Upskilling the wider workforce

Introduction

Working collaboratively with others is a fundamental aspect of speech and language therapy practice, which often involves upskilling the wider workforce.

Upskilling the wider workforce refers to the process of equipping professionals (such as teachers, teaching assistants, care staff, and early years practitioners) with the knowledge, skills, and confidence to support communication and swallowing needs. SLTs provide their professional colleagues with training to meet professional and legal
standards share their expertise and help foster a shared understanding of speech, language and communication needs (SLCN) and dysphagia within their setting.

Unlike **delegation**, where specific tasks are formally allocated to others under supervision and responsibility remains with the SLT, upskilling focuses on capacity building. It empowers staff to embed supportive practices within their usual scope of work. It also differs from enabling service users (ADD LINK), which is about directly supporting individuals and their families to understand, manage and advocate for their own needs.

Upskilling the workforce ensures that the environments around service users are informed, responsive, and communication friendly. This process requires consideration of various legal and professional requirements by the registered SLT and those they work with.

Responsibilities

SLT core role

To support improved outcomes for individuals with speech, language and communication needs (SLCN) and eating, drinking and swallowing difficulties (EDS), SLTs have a core role in:

- upskilling the wider workforce, including clinical colleagues, education professionals, justice system staff and those in the third sector
- acting as a role model for best practice in speech and language therapy delivery
- ensuring that training provided is aligned with best practices and current research evidence
- monitoring the impact of training initiatives and adjusting content accordingly

HCPC standards relating to upskilling the wider workforce

Education, Advice and Training

- **HCPC standard 14.14**: *"be able to advise and educate service users, their families and carers to promote health and prevent disorders"*
  While focused on families, this standard also underpin the SLT's advisory and training role with staff in education, care, and community settings.
- **HCPC standard 14.15**: *"be able to design, deliver, assess and evaluate training for other professionals"*
  This standard is directly relevant to upskilling the workforce and highlights the SLT's responsibility to build others' knowledge and confidence within their scope of practice and area of expertise. This does not negate the need for certified courses from specialist SLT certified providers where appropriate or required.

Collaborative and Interprofessional Practice

- **HCPC standard 9.3**: *"understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team"*
  This is essential when working alongside other professionals in shared environments (e.g. classrooms, clinics, care homes).
- **HCPC standard 9.4**: *"contribute effectively to work undertaken as part of a multi-disciplinary team"*
  This standard promotes shared understanding and cooperative working for service user benefit.

- **HCPC standard 9.6**: *"be able to engage in inter-professional practice"*
  This standard supports mutual learning and the sharing of expertise between disciplines.

Leadership and Capacity-Building

- **HCPC standard 6.4**: *"understand the need to engage service users, carers and families in planning and evaluating interventions to meet their needs and goals"*
  This encourages professionals working around the child or adult to ensure they are engaged in co-production to ensure service users are a core driver behind guiding intervention , helping them benefit from SLT input.
- **HCPC standard 11.1**: *"be able to reflect on and review practice"*
  This enables SLTs to continuously improve how they support and mentor others.
- **HCPC standard 11.2**: *"recognise the value of supervision, peer support and reflective practice"*
  This standard lays the foundation for supporting and guiding others through mentoring or coaching models.

Leadership in Inclusive and Holistic Practice

- **HCPC standard 5.1**: *"understand the importance of valuing and promoting diversity, equality and inclusion"*
  This promotes inclusive communication and cultural competence in workforce training.
- **HCPC standard 13.3**: *"understand the impact of social and psychological factors on service users, families and carers"*
  This standard helps SLTs share holistic perspectives with colleagues in education or care.

Public Health and Capacity Building

- **HCPC standard 14.3**: *"understand the principles of health promotion and the ways in which SLTs can empower service users"*
  This standard can be extended to empowering the wider workforce to support prevention and early intervention.

Professional Knowledge and Application

- **HCPC standard 14.17**: *"understand the use of group and individual therapy approaches in a variety of environments"*
  This standard explicitly supports demonstrating and modelling strategies to staff within relevant settings, showing how group and individual approaches can be embedded in classrooms, clinics, homes and community spaces. Training, coaching and side-by-side modelling are recognised as legitimate modes of intervention to increase fidelity and

sustainability.

- **HCPC standard 14.19**: *"understand the need to provide services in partnership with service users"* This extends to working in partnership with professionals around the service user to co-deliver support.

See **HCPC standards of conduct, performance and ethics**.

