



TRANS AND GENDER DIVERSE VOICE & COMMUNICATION THERAPY Competency Framework

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Procedure for reviewing the document: A group of experts working across sectors will be identified and asked to review the document to determine whether an update is required. Members can submit their feedback on the document at any time by emailing: info@rcslt.org

Scope of the document

This document is a training and competency framework for speech and language therapists (SLTs) working with trans and gender diverse people. The framework defines competency in relation to trans and gender diverse voice and communication assessment and therapy, and not in relation to clinical voice disorders assessments and therapy. It is a UK-wide document.

The document aims to support the commissioning of services to deliver a more equitable service to trans clients nationally.

Acknowledgements

If applicable

Working Group

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Remaining working group members to be confirmed following open application process.		
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Contents

To be added when content has been finalised

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1 Introduction and context

1.1 The role of speech and language therapy

Gender identity is “an individual’s personal sense, and subjective experience, of their own gender” (NHS England, 2016). An individual’s voice is a central part of their identity; it is how they communicate with their family, friends, work colleagues, and wider society.

As part of a multi-disciplinary team (MDT), SLTs have a key role to play in ensuring the best possible outcomes for trans and gender diverse people. SLTs, with the appropriate level of competence, can support voice modification, facilitating gender expression through vocal and communication style changes. Voice and Communication Therapy enables trans and gender diverse people to align their vocal and communicative expression with their identity in ways that feel congruent and authentic with their sense of self.

This can help to reduce distress related to gender dysphoria, which can cause a lack of confidence and participation in communication. It can also help tackle transphobia and misgendering and transphobia (for example, people being vocally misgendered on the telephone, or ridiculed in social or workplace contexts because of their voice).

1.2 Key objectives of this document

- To support individual SLTs working with trans and gender diverse people to develop the necessary competencies to operate safely and effectively in this specialist field, and make the case for access to appropriate supervision and support.
- To provide a tool which can be used by supervisors and managers to identify areas of professional development.
- To support the development of the speech and language therapy workforce, to enable the delivery of a more equitable service for trans clients across the UK.
- To guide the commissioning of speech and language therapy services for trans and gender diverse clients in delivery of Voice and Communication Therapy

1.3 Context of the speech and language therapy workforce

Access to speech and language therapy for trans and gender diverse clients is patchy geographically, with very few clinically experienced SLTs in this field nationally.

The geographic variation in England is partly due to location of Specialised Clinical Services for the care of Gender Dysphoria (SCSGDs). There are currently seven gender identity clinics/centres in England – in London, Nottingham, Leeds, Sheffield, Newcastle, Exeter and Northampton. However, even some of the GICs do not currently have a dedicated SLT as an integral member of the MDT.

Some local speech and language therapy services do have SLTs who have developed considerable experience working with trans clients over several years. However, these senior SLTs often do not have regular access or input to an MDT.

Furthermore, some speech and language therapy services in District General Hospitals, outpatient or community services, may not have a clinically experienced SLT at all.

At the time of writing, the current Interim Protocol and Service Specification (NHS England, 2013) is being reviewed by the Clinical Reference Group for NHS England Specialised Gender Identity Services who are tasked to deliver new specifications and innovations in models of care in order to address the concerns identified by the Government Select Committee and Transgender Network.

1.4 Key audiences

- SLTs working in voice services who may receive referrals for trans or gender diverse clients
- SLTs working in specialist gender identity services
- Managers or supervisors of SLTs providing voice and communication therapy to trans clients
- Commissioners of services for trans and gender diverse clients

1.5 Scope of practice

As with all professional practice, SLTs should ensure that they comply with the HCPC standards of proficiency and operate only within their scope of practice.

“Your scope of practice is the area or areas of your profession in which you have the knowledge, skills and experience to practice lawfully, safely and effectively, in a way that meets our standards and does not pose any danger to the public or to yourself” (HCPC, 2013, p.4).

2 Using the framework

2.1 Purpose

The competency framework brings together knowledge, skills and practical competencies. It is intended that the competency framework be used by practising SLTs, with evidence being provided and practice supervised or independently signed off by an appropriately skilled supervisor.

2.2 Who is the competency framework for?

This competency framework has been commissioned and written by the RCSLT. It is for the use of the speech and language therapy profession only.

2.3 How should the competency framework be used?

The framework is hierarchical: each level is built upon the foundations of the one below it. It is possible that a clinician may be developing competencies across two different levels at the same time. This would be perfectly acceptable; however, the SLT must have signed off all sections of each level before the SLT is deemed competent at that level, even if they are working on some aspects of a level above.

