

bulletin

THE OFFICIAL MAGAZINE OF THE ROYAL COLLEGE OF SPEECH & LANGUAGE THERAPISTS

January 2018 | www.rcslt.org



Risk feeding in the frail elderly population

▮ **Communication access symbol: latest developments**

▮ **Online intervention database: *What Works?***

▮ **Breaking down barriers to technology**

RCSLT leadership mentors: leading the way in a fast-moving world

PROFESSIONAL DEVELOPMENT



CONFERENCES AND TRAINING

Our conferences provide a crucial platform for greater collaboration, helping professionals to share information and best practice.

AUTISM AND SOCIAL SKILLS

17 January 2018, Leeds

With three different seminar streams to choose from, this conference will provide attendees with the tools and strategies to support autistic people in social settings.

AUTISM AND ANXIETY

1 February 2018, Bristol

Join us at this one-day conference to develop a greater understanding of autism and anxiety, and to explore practical approaches to supporting autistic people experiencing stress and anxiety.

AUTISM PROFESSIONALS ANNUAL CONFERENCE

7-8 March 2018, Harrogate

This two day conference explores how to empower autistic voice and choice. Hear the latest information from experts in the field and learn from case studies illustrating best practice.

We run a full range of autism courses, many of which are CPD certified. Whether you're new to working with autistic people or a seasoned professional, we have training to meet your needs.

SENSORY CONSIDERATIONS

20 February 2018, London

This course will help you understand more about sensory sensitivity and how it can impact daily life, and learn practical ways of giving support.

UNDERSTANDING STRESS AND ANXIETY IN AUTISM

27 March 2018, London

This course will explore the impact stress and anxiety has on behaviour, and provide strategies to understand and support this behaviour.

As well as open access training courses we offer a wide range of options for your organisation to benefit in a cost efficient way. Options include bespoke in-house training, consultancy, online training and NEW for 2018 – licensed user training, where you can become qualified to deliver our training to your team.

To find out more or to book your ticket now, visit

www.autism.org.uk/professionals

Until everyone understands

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Clare Williams

EDITORIAL



Bulletin thrives on your letters and emails. Write to the editor, RCSLT, 2 White Hart Yard, London SE1 1NX. Email: bulletin@rcslt.org Please include your postal address and telephone number. Letters may be edited for publication (250 words maximum).



Happy New Year!

Welcome to 2018!

There's something about the beginning of a new year that inspires a fresh start. Traditionally, of course, 1 January sees many of us pledging to make this year the best yet. All too often, though, our intentions are thwarted. Apparently this is not because they're inherently doomed, but because we don't know how to address them. That's where Bulletin, the RCSLT and your fellow members come in.

If you're looking for support with your workplace resolutions, look no further. In this month's issue, discover how the RCSLT's new leadership mentors are on hand to help (p12); how to choose the best intervention using the *What Works* online database (p20); and, if you want to get more tech savvy, the CITCEN toolkit offers some excellent tips (p23). Don't forget to look after your own health this year too (p11).

One of our challenges for 2018 is to reach out more through social media. Keep an eye out for our Bulletin 'insta-vote', where you can choose your favourite cover of 2017 via Instagram - www.instagram.com/rcslt. We'll also be promoting it through our Twitter account, so make sure you're following us!

Clare Williams Bulletin editor

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Your RCSLT

Rosie Batty



I work in the Community Learning Disabilities Team in Hampshire. I go into people's homes, day services and residential homes, and occasionally have individuals come to our bases. I do a lot of training, upskilling staff in modifying their style of communication to meet the abilities of the individuals they work with, the

use of the Picture Exchange Communication Systems (PECS), visual schedules, signing, Intensive Interaction and communication books.

One of my two big passions is promoting Intensive Interaction. We've created an Intensive Interaction Steering Group of SLTs and occupational therapists to share ideas and experiences, and we work on upskilling our staff teams to use Intensive Interaction with people they work with.

My other passion is facilitating our monthly service user group, which comprises six service users, myself and other staff. The group creates easy read and accessible information for service users, and discusses how clinical staff can improve their service to give the best possible care and support for people with learning disabilities. We also work to develop the skills of the individuals in our group - it's incredible to see them increase their confidence and abilities, and to be a part of it!

Rosie Batty, SLT, North Locality Learning Disability Teams, Southern Health NHS Foundation Trust

Print versus digital

I just wanted to respond to Clare Williams' editorial 'Do the write thing!' in October's Bulletin (p4).

I agree print is not dead. Settling down with a good paperback book is a wonderful thing. However, contrary to Clare, I don't want a paper version of Bulletin. I don't want to relax and flick through Bulletin with a cup of coffee. I want it to be part of my professional work flow. I want to be able to store it digitally, link to it from my CPD, save articles for future reference, or post bits of interest to Facebook or Twitter. Even the simple, click on a link in the article and go to it instantly to find out more, isn't possible from print. I would rather receive a digital copy in my work inbox. Save the trees and some of RCSLT's budget on printing and postage costs.

I realise Bulletin is available on the RCSLT website as PDFs, but I'm wondering if something more dynamic and interactive would fit better with our working lives. Is it time for a poll?

Kathryn Cann, Clinical Lead for Communication, Bishop Auckland Stroke Unit

Response from Dominic Lowenthal, RCSLT Head of Professional Development

Dear Kathryn, thank you for your letter.

In response to your query about whether it is time to consider a digital version of Bulletin, we have been thinking about this for some time and put it to our members in a survey three years ago, with an overwhelming majority responding that they would prefer print over an electronic version. Therefore, there are currently no plans to make Bulletin digital-only in the foreseeable future. However, we have been exploring increasing the potential for interactivity for future stages of our digital transformation, and members have been working with us to think about how to create dynamism between print and the website; eg 'meet the authors', making articles digitally sharable between members, etc.

If you would like to get involved in shaping our digital services, along with other members who meet each month via a digital focus group, please get in touch with Navid Abbasi (navid.abbasi@rcslt.org). We will also be sending out a member survey very soon, where views on this subject can be shared. In addition, if members prefer not to receive a paper copy of Bulletin, they can opt out by emailing membership@rcslt.org

Developing a network

We presented a poster of our work in developing the competence of SLTs in ASD diagnosis at the RCSLT Conference in Glasgow. We were very encouraged and interested to meet other SLTs doing similar work, to discuss this with them and share ideas and challenges. As a result, we would be keen to develop a professional network for SLTs in Scotland who are working in and developing ASD diagnostic services. If you are interested in being part of this, please get in touch at the following email address: adrienne.shaw@lanarkshire.scot.nhs.uk

PAC Team, Child Health Department, Health and Social Care North Lanarkshire

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VISIT: WWW.RCSLT.ORG AND FOLLOW THE LINKS





RCSLT
DLD webinar



Application deadline for
RCSLT minor grants



Swallowing
Awareness Day

Taking you on a learning journey

The RCSLT is transforming the way it delivers learning to members with the introduction of its brand-new online learning journeys

The RCSLT is always looking for ways to deliver continuing professional development (CPD) resources more effectively, and has been working on several pilot projects to develop a new approach to CPD resources, called a 'learning journey'. We are pleased to announce that the first learning journey is now live, with another due to launch in the coming months.

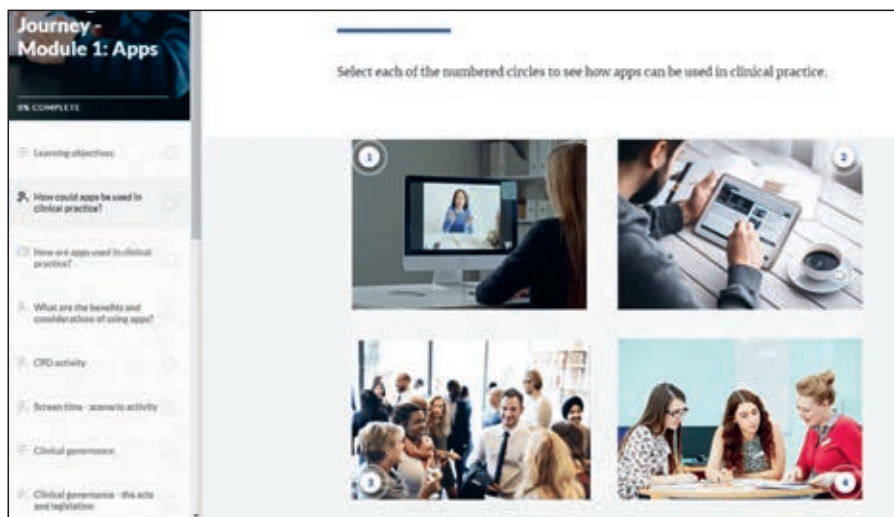
What is a learning journey?

A learning journey is a collection of resources around a topic that has been brought together in a logical structure and can be easily accessed online. The aim is to curate a selection of resources that already exist – such as videos, images, documents, toolkits – to provide a more efficient way to support learning.

Each of our learning journeys has been developed with the profession at every step, with input from teams of speech and language therapy authors, peer reviewers and testers.

E-health learning journey: out now

Our first learning journey is all about 'e-health', and is designed for SLTs. It aims to give SLTs an understanding of the range of technologies available to support practice (such as apps, telehealth and social media), and to help you plan how to implement these technologies in a



way that is safe, evidence based and in line with rules around information governance.

Coming soon

The second learning journey is called 'The Box', and will be a learning resource for stakeholders working in the criminal justice sector, such as police officers, social workers, court staff, prison staff, youth offending teams and probation officers.

It is designed to support them to understand what speech, language and communication needs are; how to recognise and screen for them; and how to provide support.

This learning journey will be launched in mid-2018.

What's next?

Following the launch of the two learning journey pilots, we will be evaluating the process and then looking at which subjects would be suitable to cover in the future. Our long-term aim is to provide CENs with the tools to develop their own learning journeys, which is being discussed as part of the RCSLT digital transformation project.

.....
Victoria Harris, RCSLT Learning Manager

📍 **To access the e-health learning journey, visit www.rcsltcpd.org.uk. If you would like to know more about the learning journeys, email info@rcslt.org**

NEWS
IN BRIEF

Member survey – coming soon! The RCSLT member survey takes approximately 15 minutes to complete and provides an ideal opportunity to feed back how well you think the RCSLT is doing.

📍 **Keep an eye out for an email with a link to the survey.**

RCSLT minor grants

Your deadline is 21 February. You can apply for a grant of up to £500 to support your CPD, which includes contributing to conference costs, short courses, equipment and research projects. Application details and how to claim after attending an event or completing a project are available online.

📍 **Visit: www.rcslt.org/members/professional_development/grants_and_awards/minorgrants**

Save the date: 6 March is the European Day of Speech and Language Therapy. The theme for 2018 is AAC. CPLOL is organising a number of activities across the continent to raise awareness and educate the public on the topic.

📍 **For more information about CPLOL, see p8 or visit www.rcslt.org/members/professional_networks/cplol**

Congratulations to all at the Airedale NHS Foundation Trust's stammering therapy project, which has won the 2017 Guardian Public Service Award for digital and technology. The project offers a specialist service via videolink to patients' laptops, tablets and even mobile phones.

📍 **To find out more, visit tinyurl.com/AiredaleGuardianAward**



Steve Brine MP
@BrineMinister
Being married to one,
I know first hand how brilliant
the SLTs are! Keep up the
good work

Maddie Smith
@MaddieSmithSLT
SLTs change lives by
enabling PW #aphasia to have
successful conversations
using support techniques
@GivingVoice_UCL @RCSLT #SLTing

New membership categories for 2018/19

The RCSLT's new membership structure, which has been simplified in order to streamline the number of categories, will come into effect from 1 April 2018.

The changes, which were approved at the AGM in September, include an amendment to and clarification of the 'Full member' category. The 'Associate member' category will also be replaced by a 'Restricted member' category.

What's new?

The 'Full member' category will now comprise: Certified, Newly Qualified, Overseas Qualified, Non-Practising, Returners to Practice, Retired and Student members; while the new 'Restricted member' category will comprise Assistants (previously known as Associates) and International Affiliates (a consolidation of the various international categories that were previously included within the structure).

Eligibility to vote

This revised structure also means a change in the voting rights for students and international members. Students will now be eligible to vote on all issues, with international members restricted to voting only on issues that affect them.



Notice period

In addition, the requirement to give three months' notice of resignation from RCSLT membership has been reduced to just one month.

Information update

These changes are unlikely to affect the majority of our members. Members who are affected will be contacted by the RCSLT membership team.

☉ **Please email the membership team if you have any queries:**
membership@rcslt.org



Funding research into DLD

The Heather van der Lely Foundation Trust, a registered charity set up to support research into developmental language disorders (DLD), is calling for applications for grants (of up to the region of £350,000) for academic and professional research in the field.

The Trust, which is the legacy of Heather van der Lely, professor of Developmental Language Disorders and Cognitive Neuroscience, intends to make an impact in the field to which Heather dedicated so much of her life. It was Heather's particular wish, as far as is possible, that areas for funding will include:

- research on the nature of DLD (previously known as specific language impairment – SLI) and the overlap with specific learning difficulties, such as dyslexia;
- research activities that facilitate and promote the identification of children with, or at risk for, DLD; and
- investigations that focus on aspects of syntax, morphology and phonology in DLD, including their assessment and intervention.

The first call for initial applications of 500 words opens at the end of January and closes on 30 April.

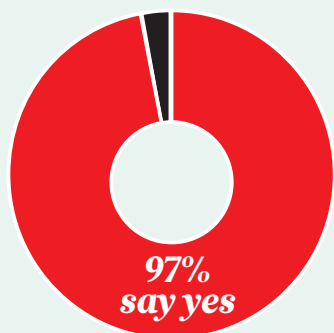
The trust is liaising with other organisations in the field, and the trustees – Dr Hilary Gardner (Chair), Professor Rhona Stainthorp (scientific advisor), Mrs Monica Uden (secretary) and Mr Graham van der Lely (treasurer) – would like to thank those who have already offered helpful support and advice, especially regarding the application and review processes, to ensure the funds can be allocated as appropriately and straightforwardly as possible.

To find out more and for details on how to apply, please visit www.hvdl.org.uk/what-we-fund. If you have any queries, please email trustees@hvdl.org.uk. You can also follow the Trust on Twitter: @HvdL_Foundation. To read about Heather's life and work, see page 28.

RCSLT Web Poll
Have your say...



Would you read a new RCSLT journal that features research applied in everyday practice?



VISIT: WWW.RCSLT.ORG

Public health webinar: save the date!



Public health and communication needs – can the UK afford not to listen? This is the question that will be explored in a webinar on 23 February, hosted by the RCSLT.

If you would like to join the debate, or simply want to find out more, please register for the event online at www.rcslt.org/news/webinars/rcslt_webinars

RCSLT Wales @RCSLTWales

Just settled down for a cuppa and my @rslt_bulletin. Loving seeing lots of Welsh content this month!