Upskilling the wider workforce

SLTs do not have the authority to delegate tasks to the wider workforce unless they hold managerial or supervisory responsibility for the individuals performing those tasks. The term upskilling is used to describe situations where, for example, an SLT working with a teaching assistant, asks them to undertake therapy activities. In such cases, the SLT remains accountable for the therapy outcomes but does not have managerial or supervisory responsibility for the person carrying out the tasks. In this way, SLTs can contribute to effective joint working by supporting key workers and enhancing the knowledge and practice of colleagues.

When agreed strategies or activities are not implemented by others, SLTs should:

- document the advice, training or modelling provided, including the intended outcomes and who was involved
- follow up with the individual or team to understand barriers to implementation (e.g., capacity, confidence, competing demands, or lack of understanding)
- provide further support such as refresher training, simplified resources, or alternative strategies if appropriate
- escalate concerns where lack of implementation places the service user at risk, by raising the issue with the relevant manager, SENCO, or safeguarding lead, depending on the context
- record professional judgement and decision-making processes, showing that the SLT has taken reasonable steps to support implementation, manage risk, and act in the best interests of the service user.

This approach ensures SLTs maintain accountability for therapy outcomes while recognising the limits of their authority over the wider workforce. It also reflects HCPC expectations around communication, partnership working and safeguarding, while providing clear evidence of professional responsibility and risk management.

Increasingly, SLTs are working at organisational and community levels to complement direct interventions. For example:

- **Flying Start**: An initiative supporting families with children under four years of age in some of the most disadvantaged areas of Wales.

For further information, see:

- **Case Study:** A workforce development programme delivered by **Evelina London's Community Speech & Language Therapy service in collaboration with LEAP (Lambeth**

Early Action Partnership). Designed for early years settings (nurseries, preschool/early childhood centre) in the Lambeth area (and some in Southwark) to improve communication development of children under age 5.

- **Learning Disabilities Charter West Wales**: Developed by *The Dream Team*, a group of individuals with learning disabilities, this Charter advocates for rights, promotes inclusive practice, and provides training to organisations, encouraging them to commit to accessible, communication-friendly environments

Purpose of training

The purpose of training is to support appropriate delegation and to maximise the impact for service users of speech and language therapy. Any training supplied by SLTs, regardless of the purpose or outcomes, should never include activities which should only be undertaken by a registered SLT.

To clarify lines of accountability, RCSLT recommends including how training, allocation of tasks and ongoing monitoring will be quality assured by SLTs in any contract or service level agreements made with other services.

The purpose and proposed outcomes of training, enablement or awareness raising, supplied by the SLT workforce must be clear. Training can have a variety of purposes. It can:

- equip the wider workforce to understand the advice they are given, including understanding why needs must be met
- actively promote interdisciplinary working
- develop skills to support service-users' needs
- develop strategies and approaches to support communication
- communicate support and empower service users, carers and parents including self-management
- aim to create a whole different environment. For examples, see: **Stoke Speaks Out** – a multi-agency approach to tackling high incidence of speech, language and communication needs across a whole community; **NNUTS** – A framework for partnership working between SLT services and education settings.

SLTs may also provide training and coaching opportunities to parents and carers as part of delivering a high-quality, person-centred service.

In line with HCPC requirements for continuing professional development (CPD), SLTs should also seek out training opportunities for themselves where they feel further development in the design and delivery of training is required. This ensures they can deliver high-quality, evidence-based training that is engaging, inclusive, and appropriate to the needs of the audience, while maintaining confidence in their role as both clinicians and educators.

Types of training

When developing training, SLTs must be clear about the distinction between:

- **training** (transferring specific information and knowledge)
- **learning** (the process of absorbing that information in order to increase skills and abilities and make use of it under a variety of contexts)
- **coaching** (ongoing relationship to enhance knowledge or skills)
- **empowerment** (increases an individual's ability to make decisions and have control over their lives)
- **the acquisition** of skills and competencies by the person receiving the training.

Quality assurance

The RCSLT strongly recommends that when training is developed and delivered by SLTs, quality assurance is built into the training. This means having clear processes to ensure that training is accurate, evidence-based, accessible, and appropriate for the intended audience.

Standards of Practice

- Clear learning objectives and intended outcomes are identified in advance.
- Training content is referenced to evidence-based practice, HCPC standards, and RCSLT guidance.
- Materials are reviewed internally (e.g. by colleagues, supervisors, or service leads) before delivery.
- Feedback is gathered from participants to evaluate effectiveness and identify areas for improvement.
- Updates are made regularly to keep training aligned with new evidence, policies, and frameworks.

Governance and Oversight

- At an organisational level, service leads or managers may oversee training quality.
- For independent SLTs, peer review, supervision, and reflective practice are essential mechanisms.
- Commissioners and contracting organisations may also build quality assurance requirements into service-level agreements.
- Ultimately, all SLTs remain professionally accountable to the HCPC for the quality of training they deliver.