If the assessment and management of trans voice and communication is part of the job role this should be clearly stated within the job description. As part of the induction process within the organisation, the line manager/supervisor should ask the new employee for a copy of his or her competency framework.

The competency framework may form part of the formal appraisal process with the employing organisation.

2.3.1 Obtaining, recording and maintaining competencies

Competencies can be worked towards through a number of ways, including: reading, reflective practice in supervision, educational videos, written logs, observation and shadow working, appraisal, journal club, attendance and courses, membership of a CEN, MDT working, supervision and line management.

It is acknowledged that some of the knowledge at the higher levels may be acquired through reading or organisation-based tutorials, or may require access to specific courses.

As with all aspects of the SLT role, the individual SLT bears responsibility for his or her own competence. It may be appropriate therefore for SLTs who have not worked in this area for some time to update their competence by reviewing some of the competencies previously achieved.

2.4 Guidance for supervisors

As with all professional practice, supervisors should ensure that they comply with HCPC standards of proficiency and practise and supervise only within their scope of practice.

Supervisor requirements

- 1) Supervisors are required to have significant knowledge, skills and experience in the field of trans voice and communication therapy. It would be preferable (ultimately) for a supervisor to be signed off to at least Level C; however, it is recognised that some supervisors may have achieved their competence before this competency framework is implemented.
- 2) Supervisors should also be able to demonstrate ongoing practice and CPD in the area of trans voice and communication therapy.
- 3) Supervisors should be familiar with the knowledge, skills and competence required and be able to direct SLTs to relevant reading.
- 4) Supervisors should be able to teach aspects of the knowledge and skills required or identify courses that would provide this.
- 5) Supervisors will be required to sign the competency framework

The supervisor role and the signing-off of the competency framework are very important. It is emphasised that supervisors are signing knowledge, skills and/or competency in the context observed, but that ongoing support, supervision and CPD will be necessary.

In signing the competency framework the supervisor is signing that she/he is confident that the supervisee has the relevant knowledge, skills and/or practical competence at that point in time. It should be noted that the supervisor may like to keep evidence/documentation of why she/he was confident in this, in case there are any issues regarding the practice of the supervisee in the future, for example, within an HCPC investigation.

It is recommended that supervisors:

- keep copies of the relevant competency framework documentation and notes of all aspects of the competency framework that they sign for others, so that they have a clear record
- have undertaken training in the supervision of others.
- be in receipt of formal, individual and peer supervision within this clinical area.

For more information on supervision, please see the RCSLT website:
https://www.rcslt.org/cq_live/resources_a_z/supervision/supervision

2.5 Guidance for employers

The competency framework is designed for use in the practical acquisition of competence in the area of trans voice and communication therapy. The employer is responsible for ensuring that the roles and responsibilities associated with trans and gender diverse clients are clearly detailed in the SLT's job description.

Employers have a responsibility to ensure that the supervisor has adequate skills to provide supervision and teaching in this area and that this is clearly detailed in their job description. Employers should ensure that adequate time is given for supervision.

If there is no suitable supervisor within the employing organisation, employers may arrange for a supervisor from another organisation, but should ensure that this fits within a professional and clinical governance framework. Again, employers have a responsibility to ensure that the supervisor has adequate skills to provide supervision and teaching in this area and that this is clearly detailed in their job description.

As with all clinical areas it is advised that employers ensure there is appropriate supervision in place for the supervisor.

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RCSLT Trans and Gender Diverse Voice & Communication Therapy Competency Framework - Level A

An SLT at Level A is likely to be newly working in a voice service, with little or no experience of working directly with trans clients.

Name

Clinical caseload/client group

	Competency	Suggested learning task	Evidence	Date completed	Supervisor sign off
A1	Understanding of gender identity	<i>Suggested learning task</i>			
A1.1	Able to use terminology appropriately e.g. transgender, gender dysphoria trans man, trans woman, non-binary person, and apply pronouns accurately				
A2	Trans voice & communication therapy				
A2.1	Knowledge				
A2.1.1	Understand the role of speech and language therapy for trans clients				
A2.1.2	Knowledge of gender differences in voice and communication without assumption or stereotyping				
A2.2	Practical skills				
A2.2.1	Able to use objective and perceptual measures of pitch, range, intonation, and perceptually identify resonance characteristics				

RCSLT Trans and Gender Diverse Voice & Communication Therapy Competency Framework - Level B

An SLT working at Level B will be experienced working with clinical voice disorders, and have some limited experience of working with trans clients – perhaps 1 – 5 new clients per year.