Sue Foster @SueFoster50

Lovely to hear on @BBCBreakfast about a teacher who stammers talking about the stammer support group he runs for pupils #bbcsend @RCSLT



MORAG DORWARD & KAMINI GADHOK

Trans and Gender-Diverse Voice and Communication Therapy Competency Framework launched



After three years in development, the Trans and Gender-Diverse Voice and Communication Therapy Competency Framework has now been published and is available for SLTs to download from the RCSLT website.

Intended as a guide to support learning, professional development and supervision, the framework ultimately aims to develop competence and confidence within the profession so that there can be a more equitable provision of voice services for trans and gender-diverse people in the UK. It describes three broad levels of competence where knowledge and skills can be identified and developed systematically. In addition to the framework, members of the National Transgender Voice and Communication CEN have produced a helpful suggested learning activities companion, as a practical support to learning for all SLTs and supervisors using the framework.

The idea for the framework was originally conceived at a gender dysphoria workshop, held at the

RCSLT in June 2014 and attended by specialist SLTs from throughout the UK. This workshop was part of a workstream of the NHS England Clinical Reference Group for Gender Identity Services (co-ordinated by Dr Helen Greener, Consultant in Gender Dysphoria). The content and scope of the framework was subsequently developed by members of the National Transgender Voice and Communication CEN; and a profession-wide public consultation in February 2017 invited feedback on the document. To analyse and review the consultation responses, the RCSLT appointed a panel drawn from advisers, consultants and specialist SLTs working in transgender health across a range of settings and representing each level of the framework competence. This was concluded in June 2017.

📍 **To view the framework, visit www.rcslt.org If you would like further information about the framework, please contact info@rslt.org**

Let's get digital

If you're keen to stay informed about what's been going on behind the scenes with the digital transformation of the RCSLT website, don't forget that you can keep up to date via our dedicated blogsite: rslt-digital-project.org. There you can find details of the project – how and why we're doing it, as well as news

on how the project is progressing.

It's a huge project, but a really exciting one. As well as a visually stunning new website, we're also working to create an interactive digital space that is easy to use, relevant and useful – no matter what you are looking for.

Watch this space!

CELEBRATING 75 YEARS OF ACHIEVEMENTS

As we celebrate the start of 2018, we would like to take a moment to fast-forward two years to 2020 and the launch of the RCSLT's 75th anniversary celebrations! This will be our chance to come together as a profession to mark this very special anniversary and, by doing so, raise the profile of the profession with fellow healthcare professionals, decision-makers, the general public and service users who are at the heart of all we do.

As members of the RCSLT, the anniversary is as much a celebration of you as it is the organisation itself. As such, we would really like to hear your ideas of how you would like to mark this milestone – reflecting back on all the profession has achieved since 1945, and looking forward to inspire SLTs of the future.

“As members of the RCSLT, the anniversary is as much a celebration of you as it is the organisation itself”

An ideal forum to discuss the ways in which you would like to celebrate the anniversary is within your RCSLT Hubs, CENs and networks. Once you have come up with some ideas – however small or extravagant – please email them to us at bulletin@rslt.org (by 31 March). We will then collect, collate and share ideas for activities to take place throughout the year at both a local and national level.

Now, back to 2018: your views are also needed for the RCSLT member survey. Taking approximately 15 minutes to complete, this survey provides you with the opportunity to feed back how well you think the RCSLT is achieving its strategic aims and supporting you as a member. The survey last took place in 2014, and the information gathered has been incredibly valuable, including informing the digital transformation, themes for events and webinars and the production of key resources.

The survey will be launched in mid-January; look out for further announcements. By taking part, you will be helping to shape the future of the RCSLT. ■

Morag Dorward, RCSLT Chair and Kamini Gadhok, MBE, RCSLT Chief Executive. Email: kamini.gadhok@rslt.org

CPLOL celebrates 30th birthday

CPLOL, an organisation uniting 35 professional associations of speech and language therapists/logopedists across 32 European countries, is celebrating a special birthday this year: 6 March will mark 30 years since its creation.

The primary aim of CPLOL – the Standing Liaison Committee of EU Speech and Language Therapists and Logopedists (the acronym 'CPLOL' refers to its French name) – is to promote collaboration between speech and language therapy associations at an international level, to increase understanding about practice, research and education, and to promote the profession across Europe. CPLOL delegates are currently working together on diverse projects relating to practice and education, including the SLT's role in working with multicultural populations and with refugees; pre-registration education standards; and issues relating to telepractice. As it nears its 30th birthday, CPLOL is undergoing a process of organisational review – for more information, visit www.cplol.eu

Every year on 6 March, CPLOL celebrates the European Day of Speech and Language



Therapy to promote the profession and raise awareness of the needs of people with communication and swallowing difficulties. The day involves a range of public engagement activities across the continent that focus on a particular clinical theme. The theme for 2018

will be alternative and augmentative communication (AAC), and plans are already under way at CPLOL to prepare educational and publicity materials to mark the day. The publicity poster for the 2018 event was designed by staff and a student with communication difficulties at Dawn House School as part of CPLOL's annual poster competition. More information about preparations for European Day 2018 can be found at: www.rcslt.org/members/professional_networks/cplol

From 10-12 May, CPLOL will also be hosting its 10th European Congress at Cascais in Portugal, providing a unique opportunity to hear international keynotes, learn about excellence in speech and language therapy practice and education, and discover the latest research findings. For more information about the congress, visit www.cplolcongress2018.eu/en

If you would like to know more about CPLOL or about speech and language therapy practice and education across Europe, please contact the UK delegates: Hazel Roddam (HRoddam@uclan.ac.uk) and Mark Jayes (mark.jayes@sheffield.ac.uk).

RCSLT online resource of the month



The RCSLT website is a treasure trove of information. If you want to find something quickly, the Glossary links page can help. Here, you'll find direct links to key areas that are regularly used by members, such as supervision, CPD resources, RCSLT logo use, insurance and much more. To visit the glossary links page, go to www.rcslt.org/glossary_links

Excellent practice rewarded

Jodi Lea-Trowman, highly specialist SLT and director of Love to Communicate Speech and Language Therapy, was recognised for her Year 7 screening and intervention initiative at the nasen awards in October. Hosted by comedian Lucy Porter at the Museum of London, the nasen awards brought together nearly 200 guests to celebrate the fantastic work of those who make a difference to children and young people with special educational needs and disabilities (SEND).

Jodi, who works with mainstream primary and secondary schools, specialist provision schools and resources based across London and the South East, achieved the Excellent Practice in Secondary School Award for her



work at PACA Secondary Academy. Her identification and intervention initiative screens a specific selection of Year 7 pupils; those identified with SLCN then receive advice and classroom recommendations and intervention packages to complement the curriculum.

Chief Executive of nasen, Dr Adam Boddison, said: "It's an honour to bring together people from across the SEND sector to celebrate

and reward some of the most inspirational work that has taken place over the last 25 years. It gives us the opportunity to say thank you to those people who make a real difference to children and young people and who dedicate their time to helping them fulfil their potential."

17

years since the Computers in Therapy CEN (CITCEN) was formed

£500

available through the RCSLT minor grants scheme



Derek Munn

COLUMN

Quick guide to intermediate care

The National Institute for Health and Care Excellence (NICE) and the Social Care Institute for Excellence (SCIE) have recently published a quick guide for people using intermediate care services.

Quick guides, developed jointly by NICE and SCIE, are based on NICE guidelines and quality standards. They cover key points on social care topics that are relevant to specific audiences. This new format has been developed in response to feedback from the social care sector, who report that they prefer information about improving services to be easily accessible, concise and visually appealing.

This quick guide will help service users, their families and carers to understand what they can expect from intermediate care and reablement services. The guide covers:

- the types of service available;
- the four stages of intermediate care; and



■ the professionals involved in providing care.

The four-page guide is available online and also as a PDF, which can be printed and shared with people with intermediate care needs – visit tinyurl.com/IntermediateCareGuide

Funding research into autism

Following a multidisciplinary research priority-setting exercise, autism research charity Autistica now has funding available for research that explores the question ‘Which interventions are effective in the development of communication/ language skills in autism?’

According to Autistica’s recent priority-setting exercise, language and communication is one of the biggest priorities for the autism community. One of the best predictors of life chances for an autistic five-year-old is their language and communication ability. Autistic people also deserve the right to advocate for their own needs and to express themselves.

Autistica’s vision is a world where all autistic people and their families live a long, healthy, happy life. They aim to achieve this by focusing on the research priorities of autistic people and their family members. As such, Autistica is inviting world-class research grant applications for a value of up to £200,000 over two to four years as part of its Improving Outcomes research grant scheme.

If you would like to submit an application for a grant to support your research in this area, please visit tinyurl.com/AutisticaGrant. Online application forms, to include outlines of research projects (Letters of Intent), must be submitted no later than 11:59pm on 19 January.

TRANSFORMING HOW WE WORK

The New Year column is traditionally the look back and the look forward. But, for politics in particular, 2017 was another year of such unpredictability that looking forward to predictions for 2018 is a dangerous game.

It’s a bit more settled as regards policy and economics. As 2018 begins, we all know the backdrop for speech and language therapy services in the NHS: a move for increased integration – which is welcome – and a climate of budgetary constraints – which is unlikely to change.

The challenges facing the speech and language therapy workforce are those facing other health professions:

- The need for improved service delivery with increasing demand
- Recruitment and retention of staff in a tough climate
- Staff shortages
- Skills shortages
- Increased dependency on locums
- Inconsistent service delivery

When you contact us for support, you are equally clear on the implications of this:

The RCSLT seeks to help in a range of ways. I want to alert you to one, which is work supported by funding from Health Education England regarding workforce transformation. First, we are pulling together the evidence and the ‘how-to’ of a service directly developed against the backdrop described above. It focuses on long-term conditions, but its principles will be of wider use. We will translate these principles into guidance to allow those who are in management and with leadership responsibilities to develop a more cost-effective, outcome-demonstrating service.

Additionally, we will develop guidance to help senior managers to recruit and retain staff – linked to the RCSLT’s wider work on workforce, lifelong learning and retention, and the forthcoming principles.

Through these workstreams, we aim to assist in profession-wide service improvement and resilience in service delivery.

The launch is planned for March this year. ■

Derek Munn, RCSLT Director of Policy and Public Affairs. Email: derek.munn@rcslt.org

“We aim to assist in profession-wide service improvement and resilience in service delivery”

Intensive Interaction day proves huge success

To raise awareness of Intensive Interaction, a communication technique used with people whose communication development is delayed or impaired, I and some of my colleagues organised an Intensive Interaction Awareness Day in Norfolk. Held on 16 October, the event included presentations from two specialist speakers and attracted 85 attendees from a variety of professions, including SLTs, music and art therapists, carers and parents.

Janet Gurney, from the UK's first Intensive Interaction charity 'Us in a Bus', provided a fascinating morning introducing the theory behind Intensive Interaction, and facilitated discussion about the function of Intensive Interaction for people with sensory processing issues and challenging behaviour.

The afternoon session was led by Matthew Laurie, who develops practice around Intensive Interaction and Musical Interaction in education and care settings. He discussed how Musical Interaction can facilitate a communication environment, and



Event organisers
(L-R): Michelle, Izzy and Tina

how to involve people who have not come across Intensive Interaction before.

The day was a huge success, with attendees commenting that it had: "Opened my eyes to a new way of working with people I support," and was: "A great insight into the process for effective Intensive Interaction."

Isabelle Noël, SLT for adults with learning disabilities

SPIN wins QI award

Congratulations to the SPIN team at NHS Ayrshire and Arran for winning the Excellence for QI in Early Years award at the Quality Improvement Awards 2017, which showcase the fantastic range of quality improvement practice across Scotland to make services the best they can be for babies, children, young people and their families in all aspects of their lives.

The speech and language therapy SPIN team's universal early years approach was celebrated for setting out to test, evaluate and deliver initiatives that support early years establishments

to have communication-friendly environments. The team aimed for 90% of early years establishments in North Ayrshire to engage with the project, with a nominated communication champion appointed at each location. Working in partnership with North Ayrshire Council, this quality improvement project has been driven by a desire to deliver universal speech and language support at the earliest opportunity in a child's development.

◎ To find out more, visit www.cypic.co.uk/2017-winners

Shine a Light Awards are back!

This year there are 11 categories, including the new Katie Rough Memorial Award for innovative or excellent practice when working with children and young people affected by selective mutism.

Nominations close on 12 January, and the awards ceremony will take place in March, so get your applications in soon.

◎ Find out more at www.shinealightawards.co.uk

NAIC England Summary Report now available

The National Audit of Intermediate Care (NAIC) 2017 summary report is now available to download.

Launched in 2011, the NAIC is a partnership project between a number of professional associations, including the RCSLT, and represents the most comprehensive assessment of this key group of community services. It provides an updated picture of what is happening with intermediate care services that are delivering care and support to older people living with complex conditions.

◎ To download the report, visit www.nhsbenchmarking.nhs.uk/projects/naic

UK-CDI standardised version

A standardised version of the UK Communicative Development Inventory (UK-CDI) – the parent-completed early speech and language assessment – is now available. This is the first version of the CDI that has learning norms for the UK. It is suitable for children aged 8 to 18 months (the next age range is now being worked on) and is currently available free, including a preliminary manual and norms.

◎ To download the UK-CDI, visit lucid.ac.uk/ukcdi

TOMs AAC adapted scale: erratum

The book 'Therapy Outcome Measures for Rehabilitation Professionals', 3rd edition (Enderby P, John A; published by J & R Page, 2015, pp 102), details that it is necessary to consider and score the activity, participation and wellbeing without AAC and with AAC. This has not been found to be practical, and it has been decided that clients should be rated in the same way as on other adapted scales, ie as they present at a particular time point: initial, intermediate (if required) and at end of episode of care or discharge.

Phoniatricians to meet in Finland

The 29th Congress of the Union of the European Phoniatricians will be held in Helsinki, Finland, on 13-16 June. The congress will focus on four main topics: the study and treatment of voice; speech and language; hearing; and swallowing disorders.

◎ Visit www.uep2018.com for details, including how to submit an abstract (the deadline for abstract submissions is 15 January).



**Claire
Ewen**

Opinion

Claire Ewen argues that the wellbeing of SLTs is paramount to ensure a healthier workforce and better outcomes for service users

How's your occupational health?