Professional Responsibility to Address Unsafe Practice

SLTs have a professional and ethical duty to raise concerns if training content delivered by themselves, colleagues, or external providers is unsafe, misleading, or not aligned with professional standards. This should be done through:

- immediate feedback to the trainer or team where appropriate
- reporting via organisational governance structures or safeguarding leads
- escalating concerns to commissioners, employers, or professional bodies if risks remain unaddressed.

By embedding robust quality assurance processes and maintaining vigilance in monitoring, SLTs protect service users, uphold HCPC standards, and ensure that training remains a safe and effective means of supporting the wider workforce.

Best practices in collaborative working

Working in partnerships

Where SLTs work in partnership with teachers, teaching assistants, nurses and other professionals, there should be a contract or service level agreement in place that specifies how training, co-produced interventions, and the assignment of tasks will be quality assured by SLTs. For example, local authorities may set expectations regarding the quantity and type of SLT input required for training education staff, and how service user voice is incorporated into planning and evaluation.

Independent SLTs may also work collaboratively across teams and actively co-produce information and interventions with service users, families and the wider public. This includes ensuring that training materials, strategies and support approaches are shaped by lived experience and reflect the needs and preferences of those who use services. SLTs must also ensure that appropriate information, training, supervision and monitoring are provided to those carrying out speech and language therapy-related tasks.

In addition, independent practitioners should build strong partnerships with NHS teams, educational institutions, and third-sector organisations, ensuring that co-produced interventions are consistent, equitable and sustainable. Where there is an independent SLT provider involved in a case alongside statutory services, collaboration should be underpinned by clarity on roles and responsibilities, the nature of the interventions to be delivered, and the training and upskilling provided to others.

Keeping records

Communication and record-keeping are essential to:

- maintaining effective working relationships
- ensuring safeguarding responsibilities are met.
- evaluating the effectiveness of training over time.

Challenges in workforce upskilling

Potential issues may arise when upskilling the wider workforce, including:

Screening processes
A distinction must be made between screening tests that can be conducted by trained individuals, and detailed assessments, which must be performed by a registered practitioner.

Workforce turnover
Frequent staff changes can impact the continuity and sustainability of training outcomes, requiring repeated investment of SLT time and resources to maintain knowledge and practice across teams.

Varying levels of prior knowledge
Training programmes should be flexible and adaptable to different levels of expertise within the workforce to ensure accessibility and effectiveness.

Resources required
Upskilling activities require sufficient resourcing in terms of SLT time, staffing, supervision structures, and access to appropriate training materials. Without adequate planning and investment, the quality and sustainability of workforce training may be compromised.

Balancing training and direct intervention
It is important to recognise that while upskilling others can extend the reach and impact of speech and language therapy, this must be carefully balanced against the need for SLTs to provide direct input to service users on their caseloads. Services must ensure that upskilling activities do not detract from timely, specialist intervention where it is required, and that decision-making about resource allocation remains focused on achieving the best outcomes for service users.

Strategies for ensuring sustainable learning

To maximise the long-term benefits of workforce upskilling, SLTs should:

- implement a train-the-trainer model, where trained individuals can continue to support others within their settings
- provide ongoing mentorship and peer support to reinforce learning
- establish evaluation frameworks to assess the effectiveness of training and make improvements as needed

- ensure that training materials are accessible, engaging, and aligned with current best practices.

Resources

For additional information, visit:

- **Calderdale Framework**: A structured approach for reviewing skill mix and roles within services.
- **NHS Long Term Plan**

Reflection for SLTs

Consider the following question:

How can you effectively balance the responsibility of upskilling the wider workforce while ensuring that service users receive specialist, high-quality speech and language therapy? Use the **Professional Development Framework** section 1.6b to guide your thinking.

Contributors

Lead Author

- Paula Walker, Highly Specialist Speech and Language Therapist

Supporting Authors

- Jo Bradburn, Deputy Director of Allied Health Professions and Speech and Language Therapist
- Natacha Capener, Lecturer and Speech and Language Therapist
- Nicola Holmes, Chair of ASLTIP
- Wing yee Lam, Practice Development Speech and Language Therapist
- Maria Luscombe FRSCLT
- James Martin, Highly Specialist Speech and Language Therapist (Head & Neck)
- Katie Masters, Specialist Speech and Language Therapist
- Claire Matheson, Service Lead Adult Learning Disability
- Rosalind Gray Rogers, Programme Director for Speech and Language Therapy
- Jo Taylor, Speech and Language Therapist

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