Name

Clinical caseload/client group

	Competency	Suggested learning task	Evidence	Date completed	Supervisor sign off
B1	Understanding of gender identity	<i>Suggested learning task</i>			
B1.1	Understand gender as a continuum				
B1.2	Knowledge of current ICD and DSM classifications of gender dysphoria				
B1.3	Knowledge of social role change and transition process for trans people				
B1.4	Awareness of gender identity clinics and the roles of various gender specialists within the MDT				
B1.5	Understand psychological models e.g. psychodynamic, humanistic, cognitive				
B1.6	Knowledge of hormone interventions for trans men and trans women and impact on voice and appearance				

Trans and Gender Diverse Voice & Communication Therapy Competency Framework
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	Competency	Suggested learning task	Evidence	Date completed	Supervisor sign off
B1.7	Awareness of the fundamentals regarding gender surgeries				
B1.8	Awareness of the fundamentals regarding pitch surgeries				
B1.9	Awareness of current WPATH Standards of Care (WPATH, 2012) and the Gender Recognition Act 2004				
B1.10	Awareness of risk factors of gender dysphoria e.g. distress and suicide ideation, and the need for GP liaison.				
B2	Trans voice & communication therapy				
B2.1	Knowledge				
B2.1.1	Knowledge of service referral criteria				
B2.1.2	Knowledge of vocal hygiene and care, and hyperfunctional risk factors in voice modification				
B2.1.3	Understand how other diagnoses (e.g. Autism Spectrum Disorder, learning disability) may require adaptations to voice and communication therapy				
B2.1.4	Awareness of qualitative and quantitative measures for all vocal parameters				

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	Competency	Suggested learning task	Evidence	Date completed	Supervisor sign off
B2.2	Practical skills				
B2.2.1	Able to deliver interventions in pitch, resonance, intonation, range and voice quality for trans women				
B2.2.2	Able to use audio and visual feedback systems to support client				
B2.2.3	Able to recognise, produce and model appropriate pitch parameters for trans women with the use of apps and devices				
B2.2.4	Able to model and contrast head and chest resonance				
B2.2.5	Able to model laryngeal and articulatory postures				
B2.2.6	Able to model and contrast dynamic communication and non-verbal gender markers (without stereotyping)				
B2.2.7	Counselling skills and knowledge of key psychological approaches e.g. cognitive behavioural therapy (CBT)				
B2.2.8	Skills in personal experiential voice work beyond rehabilitative exercises				

RCSLT Trans and Gender Diverse Voice & Communication Therapy Competency Framework - Level C

- An SLT who is signed off at Level C can demonstrate competent performance in the assessment and management of trans and gender diverse clients.
- The SLT at Level C will supervise, support and train others in voice and communication therapy for trans clients.
- Ideally, the Level C SLT will receive support and supervision from an SLT working at Level D.
- SLTs may work at Level C for many years without fully moving to Level D.
- Examples of practitioners who may be working at Level C:
 - A practitioner who is an experienced SLT working with clinical voice disorders, with substantial experience of working with trans clients – perhaps 6 - 19 new clients per year.

Name

Clinical caseload/client group

	Competency	Suggested learning task	Evidence	Date completed	Supervisor sign off
C1	Understanding of gender identity	<i>Suggested learning task</i>			
C1.1	Awareness of current debate on definitions and terminology				
C1.2	Understanding of gender spectrum and gender diversity				
C1.3	Understanding of complexity of social role change and transition process for trans people				
C1.4	Knowledge of assessment process for gender dysphoria and psychological / psychotherapeutic interventions available				

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	Competency	Suggested learning task	Evidence	Date completed	Supervisor sign off
C1.5	Knowledge of specific pathways and timings of gender surgeries for trans men, trans women and gender diverse clients				
C1.6	Knowledge of thyroid cartilage reduction procedures and outcomes				
C1.7	Knowledge of UK's Good Practice Guidelines (RC Psych, 2014) and relevant current legislature and protocols				
C2	Trans voice & communication therapy				
C2.1	Knowledge				
C2.1.1	Understanding of subtleties of gender expression in voice and communication				
C2.1.2	Understanding of SLT's role in facilitating vocal congruence with gender role at a holistic level including psychological ownership of authentic voice and its generalisation in individual and group sessions (if practical)				
C2.1.3	Awareness of client reported lived experience as outcome measure				