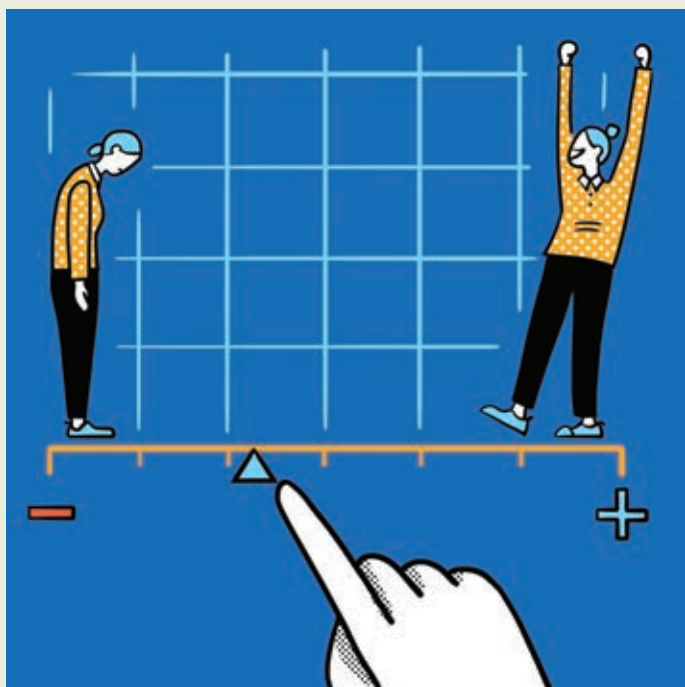


ILLUSTRATION Sara Gelfgren

As a paediatric therapist working in a mainstream primary school, I am very proud to be an SLT. Over the 23 years that I have been practising, I have met so many therapists who are passionate about supporting children and adults with speech, language and communication needs; people who strive every day to give voice to their clients and

who make every effort to further our profession through their evidence-based work, their research and, above all, their compassion and kindness. Over the past few years I have also met and worked with therapists who love what they do but say that they are increasingly stressed in their roles. Whether working in the public or the private sector, more and more people seem to be struggling

with the demands that their jobs place on them.

This really got me thinking. As a 'caring profession', we put all our energies into developing our clinical knowledge – our focus is (quite rightly) on our clients. We do our best to look after them, but do we look after ourselves? We need to look after our wellbeing in order to maximise our impact. I decided to have a closer look at 'what works' for us. What do we love about our jobs and want more of? Which bits frustrate us and how can these be eliminated or at least changed? So I registered

“There is a real paucity of research into the wellbeing of SLTs in the UK”

for a PhD in Occupational Psychology at Birmingham City University (BCU) and set about trying to find out.

Now my weeks are divided between the regular work of a mainstream primary school therapist and reading as much as I can find about SLTs. The first thing I discovered was that there is a real paucity of research into the wellbeing of SLTs in the UK. In the past 30 years there are only a few studies that have investigated our satisfaction and our stress. Studies in the USA and Australia have tackled issues such as large caseloads, professional isolation, limited professional development and lack of autonomy. The last UK study discussed some of these issues, but was done in 2009. Since then the landscape of speech and language therapy has changed significantly, not

least because of the effect of the recession and austerity on the health service. The vast majority of clinicians still work for the NHS, but most jobs have changed considerably. More clinicians than ever before also work outside of the NHS now.

There is research in related fields (eg nursing or teaching), which suggests that, to be most effective, practitioners should be well and healthy; but it's time there was current information about us – we count too! We owe it our clients, and ourselves, to be healthy. Do our employers look after us? Successful intervention for people with speech, language and communication needs has been argued to be cost effective to the nation.

My ambition is to share information about the occupational health of our workforce with the appropriate regulatory and professional bodies, as well as with employers, such as the NHS, and the universities where SLTs train. This could lead to a healthier workforce, less attrition and ultimately better outcomes for children, young people and adults who access our services. To do this, I will be conducting a survey, which will consist of a questionnaire that should take about 15 minutes to complete. People will also be asked if they'd be willing to be interviewed. The project will gain ethical approval from BCU, and any information provided will be kept confidential. The RCSLT has offered to help with dissemination of the results.

I hope as many SLTs as possible give their opinions so that we can get a comprehensive picture of our workforce. If you'd like to know more, please get in touch – see below for contact details. ■

Claire Ewen, paediatric therapist. Email: Claire.Ewen@mail.bcu.ac.uk

Leading the way in a fast-moving world

Vicky Harris, RCSLT Learning Manager, welcomes the new category of RCSLT Leadership Mentor and explains its role in helping leadership growth in the profession

ILLUSTRATION BY Ben O'Brien

Alongside the category of clinical adviser and research adviser, the RCSLT has recently launched a new category of adviser: leadership mentor. Many of you may already be aware that we have been working hard over the past year to be able to get to this stage, and have been recruiting and promoting it at RCSLT events for a few months now. But why are leadership mentors so important for the profession?

Extra support

We created this new category as a result of member demand for extra support that is not based on a clinical area; for example, service transformation.

Our leadership mentors are members who have experience of leading in any area of speech and language therapy and are happy to be on hand to support other members with issues such as:

- building a business case;
- dealing with change;
- influencing budget-holders, decision-makers and stakeholders;
- guidance on supervising and supporting staff;
- planning the workforce to ensure it covers current and future needs;
- measuring outcomes;
- patient safety; and
- cuts to services.

We intend to recruit enough leadership mentors so that each RCSLT Hub has at least one mentor for each of the following population areas: children and young people; adults; and learning disability.

If you're interested in becoming a leadership mentor, please read on to see what the role involves and to find out how it can benefit you, your organisation and the profession as a whole.

Building a resilient workforce

It is important to the profession that we have a workforce able to deal with the fast-moving world of health and care. Leadership mentors are a vital way to achieve that, as they will lead the way for the profession and support SLTs to develop on their own leadership skills to build a workforce well equipped for future requirements. Having a leadership mentor within healthcare services also raises the profile of the service and helps it to link in with the professional body, providing benefits both for SLTs and their employers.



“It is important that we have a workforce able to deal with the fast-moving world of health and care”

“A leadership mentor role at the RCSLT is an exciting new step in career development. It affords experienced leaders the opportunity to use their knowledge and experience to support others to provide strong leadership to ensure that SLTs excel in making a significant contribution to the health and wellbeing of their service users.”

Catherine Dunnet

“I thoroughly enjoy the opportunity to offer SLT peers leadership support, guidance and advice based on my own experience. I have so far offered mentoring with business case planning, career development and educating and influencing decision-makers. The role offers me the opportunity to work closely with the staff and resources at the RCSLT, and close networking with peers.”

Lyn Button

“I am retired, which means that I have lots of experience and knowledge to bring to the role, as well as the time to give to people.”

Carole Davies

New opportunities

Becoming a leadership mentor not only offers an appreciation of your skills and experience, but it also provides:

- a chance to be recognised for your expertise;
- opportunities to learn new perspectives;
- a chance to expand your networks;
- an opportunity to develop your own leadership skills;
- access to staff and resources at the RCSLT;
- a chance to give something back to the profession; and
- it counts towards your continuing professional development.

Application process

To become a leadership mentor, just email the RCSLT or visit the website – www.rcslt.org/members/professional_roles/advisers/rcslt_adviser_application_process – and fill in the electronic application form, providing both your personal and professional details. The form also includes a space for you to give a statement in support of your application. This is where you can tell us about your relevant leadership knowledge base and experience.

Our leadership mentors review panel looks at each completed application form and decides if an applicant is a suitable candidate. Remember that you will need the support of your line manager to apply (if appropriate).

Frequently asked questions

Q Who can apply to be a leadership mentor?

A We invite applications from any member with experience of leading in any area of speech and language therapy. The RCSLT will match those in need of support with a mentor who is best placed to provide it.

Q What is the application process to become a leadership mentor?

A You will need to complete an application form, which includes a personal statement explaining why you would like to become a leadership mentor and giving recent examples of your leadership skills. Your application will then be considered by our leadership mentors steering group. If you would like to be considered, please email us at info@rcslt.org

Q How does the relationship between the mentor and mentee work?

A The relationship will be informal. A leadership mentor will act like a sounding board to the mentee, making suggestions and giving advice about how to proceed.

Q Can I be a mentee as well as a mentor?

A Yes. Each member will have their own needs around leadership, but will also have skills and experience that could be useful to others.

Q What is expected of a leadership mentor?

A You would need to be prepared to respond to up to two requests for help per month. These may be requests from different members in different situations and from different areas.

Find out more

If you would like to be considered for a leadership mentor role, or you would like support from a leadership mentor, or just want to find out more, please email us at info@rcslt.org ■

Vicky Harris, RCSLT Learning Manager.
Email: victoria.harris@rcslt.org

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- Holding/ tolerating moment of stammering
- Pullouts
- Cancellations
- Making change durable
- Transfer
- Disclosure

From Michael Palin Centre for Stammering Children, London: **Frances Cook**, MBE, MSc, Cert. CT (Oxford), Reg UKCP (PCT), Cert MRCSLT (Hons); **Willie Botterill**, MSc (Psych. Couns.), Reg UKCP (PCT), Cert MRCSLT; **Ali Berquez**, MSc, BA (Hons), Dip. CT (Oxford), Cert MRCSLT; **Alison Nicholas**, MSc, BA (Hons), Cert MRCSLT; **Jane Fry**, MSc (Psych. Couns.); **Barry Guitar**, Ph.D., University of Vermont; **Peter Ramig**, Ph.D., University of Colorado-Boulder; **Patricia Zebrowski**, Ph.D., University of Iowa; and **June Campbell**, M.A., private practice, provided additional footage.

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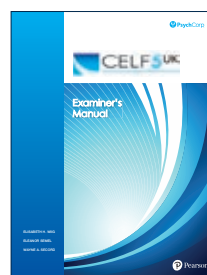
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ILLUSTRATION BY Rosan Magar

Risk feeding: from protocol to model of care

Dharinee Hansjee explains how her risk-feeding protocol, established to guide decision-making regarding feeding options with the frail elderly population, has evolved into a model of care

Swallowing difficulties are common in the frail elderly (Smithard, 2016), and decision-making regarding feeding options are complex. An extensive literature search on the management of nutrition in this population group reveals evidence against tube feeding and proposes careful risk feeding (eating and drinking despite the risk of developing aspiration pneumonia) as the preferred route of intake (Smith et al, 2009; RCP, 2010). In addition, nutritional decisions at the end of life are ethically complex, particularly if the individual lacks decision-making capacity (Clarke et al, 2015). To bring clarity to these complex feeding decisions, I devised a risk-feeding protocol, which has since evolved into a model of care and is now available as a toolkit.

Devising the protocol

According to NICE clinical guideline 32, 'Nutrition support for adults' (NICE, 2006), the person's individual beliefs, preferences, needs and best interests should be central to the decision-making process when determining feeding options. Establishing a protocol to guide decision-making addresses these key aspects. Through the use of our risk-feeding protocol, we have ensured consistent, open discussions about the risks associated with eating and drinking, which form an essential part of the individual's care. In addition, information leaflets explaining the management options and risks have been devised to support the individual or their carers in making informed decisions about their nutrition.

The protocol stimulates a problem-solving approach from the multidisciplinary team (MDT) and individual/significant other. Aside from discussions with the nurses, doctors and dietitians, there is involvement from physiotherapy regarding chest management and establishing a ceiling of care. The palliative care team also provides input on end-of-life care, while social services and discharge teams are proactively involved in the consideration of risk feeding within discharge planning. This process promotes robust communication between the acute and community settings, which is essential for a safer and co-ordinated discharge (NICE, 2015). Throughout the process, the individual and/or significant other are involved in decisions about their care.

Learning and development

Since the inception and implementation of the risk-feeding protocol, there have been some substantial developments. These illustrate the evolution of the risk-feeding protocol into a model of care.

As this is a population group at high risk of aspirating, a review of their medication is essential. We therefore added a prompt for a full medication review to the original risk-feeding protocol to ensure medication is provided in a form that is easier to swallow. In this way, risks of possible aspiration of medication are also considered. This review could be carried out by a pharmacist in the acute setting or a GP in a community setting.

A considerable learning point has been the need to have a risk-feeding policy in place to accompany the roll-out of the protocol. The complexity of implementing a risk-feeding pathway lies in engagement and ownership of the individual roles of the MDT to ensure the pathway is robust. The policy is therefore crucial in empowering the hospital team and wider pathways in understanding the purpose, scope and their role within the risk-feeding process.

One further addition to the protocol was the consideration of an advanced care plan, if appropriate. The risk-feeding process invites the MDT and individual to discuss future management in the form of an advanced care plan or PEACE (Proactive Elderly Advance Care) document. For individuals who experience recurrent aspiration pneumonia-related admissions, this has led to clarity of personal/family wishes, and empowers the individual and/or their carers to be involved in their care, while simultaneously allowing the professional to improve end-of-life care for that individual. The documentation of decisions on current and future nutritional management allows accurate handover to receiving teams, such as GPs, care homes, and health and social care services.

So, what started off as a protocol has evolved into a model of care. This approach reflects the principles inherent within the NICE clinical guideline 27 (NICE, 2015) for improving transfers of care between community and hospital settings. The risk-feeding model of care offers a decision-making process that supports the person in their current setting, allowing for an individualised plan of care that is more than just managing swallowing and its disorders. This model of care is about contributing to safer, high-quality, end-of-life care.

What is the risk-feeding protocol?

The risk-feeding protocol provides the MDT with a person-centred framework to facilitate decisions on nutrition planning. It outlines the reasons why a person may be a candidate for risk feeding, with the document addressing capacity, quality of life and multidisciplinary discussions with the person/family. The management plan is authorised by signatures from the consultant and SLT. Risk-reducing recommendations are included to ensure the person is on the least distressing diet and fluid regime.

To ensure best practice, we have developed a risk-feeding toolkit, which contains:

- the protocol;
- the policy (outlining the roles and responsibilities of the MDT, and therefore is essential to accompany the implementation of a protocol);
- an information leaflet on risk feeding;
- a bed sign to indicate 'Eating & drinking for comfort'; and
- a letter template for communication with the GP following discharge.

Guiding principles

What has become evident in the evolution of this model of care is the application of the following guiding principles:

- Establish the primary goal of intervention/care
- Establish the mental capacity of the individual at the centre of decision-making
- Ensure a comprehensive clinical assessment of swallowing is completed in order to determine risk-reducing recommendations
- Facilitate thorough communication with MDT members to foster holistic patient-centred care
- Set out an advance care plan, where appropriate, and in keeping with the wishes/best interests of the individual

Impact

An analysis of the data from an audit of our risk-feeding model of care revealed various areas of impact:

- A reduction in length of stay for hospital admissions in this cohort
- The value of SLT input into accident and emergency impacting on admission avoidance
- Qualitative data from service users/carers reflecting the significance of this model of care in considering the individual's quality of life and inclusion in future planning
- Cost savings across the NHS

We will be sharing more information about the impact of a risk-feeding pathway at our next study day, 'From protocol to model of care', at Lewisham Hospital on 22 January. If you would like to come along and find out more, please email lucytaylor7@nhs.net to secure your place. ■

Dharinee Hansjee, RCSLT National Advisor for Dysphagia (Dementia). Email: dharinee.hansjee@nhs.net



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“This model of care is about contributing to safer, high-quality, end-of-life care”

A right to be able to communicate

Communication Access UK project co-ordinator **Catherine Harris** provides an update on the work in preparation for the launch of a communication access symbol for the UK

Regular readers of Bulletin will be aware of the May 2017 feature entitled ‘An inclusive communication nation’, from RCSLT Director of Policy and Public Affairs Derek Munn, which discussed the work that has been carried out in preparation for the launch of a symbol for communication access in the UK. We are firm in our belief that communication access is a necessity for all. This is reaffirmed through the United Nations Convention on the Rights of Persons with Disabilities, adopted in December 2006, which states that it is a person’s right to be able to communicate, not a privilege. It is a right that would remove barriers to equal citizenship and enable people to enjoy just and equitable lives. It is our ambition that this symbol will enable all with speech, language and communication needs to exercise this right.

