

**Therapies without evidence**

***Practice* Based Scenario**

**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 six 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 professional guidance
6. **Update your CPD diary:** for you to do
7. **The scenario**

**Some members of the public are sharing links extolling the benefits of an intervention that you know has no scientific basis and which may actually cause harm if carried out incorrectly.**



**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**

As a professional you have a duty of care to your service users and so need to think if their sharing of links could result in possible harm. If it is likely to cause a problem then you may need to broach the subject with care and sensitivity.

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 also policies of your employer (or your own policies if practising independently).

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

**Prompt questions to consider**

1. How does this fit with the regulations under which you work?
2. What are the risks of you not intervening?
3. What are the risks to the service users from this intervention?
4. Is there an evidence base?
5. Is there counter-evidence for the approach showing it is ineffective or harmful? Are there side effects?
6. What is the evidence base for alternative approaches?
7. Is there a need to report concerns?
8. Are you working within the limits of your knowledge and skills?
9. How well do you know the people concerned?

**Possible next steps**

1. Can you provide training or carer support to those involved?
2. It is important to make service users and carers aware that interventions may not always have an evidence base and even if they do, the intervention has to be carefully matched to the service user needs.
3. Is there a source of evidence-based resources you can signpost the service users and carers to?
4. **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)

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

7 - [Report concerns about safety](https://www.rcslt.org/professional-autonomy-and-accountability-guidance#section-11)

9 – [Be honest and trustworthy](https://www.rcslt.org/professional-autonomy-and-accountability-guidance#section-13)

[Evidence based practice](https://www.rcslt.org/evidence-based-practice)

**RCSLT Evidence-based clinical decision making tool**

This interactive [evidence-based clinical decision-making tool](https://www.rcsltcpd.org.uk/) provides a step-by-step guide to the clinical decision-making process, taking you from assessment through to the selection and evaluation of interventions. It includes a decision tree to guide you through what to consider for interventions that have a limited evidence base.

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.