put myself into, and I thought I was just going to do therapy, it was going to be great. Now I’ve chaos and I’m feeling anxious, but I think that I pushed myself in several ways. I think that in itself has pushed me to grow.

**Interviewer:** Yeah, fantastic. Now that you have said that, that puts an even stronger light on the impact of a being manualized and so structured, and the words being so important and the order being so important and hold all that with dyslexia as well, that that's a lot of mental activity that that's gonna be draining.

**Therapist 5:** Yes, yes. So at least I had that to stick to. So, we felt with all the other flexibility, I had to be flexible, at least that was structured. No, I had to be like, ok, yes, I am being super flexible with all these changes, but then that script I was following.

**Interviewer:** Yeah, well, good for you for following all that and the dyslexia as well because that's, that's a lot of mental activity. Good for you. Well I’m glad you got the benefit at the end, that’s really nice.

**Interviewer:** Were there any challenges at an organisational level for delivering PETAL?

**Therapist 5:** Umm, I would say uploading stuff I didn't enjoy that at all and recordings were mess. It didn't help it, the whole system I had, the way it's set up. I think when we upload the recordings, so I was trying to upload, my username wasn't working. We went back and forth. [Researcher] was trying to help me bless her. We were trying to set up new username, new passwords, but then with the system itself, it wasn't showing them which was recorded, and which was uploaded. So, I kept uploading, kept recording, and then every time she would be like, oh, you haven't uploaded. So, it was such a waste of my time going back and forth. She had to check, saying ohh no, you only uploaded one, but I haven't. I have uploaded four of the full parts, so I have to go back every other day you know, have data reupload the same thing I've uploaded two days ago. So even up until the two days ago, she would go back and say [Therapist 5], these are the following the recordings we have, are we missing anything? Yes, we were missing things. I've uploaded them 10 times, not exaggerating, had to go back and fix it. So that system was a bit of a pain, I would say.

**Interviewer:** OK. What about within the organizations where you normally work? I'm just mindful that it was challenging to get a room to have this conversation with, you know, doing online stuff as well.

**Therapist 5:** Yes, going to zoom, zoom was very difficult, 40, 40 minute sessions, so I don't have subscription to zoom. No one’s giving me subscription. My [Organisation] team hasn't given me subscription. The university hasn't given me subscription to extend this up. You know, I've had to use what I had, so 40-40 minutes. Every time I've sent them two links because it will take over 40 minutes, by the time they logged onto the second one, we lose so much find concentration, it will be 20 minutes later. I'm waiting here. They're waiting here. 2 1/2 hours later, we've only done part one. Was that 2 1/2? You know, we were only doing half an hour to 40 minute session, but we were there for 2 1/2 hours so it's harder for me, harder for them. That was an issue. Booking rooms. I'm working in an open plan office, hot desking environment. I couldn't book rooms as I can, there's no space, I have to book in such advance even today network issues we have such difficulty. I'm not sure, the area connections are problem, so I had that issues with that. That's an organization we have lots of issues with connection. That’s an organisation.

**Interviewer:** And with all of those challenges that must have been very hard to do, the sessions in anything like a reasonable time at all.

**Therapist 5:** Yeah, I was purely frustrated. Someday some mornings, I'm like, oh, the Internet's not working. Oh, we've double booked the room. Sometimes the Internet would make you double book rooms sometimes so someone would already be in your room. How awkward is to get someone out the room, they've booked the room as well, so yeah.

**Interviewer:** See if all of those challenges hadn't have been there and you just were able to do what you needed to do, right? Without those distractions, were the sessions set up and the content setup that you could cover each module in one to two sessions?

**Therapist 5:** I think so. I think we would have got one more or two more modules in, yeah, both sides.

**Interviewer:** Were there any of the modules that set out you thought yeah, that's really well written. You know that that one covers everything we need to cover?