Where it all began

In 2013, Hilary Johnson of Scope Australia delivered a presentation at the Communication Matters (CM) conference on the subject of communication access



and her organisation’s efforts to develop a symbol in Australia. I can say, without a doubt, that this immediately resonated with all of those who attended.

We then invited Denise West (SLT, Scope Australia) and Brett Reynolds (a user of alternative and augmentative communication – AAC) as keynote speakers for

the 2015 CM conference, to share more of their efforts and experiences in launching a symbol in Victoria, Australia. As an

organisation, CM was keen to take this forward in the UK. To ensure the initiative had maximum impact, we recognised that there was the need for collaboration with other UK organisations that support people with communication difficulties.

It is acknowledged that, even as far back as 1986, there have been and are currently other local projects across the UK and internationally that have raised awareness and offered training, but there have often been issues around sustainability and wider involvement. A robust consultation process and partnership working across the UK is needed to ensure the long-term success and sustainability of the UK’s initiative for a communication access symbol.

“We are firm in our belief that communication access is a necessity for all”





ILLUSTRATION BY **Xenia Latii**

A collaborative effort

A ‘vision’ day, co-hosted by the RCSLT, to which more than 60 potential stakeholder groups were invited, was held in July 2016. Following this, the project for a communication access symbol in the UK was born. In addition, a steering group, which included representation from Communication Matters, the RCSLT, the Stroke Association, the Motor Neurone Disease Association and other participants, including people with communication difficulties, was formed and has been meeting regularly to co-ordinate and jointly govern the project.

Through this project, we aim to produce a symbol that would be akin to those symbols readily used for disability access, including the famous wheelchair symbol and both the visual and hearing impairment symbols. We also aim to produce underpinning standards – by which we mean that a business or organisation displaying the communication access symbol would be doing so as demonstration of their conformity to these standards. We aim to consult as many service users as possible throughout this process.

In late 2016, CM was awarded a grant by the John Ellerman Foundation to support the pilot stage of the project. This included the development of a training package to equip businesses and organisations to become communication accessible. The RCSLT has also invested significant time and resources,

and continues to provide support across all elements of the project.

Second phase

In May 2017, we were at the first stage of consultations, where we were seeking views to form our thinking around the potential design concepts upon which we would develop a symbol, as well as a sense of what the underpinning standards should reflect. I’m pleased to report that this round of consultations garnered more than 3,000 responses, which have allowed us to identify two potential concepts for the symbol itself, as well as six quality standards.

We’ve now initiated a second round of consultations, which we’ll use to test the concepts and standards, and to refine a specific concept upon which the symbol will be based. The consultations will also determine whether there is consensus that the standards drawn from the responses to the first consultation are, indeed, appropriate.

Training and development

Any business or organisation that displays the symbol will be telling their customers, clients and/or patients that their staff:

- welcome people with speech, language and communication needs;
- will try to support people with speech, language and communication needs; and
- will use different ways to communicate, as appropriate.

To ensure staff are well equipped, CM has successfully developed a training package for business/organisations and a mystery customer questionnaire. Mystery customers have been recruited through introductory sessions held in five specialist further education colleges and schools around the UK, as well as at the Speakeasy stroke support group in Bury, and will visit organisations to ensure that they are meeting the standards required to display the symbol.

Business workshops have also been piloted with more than 100 staff at the University of Leeds. These two-hour, informal and interactive workshop sessions cover a variety of topics:

- What is communication?
- Causes of communication difficulties
- Identifying what makes good communication
- Reviewing your own workplace
- Resources that might help

To date, there are six people with communication difficulties and who use AAC who are trained to be involved in the pilot as workshop presenters, and many others who are now undertaking mystery customer visits to gather baseline data.

What’s next?

We are now in the final stage of the symbol development and hope to launch a UK symbol for communication access in late 2018.

We will be holding further workshops across the UK to share the vision and equip people to become mystery customers and workshop presenters. A format for online training packages is also being discussed.

We encourage all readers to engage in the second round of consultations, which will help inform development of the final symbol and standards. This is in the form of a simple survey, which can be accessed online at www.surveymonkey.co.uk/r/communication_access_RCSLT. Please complete the survey by the end of January.

If you have any questions or would like any further information about the project, please email: accessproject@communicationmatters.org.uk or najmul.hussain@rcslt.org ■

Catherine Harris, project co-ordinator, Communication Access UK

What Works? Five years on

Aafreen Kutub from The Communication Trust provides an update on the latest developments for the *What Works* online interventions database

In 2012, The Communication Trust (TCT) developed the *What Works* online database to provide a source of evidenced interventions that aim to support children's speech, language and communication. This was as a direct result of the Better Communication Research Programme, which was commissioned in response to the 2008 Berrow Review of provision for children and young people with speech, language and communication needs.

The *What Works* database helps early years practitioners, teachers, school leaders and SLTs to find the most appropriate interventions for children and young people by providing a free and easily accessible overview of the evidence base for each intervention. Users can search the database for interventions by target group, age range, focus of the intervention, who it's delivered by and in what format. The evidence for each intervention is rated as 'strong', 'moderate' or 'indicative', as determined by an academic moderating group, with a summary of the evidence base and academic references provided.

What's new?

Now, five years since its launch, with more than 16,000 registered users, 60 interventions and evidence-based practice on most SLTs' agendas, how has

What Works changed? The short answer is both a little and a lot.

The focus on the strength of evidence and the moderation process has remained the same. The moderating group still consists of eminent academics from within the field of speech language and communication: currently Professor James Law, Dr Ann Clark, Professor Julie Dockrell, Dr Anne Hesketh, and a representative from the RCSLT (Research and Development Manager, Amit Kulkarni).

The changes that have been made to *What Works* have usually come about as a result of user feedback, and have focused on improving the functionality of the database and engaging users from different audiences.

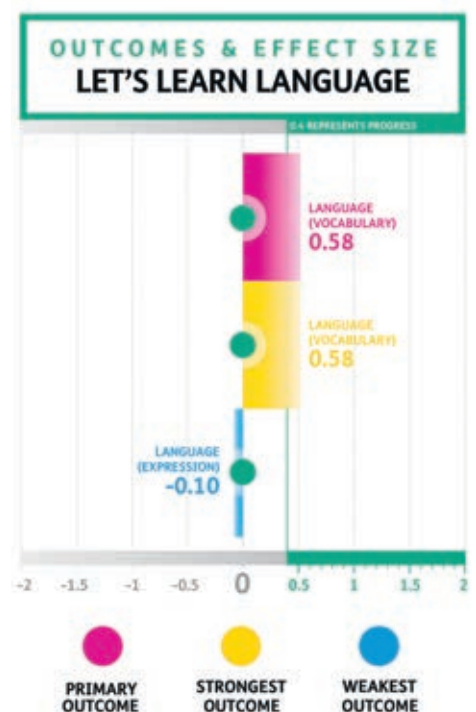
Strength of evidence vs outcomes?

TCT conducts an annual survey of *What Works* users, as well as welcoming feedback all year round. The most frequent feedback received has been the issue of how to interpret the strength of evidence versus the outcomes of interventions on *What Works*. Typical questions include: "Is an intervention listed on the database because it has been rigorously evaluated and works, or because it has a robust level of evidence and doesn't work?"

After much discussion within moderating group meetings,



consultation with users and a feasibility exercise, a decision was made to resolve this conflict by displaying the outcomes of each intervention in two ways: 1) continuing to provide a description of the overall 'strength of evidence'; and 2) adding an 'effect size' graphic to illustrate the impact of the intervention in key studies (see example below).



Wake M, Tobin S, Girolametto L, Ukumunne O, Gold L, Levickis P, Sheehan J, Goldfeld S, Reilly S. Outcomes of population-based language promotion for slow-to-talk toddlers at ages 2 and 3 years: The Let's Learn Language cluster randomised controlled trial. *BMJ* 2011



ILLUSTRATION BY Thomas Pullin

“Changes have focused on improving the functionality of the database and engaging users from different audiences”

The effect size is a number that represents the size of a research result; ie the difference between the treatment and the control group on a given outcome in a particular study. It shows not just whether an effect is statistically significant, but also how statistically significant it is. (Effect sizes have been calculated using a ‘Hedges’ g’ formula, which is a standardised measure of effect size.) Looking at the effect sizes of interventions on specific outcomes can support practitioners to interpret whether an intervention is appropriate for their setting.

A short guide and animation about effect sizes is available on the *What Works* website. Visit www.thecommunicationtrust.org.uk/whatworks and click on the ‘Understanding the evidence base’ button.

Beyond interventions

While we have worked hard to improve the intervention database, we all know that speech and language therapy service delivery is no longer just about direct intervention. Training is also a hugely important part of professional practice for SLTs, whether it be delivering training to school staff or attending training as part of ongoing continuing professional development. We know from user feedback that the quality and effectiveness of training is an important consideration, but that training programmes often do not (nor should they) have the same rigour of evaluation as needed for an intervention. This led us to explore whether the *What Works* database could have a role to play,

which, in turn, led to the launch of the *What Works* Training Database in 2016.

The level of evidence and evaluation required, as well as the focus of outcomes, is different for this database compared with the interventions database. The criteria for the training database are focused primarily on workforce outcomes rather than child outcomes. This means that submissions are moderated on how clearly their evaluation shows an impact on the adults that have attended the training, rather than the impact on supported children; the latter being understandably difficult and time-intensive to measure.

It is still early days for the *What Works* Training Database, and we are seeking to expand the number of training programmes featured within it. The training programmes are reviewed throughout the year, so, unlike the intervention database, there is no deadline for submission. To find out more and for details on how to submit, visit www.thecommunicationtrust.org.uk/projects/what-works-training

We want to hear from you!

The database has kept its core focus on the strength of evidence but has been adapted to increase its accessibility and reach. This would not have been possible without user feedback over the years. If you have suggestions of ways in which we could develop the databases further, or know of an intervention or training programme that you think should be submitted to *What Works*, please do get in touch. ■

Aafreen Kutub, Senior Programme Manager, The Communication Trust. Email: akutub@thecommunicationtrust.org.uk

The Communication Trust

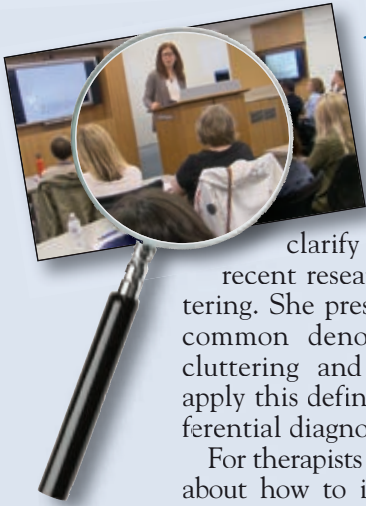
The *What Works* database is hosted by the Communication Trust, with support from the RCLST.

The Communication Trust is a coalition of more than 50 not-for-profit organisations. Working together, we support everyone who works with children and young people in England to support their speech, language and communication.

www.thecommunicationtrust.org.uk

cluttering: New another look

with Kathleen Scaler Scott, Ph.D., CCC-SLP



In recent years, many advances have been made in understanding the communication disorder, cluttering. Kathleen Scaler Scott, Ph.D., of Misericordia University helps to clarify prior myths and explain recent research findings about cluttering. She presents the current lowest common denominator definition of cluttering and demonstrates how to apply this definition to assessment, differential diagnosis, and treatment.

For therapists who have been confused about how to identify, assess and treat cluttering, this 76-minute DVD provides practical strategies for understanding and managing complex clients.

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Annual Head Injury Study Day - Moving Ahead

The Derby and Nottingham TBI Teams have put together an interesting day of good practice and news of innovation taking place in the field of brain injury. Every year we try to focus on what is new especially around the local region and to give people who work in the field of brain injury a chance to be informed by this practice and hopefully be inspired! This year we will look at what happens after formal rehabilitation ends. Venue: Royal Derby Hospital, Derby | Fee: £130

8th February 2018

Cervical Auscultation

Lecturer: Dr Alison Stroud

Therapists will learn the theory of Cervical Auscultation and learn the 'How, What and Where' of Cervical Auscultation. Delegates will have an opportunity to participate in a practical session, identifying normal and disordered swallow sounds. Venue: London Road Community Hospital, Derby | Fee: £130

27th February - 1st March 2018

Secondary School Students Who Stammer: Realising their Potential

Lecturer: Jane Harley (The Michael Palin Centre for Stammering Children)

This workshop will aim to increase participants' understanding of the issues involved in working with secondary school students who stammer, their confidence in assessing overt and covert aspects of stammering, and their skills in integrating speech management, communication skills and psychological approaches such as Cognitive Behaviour Therapy (CBT) in packages of care which reflect individual need. The course will present work which can be adapted for individual or group therapy for teenagers aged 12 -18 years.

Venue: Royal Derby Hospital, Derby | Fee: £180

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London, England Apr 16-18, 2018

www.hanen.org/MTWorkshop

Over the past 10 years, we have noticed a common and recurring theme arising at our bi-annual Computers in Therapy CEN (CITCEN) meetings: while

there is an increasing number of excellent technology resources available (eg software, apps, videoconferencing tools), clinicians are not always able to make use of them in their practice due to barriers in the workplace. To overcome these barriers, we began to develop a pool of resources, now available online.

A CEN was born

The CITCEN was born more than 17 years ago, with the membership comprising clinicians, software developers and researchers. Some members are very familiar with using technology as part of their therapy, and others less so; all make a huge contribution to the success of our national CEN.

When discussing the use of technology in practice, we discovered that a number of CITCEN members were keen to take advantage of therapy apps but experienced difficulties with access to WiFi, tablets, etc, as well as an inability to download/update therapy software. This prevented them from even getting to a position where they might consider incorporating such technology into their practice, and also from taking full advantage of invaluable resources such as the RCSLT's CQ Live apps page (www.rcslt.org/cq_live/resources_a_z/apps/overview).