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	Competency	Suggested learning task	Evidence	Date completed	Supervisor sign off
C2.1.4	Familiar with psychological approaches to support clients' alleviation of gender dysphoria in gender expression related to voice modification intervention				
C2.1.5	Knowledge of the trajectory of voice and communication therapy within the transition process for trans people				
C2.2	Practical skills				
C2.2.1	Able to deliver interventions in pitch, resonance, intonation, range and voice quality for trans men				
C2.2.2	Able to recognise, produce and model appropriate pitch parameters for trans men and gender diverse clients with the use of apps and devices				
C2.2.3	Able to model and contrast dynamic communication and non-verbal gender markers without stereotyping				
C2.2.4	Able to give sensitive feedback on posture and non-verbal communication markers, where appropriate				

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	Competency	Suggested learning task	Evidence	Date completed	Supervisor sign off
C2.2.5	Skills in personal experiential voice work gained from clinical voice and voice development pedagogy to support modelling and understanding of the client's change process.				
C3	Supervision and education				
C3.1	Provides support and supervision to other colleagues working with trans clients.				

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RCSTL Trans and Gender Diverse Voice and Communication Therapy Competency Framework - Level D

- SLTs working at this level are highly-specialised, autonomous practitioners and are likely to be predominantly working with trans clients.
- They will be supporting and supervising staff who work at Level C to develop their competencies.
- They will access supervision from peers, who may be outside of their department or profession e.g. a non-SLT gender specialist.
- The Level D practitioner will take a lead in keeping up-to-date with research and evidence-based practice and strategic developments, and disseminating this to others.
- They will seek out and respond to opportunities to further knowledge of this specialist field within the wider profession, working on or contributing to working parties, research and advisory boards.

Level C practitioners developing Level D competence

It is probable that many SLTs operating at Level C will also demonstrate Level D competencies in some areas without working at Level C overall. Where this is the case, SLTs are encouraged to populate the relevant sections of this document.

Name

Clinical caseload/client group

	Competency	Competency assurance	Evidence	Further ongoing action plan for developing own clinical skill and competence following peer supervision
D1	Understanding of gender identity	<i>e.g.</i>		
D1.1	Understanding of gender politics, gender diversity, gender fluidity and current discourse in LGBTQ issues			

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	Competency	Competency assurance	Evidence	Further ongoing action plan for developing own clinical skill and competence following peer supervision
D1.2	Understanding of risk factors to de-transition			
D1.3	Knowledge of Gender Recognition Certificate process			
D1.4	Understanding of current issues in commissioning and care pathways and service specification			
D1.5	Awareness of current commissioning and funding issues, and care pathways, for pitch surgeries and thyroid cartilage reduction procedures.			
D2	Trans voice & communication therapy			
D2.1	Knowledge			
D2.1.1	Understanding of gender expression in voice and communication across the gender spectrum			
D2.1.2	Understanding of protocols for treatment of risk factors of gender dysphoria e.g. distress and suicide ideation			

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	Competency	Competency assurance	Evidence	Further ongoing action plan for developing own clinical skill and competence following peer supervision
D2.2	Practical skills			
D2.2.1	Able to deliver interventions in pitch, resonance, intonation, range and voice quality for gender diverse clients			
D2.2.2	Able to input into complex case discussions as part of the MDT			
D2.2.3	Able to carry out assessments for phono surgery suitability as part of MDT treatment recommendations			
D2.2.4	Experience of adapting voice and communication therapy for clients with physical and/or mental health diagnoses			
D2.2.5	Experience with trans men and gender diverse clients' individual voice care needs in relation to hormone therapy			
D2.2.6	Able to demonstrate chest, pharyngeal, oral, facial, and head resonances, and how clients can acquire these, including work with trans men and gender diverse people			

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	Competency	Competency assurance	Evidence	Further ongoing action plan for developing own clinical skill and competence following peer supervision
D3	Supervision and education			
D3.1	Provides supervision to local SLTs working at Levels B and C, and others at Level D			
D3.2	Regular liaison with SLTs working with trans clients at all levels			
D3.3	Provides support to other SLTs with regard to developing experiential voice skills			
D3.4	Contributes to education and research in the field			

3 References

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Appendix: Methodology

Gender dysphoria workshop

In June 2014 the RCSLT hosted a workshop for SLTs and others with a role in voice and communication therapy for clients with gender dysphoria. The workshop included a discussion about the competencies required, and the need for a competency framework was identified. As a result of the workshop, a first draft competency framework was created and shared.

National Transgender Voice and Communication Therapy Clinical Excellence Network

In October 2015 a new clinical excellence network (CEN) was established for SLTs working in this field. Ahead of the inaugural meeting of the CEN, a revised version of the framework was shared, and on the day a workshop was held to gather initial feedback. As a result of the feedback, and suggestions from the RCSLT on the format of the framework, a subsequent draft was developed and submitted to the RCSLT for wider consultation.

Consultation with the profession

To be completed following the consultation