**Therapist 5:** I really enjoyed the emotions module. I think emotions and was a communications were well written. I think it was communications and emotions that was quite easy to follow. It was quite yeah, well written yeah.

**Interviewer:** Were there any modules that you think back, oh they need, they need some work done they’re not ready yet?

**Therapist 5:** Ah yeah, ABC module 2. That was a difficult module. The content was uh, so long. It was quite in depth. It's generally an intense module. Umm yes, we were told we can juggle and do that a bit later on, and depending on the person, but I feel like as a module itself that was so long, we we couldn't cover it in two sessions. I had to skip it. It was quite triggering for us actually. So yeah, that's the module I would say.

**Interviewer:** Ok, alright. When you say triggering, what do you mean by that?

**Therapist 5:** Uh, I couldn’t speak about, so we were trying to give examples of challenging behaviour, neither the participant couldn’t give me one, he refused, the carer couldn't say next to the participant, so it was it was very uncomfortable. So, we then decided maybe maybe we can do at the end, bit later on when we then build a bit more of a therapeutic relationship or we can do it with the carer later on. But we didn't have time.

**Interviewer:** Ok. And was there anything that came up during the program that was not covered in the training?

**Therapist 5:** I would say, so the child, sorry the teenager, the young adult I was working with had inappropriate sort of touching, so this wasn't really covered in the training, but I was, I had contact with this the psychologist he is under. So, we had already spoken about his case history before, so I was informed of some of his behaviors, past history, so I had previous warnings and how it is sort of managed, though I had a few incidents myself and that wasn't mentioned in the training I would say.

**Interviewer:** So, what would have been useful do you think for you to have heard?

**Therapist 5:** Umm, I don't, I don't know. Maybe, maybe on the training in management, I guess how to approach it, because we do, we do, this is this is something quite common with you know, individuals with learning difficulty. So, it's something we are maybe quite familiar with, but it's not, you know it would be nice to kind of have that just as part of training.

**Interviewer:** Yeah, yeah. Yeah. Hard, hard to manage difficult interactions.

**Therapist 5:** Yeah, even for awareness, I guess.

**Interviewer:** Yeah. Ok. And did you find the training useful?

**Therapist 5:** Yeah, it was useful. I mean we, we wouldn't have been able to do it without, without the training, but I would want, I would have wanted more of the training. Like I said at the beginning, just a bit more, I think 2 days was a little bit too short.

**Interviewer:** Sure, sure. Was it just the one participant that you provided PETAL to?

**Therapist 5:** yes

**Interviewer:** Which of the modules do you think was most useful to the participant?

**Therapist 5:** I think uh, communication. The one in, the one about the passive assertive communication. For him, for the participant I worked with he really struggles with that. I think that one he really engaged in and that one he really kind of was sort of lacking in. So, I think he took, he took away some quite, he took something away from that module.

**Interviewer:** Good. Any modules that you think were least impactful?

**Therapist 5:** I don't know because I haven't finished it fully. I don't know if it would be fair to say.

**Interviewer:** What do you think given your experience?

**Therapist 5:** Maybe carer wellbeing, it’s going to be nice. The carers I worked with, I don't know which one.

**Interviewer:** In what way were the PETAL sessions useful for the carers do you think, did you get much interaction with the carers?

**Therapist 5:** Not really. No.

**Interviewer:** Did you get a sense from it at all if they were getting any benefit from being exposed to the PETAL program?

**Therapist 5:** It was quite interesting because I explained it every time like, especially at the beginning, I had this enthusiasm and then I think if, I don't know if you get to listen to my recordings later on, I lost that because I was I just wanna get to the session. I thought that was a waste of my time. I want to focus on my participant and just get on with it because they don't seem they would put the camera on and they thought it's me trying to fix the participant. That's what they saw as and I was like, this is not really the case, we’re a team. Here they didn't see it as that unfortunately so, and I kind of gave up on them that point.

**Interviewer:** That’s a pity. Did you get a sense of any of them took on board anything that would help at identify triggers and those sorts?