Pool of solutions

Although many CITCEN members, based in a range of clinical settings, were facing similar challenges, a smaller number of members had already come up with a variety of solutions, which they had successfully implemented in their workplaces. These members were keen that their experiences might be used to overcome the same barriers elsewhere, and a pool of resources began to form.

In May 2016, Kathryn Cann (Clinical Lead Communication, County Durham and Darlington NHS Trust) gave an informative talk about the experiences of overcoming digital barriers in her own trust. She also gave us permission to incorporate her ideas and resources into our ever-increasing pool of solutions. Once these resources were compiled, we realised they might also be of use to colleagues outside of the CITCEN membership. The CEN therefore decided to bring together the resources on a free-to-use website; and the CITCEN toolkit was created.

CITCEN toolkit: breaking down barriers to technology

Committee members from the **Computers in Therapy CEN** share their member-led initiative for solving technology issues in the workplace



CITCEN toolkit

The CITCEN toolkit is available online at citcentoolkit.wordpress.com and comprises a set of online resources that address a number of areas:

- **Common barriers and challenges** (a range of tried and tested solutions)
- **Legislation** (the case for and provision of technology in healthcare settings, and supporting legislation)
- **Funding** (from potential funding sources, to useful templates and case studies to present to commissioners and IT managers)
- **Policies and procedures for the set-up and loan of hardware/software** (examples of policies and procedures, as well as useful forms and templates such as consent and disclaimer forms)
- **Security and information governance** (practical advice on licensing, tablet security, hygiene and information

governance issues with NHS devices)

- **Technical terms** (a glossary to help clinicians navigate the technology landscape)

The toolkit draws on the experience of our membership and, as such, is largely adult client focused. However, a lot of the information is transferable across settings and client groups. If it can't be implemented directly, we believe it can at least provide a model for paediatric services to work on.

We are grateful to all the members and guest speakers who have contributed to the CITCEN toolkit, and we hope that other clinicians will be able to use the resource to confidently overcome the digital barriers that are preventing their patients from accessing resources they might benefit from in therapy.

Find out more

- Access the toolkit: citcentoolkit.wordpress.com
- Register for updates: tinyurl.com/citcentoolkit
- Find CITCEN on Basecamp, Eventbrite (tinyurl.com/RCSLTCITCEN) and Twitter (@citcen)
- Thoughts or comments? Drop us a line via Twitter using the hashtag #CITCENToolkit ■

.....
Sarah Woodward, Shelagh Benford and Abi Roper, CITCEN committee. Email: citcen@gmail.com

Acknowledgements

With thanks to Kathryn Cann, Heather de la Croix, Cat Proom, Steve Naylor, Gill Hardy, Sophie Bell, Jenny Short, Sarah Gibbin, Sam Cooper, Chelsie Moore, Ellen Styler and the CITCEN membership.



Steven Bloch & Cristina McKean

Steven Bloch and Cristina McKean introduce the new IJLCD/RCSLT student project prize: celebrating the research excellence of student SLTs

Looking to the next generation of SLTs

The International Journal of Language & Communication Disorders (IJLCD) has always been a clinically orientated journal; one that aims to represent the breadth of international research impacting on UK speech and language therapy practice. SLTs continue to lead on, and/or contribute significantly to, many of the most successful articles. This reflects not only their ongoing commitment to clinical evidence, but also their research literacy and ability to communicate with a wide range of audiences.

For many years, the IJLCD has recognised the invaluable contribution of its authors by awarding an annual prize for the paper that stands out most among its peers. This has always been a challenging decision, with the editorial team balancing a range of factors, including originality, research rigour and clinical impact. With the generous support of our publishers, Wiley, this tradition will continue, but we are now looking forward to the next generation of clinicians for whom robust research evidence will become ever more vital, both in terms of clinical practice and service provision. It is with this next generation in

mind that we have turned our attention to student SLTs.

Practical research activity

Each year, the majority of UK students graduating with a recognised speech and language therapy degree are required to engage in practical research activity – typically in collaboration with an academic supervisor, but sometimes with practising SLTs as well. These students are required to submit a project in the form of a thesis or dissertation.

Many of these projects reach incredibly high standards and, in our minds at least, produce original findings that could either make an important contribution to clinical practice or inform further enquiry into clinically related areas of knowledge. Some are recognised through departmental and university-wide prizes; others by external organisations through topic-specific awards, such as that offered by the British Aphasiology Society. A few are published in peer-reviewed journals, but we are aware that many are not utilised beyond their no-less-important contribution to the individual student's degree.

From 2018 onwards, the IJLCD

editorial team, in partnership with the RCSLT, will be celebrating the excellence of student SLTs, their supervisors and higher education institutions (HEIs) by launching a new annual IJLCD/RCSLT student project prize. The scheme will be solely for RCSLT student members.

Nominations and submissions

All eligible UK HEIs will be invited to nominate one student project per pre-registration speech and language therapy programme per year. This will accommodate both undergraduate and postgraduate pre-registration programmes.

The award criteria will be advertised in advance, focusing on actual or potential clinical impact and, crucially, the contribution of the student in the research design, implementation and write-up. Submissions will comprise a project abstract, a supporting statement from an academic supervisor and a checklist detailing the contribution made by the student (eg ethics, data collection, analysis, dissemination, engagement with participants, etc).

Project abstracts will be shortlisted and judged by an award panel comprising IJLCD editors, members of the RCSLT research team and invited SLTs. The prize winner will be awarded a certificate, a cash prize and the opportunity to be mentored by a subject specialist member of the IJLCD editorial team to bring their work to submission standard. A manuscript submission to the IJLCD will be expected within 12 months of the award. Commendations will be awarded to two runner-up projects.

Inevitably, we cannot recognise the contribution made by all RCSLT student members. Many students are engaged in equally important activities but, in terms of research, we know how much

work goes into each project and wish to celebrate excellence through the promotion of high-quality work through the peer-reviewed publication process.

Next steps

We will be liaising with all eligible HEIs to provide them with details of the scheme. The first IJLCD/RCSLT student project prize winner will be announced at the IJLCD Winter Lecture and through Bulletin in late 2018/early 2019. ■

Dr Steven Bloch and Dr Cristina McKean, editors, International Journal of Language and Communication Disorders

Research resources for student SLTs

We hope all of the research resources we produce and publicise are useful and accessible to SLTs and student SLTs alike. Here are a few that are particularly useful for student SLTs; however, they are also of use for practising SLTs at any stage in their career.

- Students 4 Best Evidence (S4BE) – www.students4bestevidence.net – is a growing network of students from around the world who are interested in learning more about evidence-based healthcare (EBH). They use the website and social media to spread learning and ideas about EBH, and are always keen for contributors – a great addition for your CV!
- RCSLT e-learning modules include 'An introduction to evidence-based practice' and 'Research Under the Spotlight: navigating and understanding research articles'. These modules offer an introduction to evidence-based practice and one of its three key components: research evidence.
- speechbite.com is a database of intervention studies in speech and language therapy that rates research using the PEDro-P rating scale to help you identify more robust research.

Research and Development Forum



ILLUSTRATION BY Martyna Wojcik

“Many of these projects produce original findings that could make an important contribution to clinical practice or inform further enquiry”

Introducing Katie Chadd, RCSLT Research Support Officer



I am an early-career SLT, with a strong interest in research and the scientific methods of creating an evidence base for the profession. I have worked as a research intern for the past year, where I have been able to split my time between a clinical role, working with people with aphasia, and a research role, compiling datasets and contributing to dissemination activities. As part of this, I have also been able to

undertake my own research project to earn an MSc, using quantitative methods to evaluate aphasia therapy effects and assessment tools. During this time I learnt to appreciate the different barriers clinicians face in embedding new concepts in their everyday practice, even with a strong desire to be a research-aware practitioner. I am interested in identifying enablers to support evidence-based practice and build confidence in clinicians who are early on in their careers.

My key aim as Research Support Officer at the RCSLT is to continue to build on the R&D team's initiatives such as the Research Champions Network, particularly the involvement of the new generation of therapists. I'm also keen to promote the sometimes-unrealised research skills of our highly capable profession, and demystify some principles of research. If you have any queries about your evidence-based practice, becoming a research champion or accessing research, please get in touch with me at katie.chadd@rcslt.org



Our monthly look at the latest in published research

In the journals

To review an article or suggest an article for review, email lauren.longhurst@rcslt.org

Receptive vocabulary and psychosocial outcomes

Adults with poor receptive vocabulary at 21 years are more likely to have adverse psychosocial outcomes (education, employment/further training and mental health), with a higher risk identified when vocabulary declined after the age of 5, according to this paper.

The researchers used data from an Australian prospective birth cohort study. Data from 1,914 participants was used. All participants had completed vocabulary testing at ages 5 and 21, and were grouped according to vocabulary profiles: persistently good, persistently poor, improved and deteriorated.

There was a significant correlation between vocabulary and education level, employment/further training, affective disorder, and illicit substance and alcohol abuse. Participants with poor vocabulary levels in adulthood were more likely to have left secondary school and not be in employment/further education (though the causality between these variables is questioned). The deteriorated group had increased risk of mental health difficulties. Those with any vocabulary difficulties over time were two to three times more likely to be outside of employment/training.

This study suggests that “vulnerability also remains for those children with ‘resolved’ vocabulary skills”. It presses for services to adapt, including advising teachers and parents and encouraging collaboration between SLTs and psychologists.

Reviewed by **Mia Travlos, Specialist SLT, Greenshaw High School**



Reference

Armstrong R, et al. Change in receptive vocabulary from childhood to adulthood: associated mental health, education and employment outcomes. *International Journal of Language and Communication Disorders* 2017; 52(5): 561-572

Social networks post-stroke

Studies have found that individuals who have strokes often subsequently experience a decline in their social networks; yet, specific predictive factors for this have not been identified.

Using a prospective longitudinal observational study, the researchers of this paper aimed to ascertain predictive factors. They recruited participants two weeks post-stroke and followed 71 participants for six months. Data was collected regarding the participants’ social networks (pre- and post-stroke), perceived levels of social support, activities of daily living, psychological distress, stroke severity and communication difficulties.

Results confirmed that social networks decline after stroke. The researchers identified that those with strong pre-stroke social networks and less severe aphasia had the strongest social networks at six months post-stroke. For those with a more challenging aphasia, friends were a particularly vulnerable network post-stroke. The data also suggested that individuals who perceived themselves to be socially supported, were black, could carry out more activities of daily living and did not have aphasia, were correlated with larger social networks six months post-stroke.

The study highlights a specific vulnerability for people with aphasia. For clinicians, it may suggest the need to help individuals monitor their social networks and incorporate ‘social goals’ into their rehabilitation, and especially address their relationships with friends.

Reviewed by **Katie Chadd, Research Support Officer, RCSLT**



Reference

Northcott S, Marshall J & Hilari K. What factors predict who will have a strong social network following a stroke? *Journal of Speech Language and Hearing Research* 2016; 59: 772-783. doi: 10.1044/2016_JSLHR-L-15-0201

Submission guidelines

The aim of this section of Bulletin is to offer a précis of recent research studies (preferably published within the previous six months) that are relevant to clinical practice. Reviewers are invited to write about a study of their choice, but can contact the Research and Development team (see details below) if support with finding a suitable study is required.

A précis can also be submitted for a systematic review; however, it should follow the format below and include brief methods used to conduct the review (ie number of papers reviewed and inclusion criteria).

Conference papers, editorials or concept pieces are not eligible for inclusion.

The reviews should be structured to include the following information:

- One to two sentences summarising the main points of the paper’s conclusion
- Detail on the participants/methods/intervention
- Main findings
- Quote from the authors
- Reference, with URL to the paper if appropriate
- Reviewer’s name, job title and place of work

If the paper is open access, this should also be highlighted.

If you would like to review an article or suggest an article for review, please email:

Lauren Longhurst, RCSLT Research and Development Officer.

Email: lauren.longhurst@rcslt.org

This section aims to highlight recent research articles that are relevant to the profession. Inclusion does not reflect strength of evidence or offer a critical appraisal. If you find any of these interesting, follow them up and apply your own critical appraisal.

This month's resources
reviewed and rated by
Bulletin's reviewers

Reviews

BOOK

Making Sense of Interventions for Children with Developmental Disorders – A guide for parents and professionals

AUTHORS: Caroline Bowen and Pamela Snow

PUBLISHER: J&R Press

PRICE: £24.99

REVIEWER: Paediatric SLTs with Sussex Community NHS Foundation Trust*

RATING Book ●●●●○

This is a comprehensive guide to the evidence base for interventions for children with developmental disorders. It provides a clear summary of our clinical breadth of expertise. The chapters cover specific clinical areas and provide information SLTs do not always have the time to research in depth. Some interventions get more coverage than others, which reflects current research. It is also interspersed with diagrams and illustrations that help to make the content more accessible.

The book names and shames the interventions with no scientific evidence, but acknowledges the ones that 'show promise' but need to develop the level of evidence. The style of the book will be accessible to most parents, as it presents the parent perspective eloquently; and it is helpful for SLTs to reflect on why some approaches may be attractive to parents. It advocates 'Information Literacy', with advice to help parents navigate the minefields of the internet and the marketplace.

This book will undoubtedly help SLTs and parents understand the evidence levels of the interventions that are currently available for a range of developmental disorders. There are regular updates on this title on Twitter: @txchoices.

*Ruth Hughes, Highly Specialist SLT, Dysfluency Clinical Lead; Marina Stubbs, Specialist SLT; Rebecca Richardson, Specialist SLT; Alison Smith, Specialist SLT; and Marie Newton, Highly Specialist SLT, Mainstream Schools Clinical Lead

BOOK

Talkabout Second Edition – A Social Communication Skills Package

AUTHORS: Alex Kelly

PUBLISHER: Speechmark

PRICE: £39.99

REVIEWER: Amy Rooney, SLT for Adults with Learning Disabilities, South Tyneside team

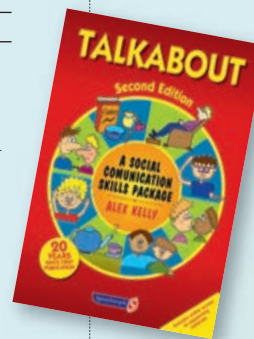
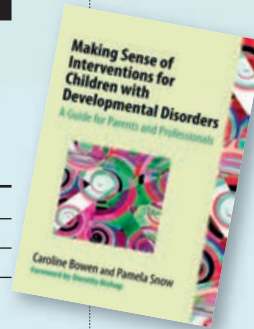
RATING Book ●●●●○

Previous Talkabout books have been aimed at a variety of service users; however, this edition is specifically for adolescents in special schools and adults with intellectual disabilities and/or autism.

The skills package is filled with a variety of role plays, activities, discussions and assessments that support the development of social communication skills. It covers four levels: body language, the way we talk, conversations and assertiveness. Each level is then subcategorised into appropriate verbals and non-verbals associated with that skill. The activities are easy to follow, user-friendly and can be printed off from an online resource.

