

***Practice* Based Scenario**

**Discharge and patient counselling**

**About this document**

This document is designed to take you through a practice-based scenario to help you reflect on what you might do if faced with a similar situation. It can be used to guide your thoughts and prompt discussion with your colleagues. Working through this document counts towards your continuing professional development (CPD). Your reflections on this document are not assessed and you do not have to send your responses to the RCSLT.

You can work through it on your own, with a colleague or supervisor, or in groups, eg as part of an RCSLT Hub or Clinical Excellence Network.

This document is broken into five parts:

1. **The scenario:** for you to read
2. **The issues to consider:** for you to gather your thoughts on practice issues relating to this scenario
3. **Next steps:** for you to plan out what you would need to do next
4. **Prompts for consideration:** RCSLT prompts for further consideration
5. **Sources of further information:** links to CQ Live themes
6. **Update your CPD diary:** for you to do
7. **The scenario**

**You have been providing therapy to service user with aphasia for nine months via home visits.**

**Your assessment/outcomes indicate the service user has plateaued in meeting their communication goals and their communication impairment is unlikely to reduce further. When you discuss discharge with the service user, they tell you they feel very depressed and isolated.**

**The service user lives alone and is reluctant for speech and language therapy input to end as they enjoy your visits.**

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**What do you do in this scenario?**

1. **The issues to consider**

**What do you need to consider?**

Think about the above scenario and its implications and jot down your notes about issues you may need to consider. Please feel free to use extra sheets of paper if you need. Or, if you are in a group, you may like to record on a whiteboard or flipchart.

1. **Next steps**

**What steps do you think you need to take next?**

1. **Prompts for consideration**

What should you consider in managing this this kind of scenario?

It is recommended that you think about the following prompt questions and formulate a considered strategy to deal with the problem.

Remember that if you are faced with a similar situation you will need to think about it in relation to the frameworks within which you work, such as the Health and Care Professions Council (HCPC) Standards, RCSLT professional guidance and resources, local and national policies and policies of your employer (or your own policies if practising independently). Use the relevant resources available on this website and the list of prompts that follow, to help with your thinking.

Please note that this list is not exhaustive and does not constitute legal advice.

**Prompt questions to consider**

1. What is the SLT role/ boundaries in this scenario?
2. Have SLT goals been met if the patient feels isolated?
3. What elements of this scenario lie within the s/lt remit for counselling?
4. Who else should be involved in supporting this individual?
5. Should this situation have been anticiapted and adressed prior to the point of discharge? How could this have been done?

**Possible next steps**

1. Explore issues of isolation that may arise from the communication impairment
2. Identify and address barriers to social integration
3. Explore local services that may offer longer term support – e.g. befrienders
4. Consider completing an aphasia friendly depression scale
5. Refer to specialised service if mood/ well-being is identified as a significant factor
6. Be clear on the goals and outcomes related to speech and language therapy
7. Clearly document
8. **Sources of further information**

**The following information in the professional accountability and autonomy, and professional guidance sections of the RCSLT website is also particularly relevant:**

1 – [Promote and safeguard the interests of service users and carers](https://www.rcslt.org/professional-autonomy-and-accountability-guidance#section-5)

2 - [Communicate appropriately and effectively](https://www.rcslt.org/professional-autonomy-and-accountability-guidance#section-6)

3 - [Knowledge and skills](https://www.rcslt.org/professional-autonomy-and-accountability-guidance#section-7)

4 - [Delegate appropriately](https://www.rcslt.org/professional-autonomy-and-accountability-guidance#section-8)

5 - [Respect confidentiality](https://www.rcslt.org/professional-autonomy-and-accountability-guidance#section-9)

6 - [Manage risk](https://www.rcslt.org/professional-autonomy-and-accountability-guidance#section-10)

10 - [Record keeping](https://www.rcslt.org/professional-autonomy-and-accountability-guidance#section-14)

[Aphasia](https://www.rcslt.org/aphasia)

[Duty of care](https://www.rcslt.org/duty-of-care)

[Inclusive communication](https://www.rcslt.org/inclusive-communication)

[Counselling](https://www.rcslt.org/counselling)

[Collaborative working](https://www.rcslt.org/collaborative-working)

[Confidentiality](https://www.rcslt.org/confidentiality)

[Consent](https://www.rcslt.org/consent)

[Difficult conversations](https://www.rcslt.org/having-difficult-conversations-guidance)

[Enabling service users, carers and families](https://www.rcslt.org/enabling-service-users-guidance)

**External resources**

[HCPC Confidentiality - Guidance for Registrants](http://www.hpc-uk.org/assets/documents/100023F1GuidanceonconfidentialityFINAL.pdf)

1. **Update your CPD diary**

Working through this scenario counts towards your continuing professional development (CPD). Once you have completed this scenario, please record this learning and your reflections in your CPD diary.