**Therapist 5:** Oh yes, and at the beginning there was one or two that I worked with. They sounded so enthusiastic they knew, they knew [Participant 2] very well. They worked with for a while. But I never saw them again. That's it I thought, wow, we got this, alright then next week, do some work, do that. Never saw them again. I thought maybe they'll come the week after the shift. I was there for five months. No, was four months, but no.

**Interviewer:** Ok, and the workbooks then and the carers workbooks, did the participant go through any workbooks with you?

**Therapist 5:** Yeah, they had their workbooks, the carer and the participant. I got them sent so they're both in, the carers and the participant workbook.

**Interviewer:** Did they use them?

**Therapist 5:** Yes with my struggle and my please write, please help them please.

**Interviewer:** And do you think was the workbook a useful component of PETAL?

**Therapist 5:** I think so, yes, I think so. I would agree because I asked [Participant 2] what did you like about PETAL and he said writing. He really enjoyed the writing so.

**Interviewer:** That's not the only one that I've heard say that, you know. Was there anything in the PETAL that you think would be a challenge for the carers to put into place? I know there was like a lot of rotation, but given that environment that if there wasn't that rotation, do you think they would have been able to take to PETAL ok and implement everything?

**Therapist 5:** And I think there are certain thing. So, what I was thinking is that challenge they can't deal with the activities, I think is a lot. There's a lot of charts, you know, as we go through the weeks, the charts increase, I think that's not realistic, but they can pick which one is quite suited to the individual because they don't all. And I have [Participant 2]. He would probably pick one that suits him, that I think would be like, ok, you know, and then you can pick that one up and that could be handed over. Not all five six of them need to be for the same person. That would work. So, I think, yeah, there's a lot of charts, maybe not all of them is needed for that individual participant. The ones well suited and that could be handed over.

**Interviewer:** Indeed, is there anything else that jumps out that do you think ooh before we go I have to tell you this.

**Therapist 5:** I don't know. I did tell, umm, the manager. She was quite keen to continue like she wanted to implement the stuff that [Participant 2] learned and I kind of gave her brief outcome feedback on some of the things she can put on hand over and stuff. So, I really hope she can do that, which I'll be happy about, but overall I think that's it.

**Interviewer:** OK we’ve covered everything. We've covered everything. So, if there's one thing you think, you have to keep this the way it is. This is just don't change this. What would that be?

**Therapist 5:** I would say. Oh put on the spot. I think I would say I like the modules being, the length of the modules, so it's not too short and it's not too long. I think like 7 modules so far. I think that's good enough. So, we can go up to 14 weeks, that's good. I think shorter than that would be too little and longer than that might just go on and you might miss the peak of is it actually working or is it not? So, I think the length of the therapy is good.

**Interviewer:** And if there's one thing you say, you definitely have to change this?

**Therapist 5:** And I would say training so have interval length of training like I mentioned at the beginning instead of having it at the beginning, have intervals of the training. Maybe at the beginning, one at the middle or something. Especially if there's a gap between recruitment, whether we have a gap between recruiting our first participant because we had like 3 months gap, we had training and three months. So, I had a chunk of information for two days and had nobody to deliver that through. And then I was like ohh and I had a manual, so it was quite intense. So, if we have at least half of it, I don't know at the beginning and then when we start, it would fit into the picture kind of quite well.

**Interviewer:** Yeah, yeah, I get that. Ok, brilliant. I think that's everything that I have to ask. Think you've told me everything that you need to tell me. So thank you very much for that. Really appreciate the time and thanks for your support of the program. So it's been very helpful. So if you're OK with it, we can leave it at that for now.

**Therapist 5:** Yeah, sure. Thank you so much for giving me time as well and opportunity to take part. I really enjoyed being in PETAL.

**Interviewer**: No, you're very, very welcome. And thanks for letting me record and transcribe this and we'll save me a lot of time afterwards as well. So thanks very much.