Through working with the target client group, I found the resources were best suited for individuals with mild intellectual difficulties or autism, as the tasks and activities require participants to have a comprehensive level of understanding and expression. Individuals with more severe difficulties may find it hard to access the materials and be fully involved in the activities.

Each level can take up to 12 weeks – a luxury of time many therapists don't have available; therefore the skills package would be a useful tool for those who work with small groups on a weekly basis, coupled with advice and support from an SLT.



BOOK

Developing Inclusive Practice for Young Children with Fetal Alcohol Spectrum Disorders

AUTHORS: Carolyn Blackburn

PUBLISHER: Routledge

PRICE: £22.99

REVIEWER: Nicki Witkin, Highly Specialist SLT, Hertfordshire Community NHS Trust and Independent Practice

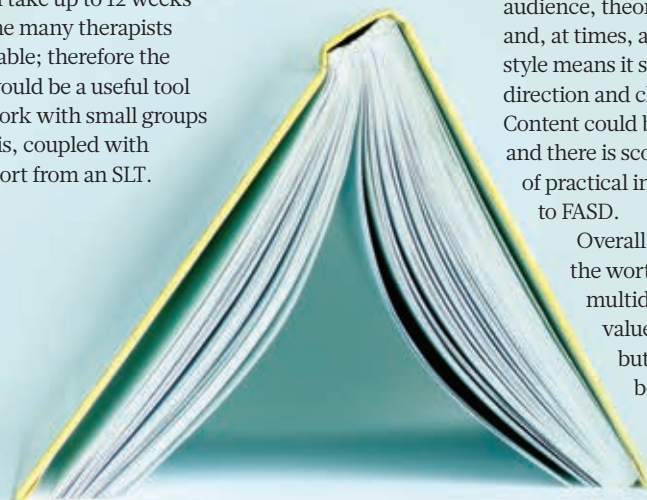
RATING Book ●●●●○

This short textbook aims to develop knowledge, skills and confidence in early childhood professionals working with children with fetal alcohol spectrum disorders (FASD).

The author addresses the topic in a sensitive, respectful manner, putting children and families at the heart. Understanding of sociocultural contexts and the interplay of biopsychosocial factors that affect children's outcomes provide strong rationales for early diagnosis and intervention, and emphasise the importance of inclusion from prenatal care onwards. Indeed, as a contemporary guide to special educational needs policy in early years settings, the book excels. A chapter on practitioner 'competencies', linked with the early years foundation stage themes, outlines expectations of good practice, while questions at the end of each chapter encourage self-reflection.

This is not, however, an 'easy read' manual. The wide target audience, theory-laden content and, at times, academic writing style means it sometimes lacks direction and clear messages. Content could be more defined, and there is scope for further review of practical interventions specific to FASD.

Overall, the book reinforces the worthwhile nature of multidisciplinary and values-based approaches, but would benefit from being read alongside other FASD literature.



Bulletin remembers those who have dedicated their careers to speech and language therapy

Obituary

REMEMBERING

Professor Heather van der Lely

1955–2014

Professor Heather van der Lely died in 2014, aged 58. Having overcome many barriers, Heather trained as a speech and language therapist before embarking on a research career, where she specialised in the cognitive neuropsychology of language disorders. This was a remarkable achievement for a girl who left school at 17 to train as a nursery nurse; her severe dyslexia having never been recognised as a child.

In order to realise her dream of becoming an SLT, Heather took A-levels at night school before winning a place at Birmingham City University, where she gained a first-class degree. She then went into clinical practice in Herefordshire but, quickly realising her heart lay in research, registered to study for a PhD. During her time as a postgraduate student, cognitive scientist Professor Stephen Pinker spotted Heather's potential, recognising that she was "one of the worst writers, but one of the best thinkers in her field".

While studying for her PhD, Heather was diagnosed with a brain tumour. However, following intervention, and despite residual disability, she was soon back at work with a post-doctoral fellowship at Birkbeck College, London. Then, in 2001, Heather was offered

the Chair of Developmental Language Disorders and Cognitive Neuroscience at University College London, and founded a centre to further her work. Her research expanded internationally, with a year in Paris as visiting professor, followed by posts in Louvain, Belgium, in Berlin and at Harvard University. In 2010, she was awarded Fellowship of the Royal College of Speech and Language Therapists for her outstanding contribution to the field.

When diagnosed with terminal cancer in 2013, Heather acted with typical vigour and courage. Refusing to give up, in the last months of her life she drew up plans to improve her home and garden, and co-wrote her last paper with Professor Pinker. The paper radically proposed parallel neural pathways for simple and complex linguistic structures, which could be impaired differentially by congenital or degenerative disease.

Although, sadly, her work remained unfinished due to her final illness, Heather set out plans to further her contribution to research in developmental language



disorder. Alongside her many papers, she had additionally standardised and published the Grammar and Phonology Screen (GAPS) test to assess key markers of specific language and literacy difficulties in young children. However, as it was not yet validated or properly evaluated by the professional community, Heather began the process of setting up a trust to support such research, as well as to fund a lecture series to be hosted across the country. This small but significant legacy will now be dispersed with the intention of making an impact in the field to which Heather dedicated so much of her life. To find out more about the Heather van der Lely Foundation Trust, see page 6.

Hilary Gardner and Alistair Macdonald

“Heather began the process of setting up a trust to support such research, as well as to fund a lecture series”

JANUARY CEN NOTICES

CLINICAL EXCELLENCE NETWORKS

Send your CEN notice by email to bulletin@rcslt.org by 5 January for the February issue, 6 February for March and 6 March for April. To find out more about RCSLT CENs, visit: tinyurl.com/rcsltcens

Venue hire at the RCSLT – special rates for CENs. For further details or to arrange to view our refurbished rooms, email: venuehire@rcslt.org

South West Specific Speech Disorders CEN

9 January, 9am – 4.30pm

Guest speaker Hannah Wilcox will be discussing 'Assessing and treating speech difficulties in children with cleft lip and palate', while Frances Grant will be explaining 'The effects of hearing loss and supporting children with speech difficulties and hearing impairment'. Venue: Filwood Green Business Park, Bristol BS4 1ET. Cost: £10. For more information, email swspeechcen@gmail.com. For tickets, visit tinyurl.com/SWSSICEN

Yorkshire and the Humber Dysphasia, Dysarthria and Dyspraxia CEN

25 January, 10am – 4pm

Dysarthria Study Day with presentations from Professor Nick Miller, Newcastle University, and Claire Mitchell, University of Manchester; to include individual case presentations and discussions. Venue: Education Centre, Harrogate Hospital, Lancaster Park Road, Harrogate HG2 7SX. Cost: free for members; £15 for non-members; £5 for students. To book, email ruth.o'hagan@hdfnhs.uk

South East and London Stammering CEN

26 January, 9.30am – 4.30pm

A study day looking at ways of working on the psychological aspects of stammering. Talks from psychologist Lorraine Maher and Paul Brocklehurst from the Stammering Self Empowerment Programme; plus opportunities to share practice, challenges and new ideas. Cost for the day and CEN membership: £20; students and retired persons: £10. Venue: City Lit, 1-10 Keeley St, London WC2B 4BA. Email Alison Westwood at berkoslt@gmail.com

North East Deafness/Hearing Loss CEN

8 February, 9.30am

Location: Newcastle-upon-Tyne. Cost: Free. For location details and more information, email Poppy at poppyjane.welsh@gmail.com

National Transgender Voice & Communication CEN

9 February, 9.30am – 4pm

Study meeting and AGM. ASD and Trans Voice and Communication: Ruth Bevan, Consultant in Gender Dysphoria, Northern Region Gender Service. Bristol Voice Service: speakers Sam Brady and Sophie Holland. The Intersection of Voice Therapy and Voice Coaching in Trans Voice Work: panel to include voice coaches Annie Morrison and Maggi Stratford, and invited clients for practical workshop. Lunch provided. Venue: Tavistock & Portman NHS Foundation Trust HQ, London NW3 5BA. Fee: £20 for members. For information and to reserve places, email: gstoneham@tavi-port.nhs.uk

CEN in Disorders of Fluency

21 February, 10am – 4.30pm

Music and Art Therapy for People who Stammer. Venue: Birmingham City University. Cost: members, free; non-members, £25 (includes membership for 2018). To book, email Claire McNeil at cmcneil@swindon.gov.uk

Children who have Social Emotional and Mental Health Needs CEN (SE)

23 February, 9.30am – 3.30pm

This is a participant-led day; please bring assessments/resources/interventions to share. We will be discussing issues raised from practice; how to train others regarding SEMH and SLCN; and how to support newly qualified therapists in this field. Location: Dartford, Kent. To book your place, email clare.brightwell@nhs.net

Palliative and Supportive Care CEN

2 March, 9am – 5pm

The SLT's role in long-term/palliative respiratory conditions. Topics to include acute respiratory conditions; advanced lung cancer; management of respiratory conditions in the community, including MND; secretion management; and the SLT's role in the deteriorating patient. Cost: SLTs, £20; students, £15; non-SLTs, £25. Venue: RCSLT, 2 White Hart Yard, London SE1 1NX. Book via Eventbrite. For more information, email palliativecarecen@gmail.com

Scotland Dysphagia CEN

5 March, 9am – 5pm

Topic: 'Dysphagia, Pneumonia, the Gut, Oh My! Medical SLT decision-making off the yellow brick road' with Professor James Coyle, University of Pittsburgh. Venue: The Improvement Academy, Ninewells Hospital, Dundee. Cost: £15. Lunch, coffee and tea provided. For more information and to register, visit: dysphagia-pneumonia-the-gut-oh-my.eventbrite.co.uk

Trent Voice CEN & University of Sheffield

8 March, 6.30pm

A not-to-be-missed repeat opportunity to hear journalist and broadcaster Nick Robinson's story about his battle with cancer and how he got his voice back. His SLT Julia Selby will share voice rehabilitation techniques and an update on the long-term impact. Venue: University of Sheffield. Cost: £15. Open to non-members, students and non-SLT colleagues. Proceeds to Macmillan. Tickets will be available online in due course. For more information, email: TrentVoiceCEN@outlook.com

Essex SLI CEN

9 March, 9am – 4.30pm

Preschool Word Aware: join us as Stephen Parsons and Anna Branagan share their latest intervention programme. Venue: Cordite Room, Wat Tyler Centre, Pitsea, Basildon, Essex SS16 4UH. Cost: current members, £35; non-members, £85. Lunch provided. Email: katherine.farrow@nhs.net

CEN for SLTs with an interest in ABA

23 March, 9am – 5pm

CEN members Mags Kirk, Fiona Mallin and Tara Millan-Brophy will present their MSc in ABA research thesis findings. There will also be presentations on specialist feeding issues. Jane McCready of ABAA4ALL will provide an overview of current ABA provision in the British state sector. Cost: members, £10; non-members, £30. Venue: RCSLT, 2 White Hart Yard, London SE1 1NX. Contact the CEN via Basecamp or email Bethan Mair Williams at bethan.mair@tiscali.co.uk

London Adult Neuro CEN + The Aphasia Research Group (ARG)

27 March, 9am – 5pm

Progressions in Aphasia: PPA and beyond. For more information and for tickets, visit: ppaandbeyond.eventbrite.co.uk

TRACHE CEN

24–25 April

Trache CEN is delighted to host a two-day multidisciplinary event with lectures and case discussions from expert Passy-Muir Valve representatives from the USA, in conjunction with Kapitex. This course is the first of its kind in the UK and will include swallowing and communication assessments on tracheostomy and ventilator-dependent adult and paediatric patients. MDT colleagues welcome. Location: Queen Square, London. Cost: £50 per day. For more information, email: susan.mcgowan4@nhs.net



Speech and Language Therapists

37 hours per week, all year round. Salary Scale £28,485 to £30,153 (NHS Band 6 Equivalent)

Bradstow is a residential special school maintained by the London Borough of Wandsworth for children with severe learning difficulties who are on the Autistic Spectrum Continuum. Many of our pupils have associated communication difficulties and emotional/behavioural challenges associated with their disabilities and medical problems. At Bradstow our primary aims are to enable young people to develop their communication skills and the skills needed to manage their own behaviour, thus enabling them to access everyday opportunities in the community and to live ordinary lives. We endeavour to provide as many inclusive opportunities as possible.

The school is situated on a large site in the seaside town of Broadstairs in East Kent. Our facilities include an amphitheatre, library, swimming pool, parents' flat, interactive soft play and sensory rooms, interactive bicycle track, pottery, all-weather football pitch, sensory garden, and extensive grounds and horticultural projects. Judged 'Outstanding' by Ofsted, Bradstow is a specialist school for communication and interaction. The school offers a range of specialist support and expertise, particularly in the areas of Gentle Teaching, Positive Behaviour Support and Functional Communication. Bradstow School has received international recognition from the European Foundation for Quality Management (EFQM). Bradstow School is also an Investors in People 'Champion'.

We offer extended provision for our pupils by establishing a continuum of flexible support, ranging from day placement to 38-week residential up to 52-week residential to meet individual needs. If you would like to join our community as the Speech and Language Therapist we are confident that you will find this both the most fulfilling and challenging job you have ever undertaken.

The successful candidate will lead a specialist Communication Team to support children and young adults on the Autistic Spectrum Continuum with Severe Learning Disabilities and associated challenging behaviours. This will be carried out in close collaboration with all staff to develop the young people's overall functional communication and language skills, with a focus on functional skills in everyday life. Also, to take the lead on all communication and language issues at Bradstow School, acting as the point of reference for educational and residential staff teams at all levels, and providing support, guidance and professional development to child contact staff and families on developing functional communication skills.

You will be provided with an extended and ongoing package of induction and training. We believe that staff training and professional development, together with a range of staff wellbeing support systems in place, are essential in our specialised field and are at the core of the outstanding success of the school. If you would like to join our team, and help us to continue to transform the lives of these children and their families, please contact us. Working at Bradstow will be challenging and you will need to be committed to the needs of the young people and the school. In return we offer you a highly rewarding and satisfying career which will continue.

For an application form and information pack please call 01843 608727 (24 hour recruitment answer machine), or email: personnel@bradstow.wandsworth.sch.uk.

Please note that CVs will not be considered. Applications should be received by 5pm, Thursday 25th January 2018. Interview date: 7th February 2018





Speech and Language Therapist

Ifield School is seeking a FT/PT SALT to join our established therapy team working with pupils aged 4-19 who have speech, language and communication difficulties associated with profound, severe and complex needs, including ASD.

Newly qualified applicants welcome.

Salary is equivalent to Band 5/6 depending on experience, term time only.

Ifield School is an outstanding school with a commitment to developing communication through a Total Communication approach for pupils and an in-depth training programme for all staff. There may be opportunities for developing mainstream experience with our partner school in the Cedar Federation.

The successful applicant must be registered with the Health and Care Professions Council and be a member of the Royal College of Speech and Language Therapists.

Ifield School is committed to safeguarding and promoting the welfare of children and young people, and expects all staff and volunteers to share this commitment. The post is subject to an enhanced Disclosure Application to the Disclosure and Barring Service and check against the ISA Barred List for children.

For further information or an application form please contact ifieldschool@aol.com or speak to Carol Parry on 01474 365485.

Closing date: 17 January 2018

Executive Headteacher: Mrs Abigail Birch The Cedar Federation, Ifield School, Cedar Avenue, Gravesend, Kent, DA12 5JT



Speech and Language Therapist

35 hrs/week, term time only

Salary up to £30,600 dependent on experience

Norwood is one of the UK's oldest charities and supports children, families and adults with a wide range of needs and challenges to lead the lives they choose. Norwood Children's Services works to enable children with special educational needs to maximise their potential in school and the community. We have a base in Hackney and in Hendon. The service supports children in mainstream schools across North & North-West London and provides support, advice and training for schools and families.

We are looking for:

- A highly motivated and flexible therapist with at least one year's clinical experience
- Experience working in mainstream educational settings
- Experience in running groups and delivering training
- Experience working with children whose provision is provided by an EHCP
- Experience with carrying out assessments and making recommendations for EHCP applications and annual reviews
- Excellent time management skills
- Ability to work independently and as part of a team
- Excellent verbal and written communication skills

Some of our benefits:

- Friendly and supportive team
- Excellent supervision and CPD opportunities
- Opportunities for developing skills across a wide range of needs
- Well-resourced service
- Early finish on a Friday (all year round 1pm close)

If you would like to be considered for this opportunity, please apply with your CV and cover letter to jobs@norwood.org.uk.

If you would like an informal discussion about this post, please contact Lilo Seelos on 020 8457 4453.

This post is subject to an enhanced Disclosure and Barring Service (DBS) disclosure. Registered Charity No: 1059050.



Speech and Language Therapist

Actual Term Time Salary: £23,023.07 – £26,668.80

Including Outer Fringe Allowance. Scale SO1 – SO2 Points 29 – 34 (which includes the NHS Agenda for Change Bands 5 – 6)

36 hours per week, term time only for 39 weeks per year including INSET days.

Start date: January 2018 Permanent Post

Parkwood Hall Co-operative Academy is a Residential / Day Special School for boys & girls aged 7 to 19, with moderate to severe learning difficulties and additional, often complex, needs.

We seek a Speech and Language Therapist who has experience of working with Special Needs. You would join a growing, established team which includes a Senior Speech and Language Therapist, a Specialist Speech and Language therapist, and 2 SLT assistants.

Application forms and information can be found at www.parkwoodhall.co.uk or by sending your email address to info@parkwoodhall.co.uk stating the name of the vacancy. Please note that we cannot accept CVs alone.

Parkwood Hall Co-operative Academy is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment

Applications are invited from black and ethnic minority candidates and from men, as these groups are under-represented on the school's staff. (Race Relations Act sections 35-38 apply). This position is exempt from the Rehabilitation of Offenders Act 1974 and DBS Disclosure is required.

Closing date: By noon on Friday 19th January 2018
Shortlisted candidates visit: 4pm on Thursday 25th January 2018
Interview date: Week beginning Monday 29th January 2018

High Grange

Speech and Language Therapist

Salary: £23,597- £30,661 FTE per annum
Hours of Work: 3 days per week (22.5 hours)

The therapy team at High Grange School includes clinical psychology, occupational therapy and speech and language therapy. The team meets on a weekly basis and joint work is encouraged.

We are looking for a developing specialist or newly qualified therapist with a special interest in autistic spectrum condition to expand our Speech and Language Therapy department.

Reporting to the senior speech and language therapist who is full time at the school, you will provide a specialised child-centred speech and language therapy service to children and young people aged between 8 and 19 years of age who have autism and associated complex needs across the school and care facilities, undertaking assessment, interpretation of assessment results, evaluation, diagnosis, treatment, advice and review.

Essentially you will hold a recognized professional speech and language therapy degree qualification or equivalent and be both a registered member of the Royal College of Speech and Language Therapists (RCSLT) and also hold registration with the Health Care Professions Council (HCPC).

It is desirable you have experience of working within education supporting children and young people with autism and learning disabilities who have speech, language and communication needs.

Support for completing competencies as a newly qualified therapist is available. We offer a competitive salary, annual leave entitlement, local pension scheme, full induction training and further CPD.

For queries or to apply: contact Tracie Parkin:
01332 412777 | tracie.parkin@highgrangeschool.co.uk

High Grange School is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults. All positions will require an enhanced Disclosure and Barring Service check and registration with the DBS Update Service together with all other relevant recruitment checks including obtaining references.

APPOINTMENTS

CALL POOJA BADWAL ON 020 7324 2755



Specialist Paediatric Speech and Language Therapist Vacancies (2 roles)

37.5 hours Monday to Friday, Permanent
Salary: Band 5/6 equivalent and Band 6/7 equivalent

An exciting opportunity has arisen for two paediatric Speech and Language Therapists to join our multi-disciplinary therapy team inclusive of SLT, OT and PT.

Brainwave is a long-established national charity which helps children with disabilities and additional needs to achieve greater independence by aiming to improve mobility, communication skills and learning potential through a range of educational and physical therapies. The children we work with have a range of conditions including autism, cerebral palsy and Down's syndrome. Our highly skilled team of therapists work from centres in Somerset, Cheshire and Essex, plus satellite clinics in London and Scotland, to unlock the potential of each child and provide each family with a tailor-made programme to continue at home.

Experience of working within an appropriate setting is essential (e.g. specialist support schools, early intervention, child development team). This role requires experience using a range of interventions and strategies to support complex communication needs, learning disabilities, and profound and multiple disabilities, including alternative means of communication.

RCSLT and HCPC registration is essential.

To apply or for more information please visit our website at: www.brainwave.org.uk/north-west-centre-opportunities
Or for an informal discussion and to arrange an informal visit please contact: Tel: 01925 825547 or Email: EnquiriesNW@brainwave.org.uk
Closing Date: 29 January 2018



St Dominic's School

Hambledon, Godalming, Surrey GU8 4DX
Tel: 01428 684693 • Fax: 01428 685018

Speech and Language Therapist

£25,142 – £35,457 per annum, depending on experience
Full time, term time only

St Dominic's School is an Autism Accredited school, rated "Good" by Ofsted, a weekly residential and day school catering for up to 110 students between the age of 7 – 19 who have a range of academic abilities but with complex special needs. We offer a truly multi-disciplinary approach. Teachers work with therapy and care staff to enhance the learning process and provide an exciting waking day curriculum. Staff work together to provide a blended approach to therapeutic and educational support, both within individual lessons and across the school as a whole.

We are looking for an enthusiastic and strongly motivated individual to join our experienced team providing intensive specialist support for pupils and students. We seek a therapist who wants to develop their career, skills and knowledge in a specialist educational setting from Key Stage 2 to 5. Experience of working with children and young people with a range of needs including SpLD and Autism is desirable.

This is a unique opportunity to develop clinical skills within an educational environment, offering the chance to work collaboratively with a range of professionals and to use therapeutic skills creatively to meet the needs of pupils and students. In return, we offer excellent support from colleagues and staff, commitment to CPD, and access to internal and external training.

If you believe you can help our learners to fulfill their potential at school, at home and in their communities and are looking for a fresh challenge, then this role may be just what you are looking for.

For an informal discussion about the role please contact Emily Rackstraw, Clinical Lead SaLT at erackstraw@stdominicsschool.org.uk

An application pack is available from our website www.stdominicsschool.org.uk
Please email the completed application to office@stdominicsschool.org.uk

Closing date: Friday 26 January 2018.



We are committed to safeguarding and promoting the welfare of children and all staff will be DBS checked.
St Dominic's is part of RADIUS Special Education Trust.

More House School

Frensham



Band 5 Speech and Language Therapist

Full time

Are you interested in working with boys whose education has failed because of their language processing difficulties? Would you like to join a dynamic team and make a tangible difference to their life-chances?

At **More House School**, we specialise in providing a high quality education for boys with Specific Learning Difficulties. Speech and Language Therapy is at the heart of what we do and each pupil has an individual timetable to ensure their needs are met. More House is set in beautiful and extensive grounds and the school provides excellent benefits, such as a cooked lunch at no charge and free parking.

We are looking for an enthusiastic and adaptable Speech and Language Therapist to join our large team of qualified therapists and specialist teachers in our Learning Development Centre (LDC). The post will involve managing and delivering therapy to a varied caseload, with regular supervision from an experienced, senior Speech and Language Therapist, and CPD is positively encouraged. The successful candidate must have a degree in Speech and Language Therapy and be HCPC registered.

Salary: In line with Band 5 pay scales.

You are most welcome to visit us to see first-hand what we do.

For an application pack, please contact the Headmaster's PA, Mrs Secker-Barker, at hr@morehouseschool.co.uk or T: 01252 792303. Applications will be subject to an enhanced DBS check and satisfactory references.

Closing date for applications: **Wednesday 23rd January.**

Interviews are expected to be held during the week beginning **29th January.**

More House School is committed to safeguarding and promoting the welfare of children and applicants must be willing to undergo child protection screening appropriate to the post, including checks with past employers and the Disclosure Barring Service (DBS).

Please visit our website for further information:

www.morehouseschool.co.uk

Registered Charity number: 311872 | Moons Hill, Farnham, Surrey, GU10 3AP



Kirsty McKenzie

OCCUPATION: HIGHLY SPECIALIST SLT, LISHMAN NEUROPSYCHIATRY & BRAIN INJURY UNIT, BETHLEM ROYAL HOSPITAL

“I wanted to explore why we do what we do, for whose benefit, and gain a greater understanding of the legal frameworks”

With the memory of the rigors of university education

suitably faded (my BSc(Hons) in Speech and Language Therapy at City University completed four years earlier), I felt, perhaps naively, ready to give formal education another go. So, in September 2016, I started a masters degree in Medical Ethics and Law at King’s College London.

This MA may not be considered an obvious choice for an SLT, and the cohort of mostly doctors and lawyers confirmed this; however, the choice was clear to me. I could remember attending a lecture on ethics and law in speech and language therapy while at City, which introduced the ethical and legal issues faced by SLTs around capacity, consent and their relation to feeding decisions. Working at King’s College Hospital (KCH) had also given me real, practical experience of the ethical and legal dilemmas faced by clinicians. I wanted the opportunity to explore why we do what we do, for whose benefit, and to gain a greater understanding of the legal frameworks within which we operate. So I enrolled onto the one-year full-time course.

I continued to work two days a week on the stroke unit at the Princess Royal University Hospital during my first term; and started my new three-day-a-week position at the Lishman Neuropsychiatry & Brain Injury Unit at The Bethlem Royal Hospital during my final term, while writing my dissertation. If an MA wasn’t hard enough, working at the same time certainly added some extra pressure! Nonetheless, the temporary sacrifices to my social life were



outweighed by the fascinating course content.

The autumn and spring terms consisted of twice-weekly seminars. I chose modules related to law and ethics at the end of life and mental health. The ethics modules asked questions such as: Does a person in a persistent vegetative state have best interests? Is euthanasia ever morally justified? What does it mean to ‘die with dignity’? The justice and resource allocation module considered the ethical minefield regarding how we choose to allocate scarce medical resources; while my chosen law modules described the law on euthanasia, organ donation, capacity and mental health law, to name a few. We were encouraged to question whether it is justified to treat mentally ill people differently from other patients: is the compulsory treatment of the mentally ill against a competent refusal

ever justified, and is UK law out of step with international law? Every element of the course drew me into questions I had hardly considered, and I found myself captivated.

My clinical experiences at KCH had formed the ethical questions that motivated me to pursue this degree, and the dissertation component allowed me to consider the philosophy and law of an area that interested me. What I had been most struck by was how our feelings and emotions, and those of patients and family members, impacted decisions regarding risk and palliative feeding. The act of feeding holds considerable emotional sentiment: it is symbolic in expressing love, compassion and nurturing. Therefore, the role

of emotion in these decisions seemed to me to require further exploration. I wanted to know whether emotion was a help or hindrance when making rational, moral decisions; and to what extent emotion influences legislation and case law? To explore these questions, I focused on two areas of medical law: withdrawal of feeding tubes in patients in a minimally conscious and vegetative state; and force feeding of patients with anorexia nervosa.

My experience of completing this degree has been profound. I have gained a greater understanding of the ethics and law that underpins our clinical practice. I tackled two complex subjects in which I had no prior experience – philosophy and law – and found both completely captivating. For those of you considering further education, I would emphatically encourage you to do so. Having the space to learn and question has greatly benefitted my clinical practice.

QUICK LOOK DATES

Various dates

Elklan Total Training Package for 5-11s

10-11 January, RCSLT, London;
5-6 March, Holiday Inn, Salford;
30 April – 1 May, COSLA, Edinburgh.
This course equips SLTs and teaching advisors to provide practical, accredited evidence-informed training to education staff and SLTAs. Innovative advice and strategies help children maximise their speech, language and communication potential and access the curriculum more effectively. Price: £495.
Tel: 01208 841450;
email: henrietta@elklan.co.uk;
visit: www.elklan.co.uk

Various dates

Talking Mats® Courses: Be more effective in involving people in decisions

Online, 23 January; Stirling, 25 January and 22 February; Stirling Advanced Care Planning, 21 February; London, 26 March; London Advanced Care Plan, 27 March; Stirling Justice Seminar, 17 April; Train the Trainer, 18-19 April; Stirling Safeguarding Advanced Course, 20 April; York, 24 April; Manchester, 17 May; Belfast, 17 May. Visit: www.talkingmats.com; email: info@talkingmats.com; tel: 01786 479511.

Various dates

Elklan Let's Talk with Under 5s Tutor Training Pack

15 February, Redruth, Cornwall; 6 March, Holiday Inn, Media City, Salford; 13 June, RCSLT, London. This course is designed for SLTAs, EY practitioners and parents to equip them to provide accredited, practical, evidence-informed training to parents/carers of 2-5 year olds. Participants must have successfully completed the Elklan

Level 3 award, Speech and Language Support for Under 5s/0-3s.
Price: £235. Tel: 01208 841450;
email: henrietta@elklan.co.uk;
visit: www.elklan.co.uk

Various dates

Elklan Let's Talk with 5-9s Tutor Training Pack

15 February, Redruth, Cornwall;
7 March, Holiday Inn, Media City, Salford; 14 June, RCSLT, London.
This course is designed for SLTAs, HLTAs, TAs, SENCOs, teachers and parents to equip them to provide accredited, practical, evidence-informed training to parents/carers of 5-9 year olds. Participants must have successfully completed the Elklan Level 3 Award, Speech and Language Support for 5-11s. Price: £235.
Tel: 01208 841450;
email: henrietta@elklan.co.uk;
visit: www.elklan.co.uk

Various dates

Elklan Total Training Package for Verbal Pupils with ASD

5-6 March, Holiday Inn, Salford;
3-4 May, COSLA, Edinburgh.
This revised course equips SLTs and teaching advisors to provide practical, accredited, evidence-informed training to those supporting verbal pupils with ASD.
Covers a wealth of practical strategies and approaches proven to be effective with these pupils. Price: £495.
Tel: 01208 841450;
email: henrietta@elklan.co.uk;
visit: www.elklan.co.uk

Various dates

Elklan Total Training Package (TTP) for 3-5s with optional TTP for 0-3s

7-8 March, Holiday Inn, Salford (3-5s);
9 March, Holiday Inn, Salford (0-3s);
30 April – 1 May, COSLA, Edinburgh

(3-5s). This course equips SLTs and teaching advisors to provide practical, accredited, evidence-informed training to staff working in Early Years settings from 3-5 years. The additional day provides information for those working with 0-3s.

Teacher/therapist teams welcome. Option to do one day 0-3s for Elklan Tutors who have trained on Total Training Packages for 3-5s or under 5s. Price: £495 for 3-5s two days; £745 for all three days, 3-5s AND 0-3s; £250 for 0-3s one day.
Tel: 01208 841450;
email: henrietta@elklan.co.uk;
visit: www.elklan.co.uk

Various dates, Worcestershire

ARCOS (Association for Rehabilitation of Communication & Oral Skills)

One-day courses, £130: FOTT Study Day, 21 May and 15 October; Moves to Swallow, 11 June and 19 November; Making the Most of Mealtimes, 25 June and 10 December; Therapeutic Oral Hygiene, 16 April and 17 September. Five-day two-part courses, £625: 7-9 May (part 1) and 9-10 July (part 2); 3-5 September (part 1) and 5-6 November (part 2).
Email: admin@arcos.org.uk;
tel: 01684 576795.

Various dates

McNeill Dysphagia Therapy Program

19 June, London; 21 June, Edinburgh;
26 June, Birmingham. One-day certified course with Dr Michael Cray and Dr Giselle Carnaby providing an intensive, systematic, exercise-based approach to dysphagia therapy with adults. LBR funding available (East Midlands), early bird rates, discounts for departmental bookings.
Email: jackie.ellis4@btopenworld.com

9-11 January, London

Elklan two-day intensive course: Communication Support for Pupils with Complex Needs and Let's Talk with Special Children Tutor Pack Day

Two-day course plus special Tutor Pack Day on 11 January. Price: £380.
Tel: 01208 841450;
email: henrietta@elklan.co.uk;
visit: www.elklan.co.uk

19 January, London

Smile Therapy Practitioner Training Day 3

Day 3 training for SLTs and specialist teachers in this innovative 10-step therapy that teaches functional communication and social skills in real, everyday settings. Outcome measures integral to each module and generalisation of skills with parents part of the therapy. Suitable for children, young adults and adults with deafness, ASD, DLD, learning difficulties or physical disability, from age 7 to 25 and beyond.
For information and bespoke training to your local team email: info@smiletherapytraining.com;
visit: www.smiletherapytraining.com

21 January, London

Chain Reactions

An interactive and practical day discussing the effect of biomechanics on the larynx with primary causes elsewhere in the body.
Practical cases from Nick Gibbins and Greg Ryan. Followed by dynamic voice work with Barbara Houseman and Michael Dahl Rasmussen.
Visit: www.britishvoiceassociation.org.uk; email: administrator@britishvoiceassociation.org.uk



Dates: 9th - 11th February 9.00am - 4.30pm

Venue: The Red Lion, 78-80 Watling Street Radlett, Hertfordshire, WD7 7NP. www.redlionradlett.co.uk

Cost: \$800. To register: www.promptinstitute.com/events

PROMPT LEVEL 1: Introduction to Technique

These 3 day intensive workshops focus on teaching the Technique of PROMPT. (PROMPTs for Restructuring Oral Muscular Phonetic Targets)

This workshop teaches a system for assessing and treating Language and Speech Disorders from a perspective of speech-motor control and learning. The course teaches the 'Technique of PROMPT' and trains Speech and Language Therapists to provide tactile-kinesthetic input to support the development of speech movement. Using a holistic framework, participants will learn how to embed speech goals within functional communication, thus developing social interaction and language.

For more information and registration please visit:
www.promptinstitute.com/events



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The RCSLT Policy Team and its activities @RCSLTPolicy

Research and development @RCSLTResearch

CPD @RCSLTLearn

Giving Voice activities @GivingVoiceUK

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Northern Ireland @RCSLTni

Scotland @RCSLTScot

Wales @RCSLTWales

Hubs @RCSLTHubs

Follow our feeds for the latest news and information

5 February, Birmingham

Cervical Auscultation Course

A practical, skills-based course run by Quest Training. Price: £145.50. Visit: www.thespeechtherapypractice.com/training; tel: 07904 981 462; email: info@thespeechtherapypractice.com

7-9 February, Belfast

Hanen's More Than Words® Certification Workshop

Newly updated with even more effective tools for zeroing in on the very specific needs of young children with autism and addressing those needs with evidence-based, family-centered techniques. Learn how you can involve parents to facilitate their child's social and communication skills in everyday contexts. 22 CPD hours. Register now. Visit: www.hanen.org/MTWworkshop; email: info@hanen.org

9 February, Portsmouth

Developing Imaginative Play

Children with communication difficulties are often delayed in the development of symbolic and imaginative play in addition to language. Attend this workshop to learn about the normal development sequence and the ProPELS. Price: £90 (bring a friend for £10). The Ear Foundation at The Elizabeth Foundation, Portsmouth. Email: susanna@earfoundation.org.uk

9 February, Birmingham

CPD Masterclass: The current evidence base for school-aged children with Developmental Language Disorder

Dr Susan Ebbels will focus on the evidence for different approaches to improve sentence production and comprehension, narrative, vocab and word finding. Price: £215. Visit: tinyurl.com/yceuv7va; email: info@coursebeetle.co.uk

10 February, London

Working with transgender voice follow-up study day: 'Continuing Progress'

Open to all SLTs who have attended the three-day course within the last four years. Please bring cases and queries for discussion. 11am to 4pm. Price: £90. Location: 1st Floor, 4 Paddington St., London, W1U 5QE. Email: voice@christellaantoni.co.uk; tel: 07710 006511

23 February, London

How to do Cognitive Rehabilitation Workshop

This one-day interactive workshop is suitable for professionals working with adults who have cognitive problems following brain injury. Price: £90. Location: Gatwick Hilton Hotel. Email: enquiries@braintreetraining.co.uk; tel: 01276 472 369; visit: www.braintreetraining.co.uk/howtodocr_spf.php?id=71

26 February, Nottingham

Developing Language and Literacy in the Early Years

Children begin the process of becoming literate well before they begin formal education. These early years are a critical time for developing strong language skills alongside laying foundations for learning to read and write. This workshop will focus on identifying developmentally appropriate strategies, approaches and resources. Price: £90 (bring a friend for £10). The Ear Foundation, Nottingham. Email: susanna@earfoundation.org.uk

5-9 March, Imperial College London
Laryngectomy: Surgical Voice Restoration

Presented by leading experts, this unique advanced level programme for speech and language therapists

working with laryngectomy patients (standard and extensive surgical reconstruction) includes communication and swallowing rehabilitation, and emphasising surgical voice restoration. Specifically it will focus on problem-solving post laryngectomy; videofluroscopy, air insufflation, Botox and Candida management. Visit: www.imperial.ac.uk/cpd/svr; email: cpd@imperial.ac.uk; phone Eva Moreno at the Centre for Continuing Professional Development on 020 7594 46885.

7-8 March, Salford

Elklan Total Training Package for 11-16s

This course equips SLTs and teaching advisors to provide practical, accredited, evidence-informed training to staff working in secondary school settings and SLTAs. Teacher/therapist teams welcome. Venue: Holiday Inn, Media City, Salford. Price: £495. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

8 March, Leeds

SLT role in Critical Care and Tracheostomy

An introduction to tracheostomy, ventilation, critical care and also trache in the community. Speakers include medic(s), AHPs and nursing professionals. 9am – 4.30pm. Venue: Shine, Nr Leeds Centre. Price: £150 (£125 early bird until 31 January). Email: melaniecolley@nhs.net; tel: 01133 922269.

16 March, London

An introduction to working with children and young people with Social, Emotional, Mental Health and SLCN

Presented by UK expert Melanie Cross, lead author of the RCSLT clinical guidelines on SEMH. Price: £215. Visit: tinyurl.com/y79ckkv4; email: info@coursebeetle.co.uk

17-20 March, London

SOS Basic 3-7.5-day Workshop

The Sequential Oral Sensory (S.O.S) Approach to Feeding Workshop is a trans-disciplinary programme for assessing and treating children with feeding difficulties. It integrates posture, sensory, motor, behavioural/learning, medical and nutritional factors to comprehensively evaluate and manage children with feeding/growth problems. Designed for professionals working with babies, toddlers and small children. Email: sos@therapytrain.co.uk

20-21 March, Birmingham

Two-Day Masterclass: Selective Mutism for Professionals and parents/carers

With Maggie Johnson. Suitable for teachers, therapists and parents. Discounts to support joint attendance. Full rate: £350 with resource manual. Visit: tinyurl.com/yaeprkug; email: info@coursebeetle.co.uk

22-23 March, London

Acceptance and Commitment Therapy for SLTs

Helpful to a wide range of SLT clients/carers and with a strong evidence base, ACT is about acceptance of difficult experience and taking action towards living a valued life. Learn about ACT's key components on this experiential workshop. Price: £199. Venue: City Lit London. Email: rachel.everard@citylit.ac.uk; tel: 020 7492 2579.

23 March, London

Hearing Loss and Autism

What are the challenges for children with hearing loss and autism and how do we support them? Join

researchers, health professionals, educators and families as we explore the issues, share the latest ideas and come up with some practical solutions. Price: £120. Email: susanna@earfoundation.org.uk

23-24 March, London

Insight Workshop

This two-day interactive workshop is suitable for professionals working with adults who have insight problems following brain injury. Location: Gatwick Hilton Hotel. Price: £185. Email: enquiries@braintreetraining.co.uk; tel: 01276 472 369; visit: http://www.braintreetraining.co.uk/l_spf.php?id=72

28 March, Birmingham

New: Recording the evidence and impact of person-centred approaches with Talking Mats

Gives guidance for practitioners and settings around evidence and impact, and how this is recorded. Participants will become registered with Talking Mats Ltd as a qualified user. Price: £170. Visit: coursebeetle.co.uk/talking-mats-training/; email: info@coursebeetle.co.uk

28 March, RCSLT, London

CPD Masterclass

The current evidence base for speech interventions: Translating research into practice. With Dr Helen Stringer. For SLTs who are looking for updates on the latest evidence and implications for practice with regard to clinical interventions for children with developmental speech impairments. Price: £215. Visit: tinyurl.com/ygu6d8hs; email: info@coursebeetle.co.uk

16-20 April, London

Working with deaf people

Part one: an introduction to all aspects of assessment and therapy with deaf children and adults. Price: £460. Venue: UCL London. Visit: www.csdconsultants.com; email: ruthmerritt@csdconsultants.com; tel: 01227 262141.

20 April, Birmingham

Shape Coding by Susan Ebbels®

Learn effective system to help school-aged children improve understanding and production of grammar. Training is suitable for speech and language therapists and teachers. No prior knowledge of Shape Coding is required. Price: £220. Visit: tinyurl.com/ygu8qmpn; email: info@coursebeetle.co.uk

28 April, Birmingham

NAPLIC Conference

Developmental Language Disorder: Making change happen. Keynote: Jean Gross CBE, Chair Berrow Review Panel. Presentations: Making use of evidence and sharing best practice. Exhibition. Venue: Aston University, Birmingham. Price: members £99 to 31 January, £130 after; non-members welcome. Visit: www.naplic.org.uk/conferences; email: carol.lingwood@bopenworld.com; tel: 01273 381009

3-4 May, Edinburgh

Elklan Total Training Package for 0-25s with Complex Needs

This course equips SLTs and teaching advisors to provide practical, accredited, evidence-informed training to support communication in 0-25 year olds with more complex needs. It covers pre-intentional to early intentional communication skills. Price: £495. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

3-4 May, London

Mindfulness for SLTs

Experiential introduction to key elements of mindfulness with reference to mindfulness-based stress reduction and mindfulness-based cognitive therapy. Relevant to wide range of adult/paediatric client groups and has personal stress management/wellbeing benefits for therapists. Price: £199. Venue: City Lit London. Email: carolyn.chesman@citylit.ac.uk; tel: 020 7492 2578

10-11 May, Canterbury

2 Day accredited AVIGuk Video Interaction Guidance™ (VIG) Training

The starting place for those wishing to progress to become an accredited UK VIG practitioner. Using video to support empowerment and change within communication. Price: £400. Visit: tinyurl.com/yajloto8; email: info@coursebeetle.co.uk

18 May, RCSLT, London

smILE Therapy Practitioner Training: Day 3

Day 3 training for SLTs and specialist teachers in this innovative 10-step therapy that teaches functional communication and social skills in real, everyday settings. Outcome measures integral to each module and generalisation of skills with parents part of the therapy. Suitable for children, young adults and adults with deafness, ASD, DLD, learning difficulties and physical disability, from age 7-25 and beyond. For information and bespoke training to your local team, email: info@smiletherapytraining.com; visit: www.smiletherapytraining.com

25 May, London

Stammering Pride and Prejudice

Thought-provoking one-day workshop exploring public and self-stigma around stammering and implications of social model of disability for therapy with children and adults who stammer. Price: £99. Venue: City Lit London. Email: rachel.everard@citylit.ac.uk; tel: 020 7492 2578.

21-22 June 2018, RCSLT, London

smILE Therapy Practitioner Training: Day 1 and Day 2

Day 1 and Day 2 training for SLTs and specialist teachers in this innovative 10-step therapy that teaches functional communication and social skills in real, everyday settings. Outcome measures integral to each module and generalisation of skills with parents part of the therapy. Suitable for children, young adults and adults with deafness, ASD, DLD, learning difficulties and physical disability, from age 7-25 and beyond. For information and bespoke training to your local team, e-mail: info@smiletherapytraining.com; visit: www.smiletherapytraining.com

June 2018, Midlands

TalkTools Level One and Level Two

Tactile-sensory approach using therapy tools to train/transition muscle movements for speech production. Learn how motor activities are used to improve phonation, resonance, and speech clarity. Visit: www.eg-training.co.uk; tel: 01530 274747; email: info@eg-training.co.uk

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