



**Standards for Working with
Speech & Language Therapy Support
Practitioners**

March 2003



Standards for Working with Speech & Language Therapy Support Practitioners

Introduction

RCSLT acknowledges the important role that assistants and bilingual co-workers have in the delivery of effective speech and language therapy services. These support practitioners are integral members of the speech and language therapy team, engaged in a wide range of clinical settings with diverse client groups, duties and responsibilities.

The qualified speech and language therapist holds the ethical and legal ‘Duty of Care’ for the patient/client and consequently for the standard of duties delegated to a support practitioner. All clinical decisions concerning the client are therefore the responsibility of the qualified speech and language therapist, including client selection for therapy, admission to the caseload and discharge from the service. A therapist must therefore always be responsible for the work undertaken by a speech and language therapy (SLT) support practitioner¹.

The Model of Professional Practice (RCSLT, 2001) to emerge from the College’s Competencies Project helps to identify the range of clinical competencies in speech and language therapy. The Support Practitioner Framework (RCSLT, 2002) developed from this can be used to define assistant and bilingual co-worker scope of practice, and the boundaries of support work in relation to that of speech and language therapists. The framework can also be used to identify training and support development opportunities, reflecting a sense of progression within the parameters of support work.

Standards Framework

This document sets out a standards framework, applicable to all areas of practice, which can be used to assist in the development of local policies around the training and employment of SLT support practitioners. These policies should be in place to ensure the delivery of high quality services and standards of practice.

¹ The term ‘SLT Support Practitioner’ has been used in this document for ease of reading as it encompasses the variety of job titles applied to those employed clinical work supporting the delivery of speech and language therapy practice (e.g. assistant, technical instructor, bilingual co-worker, support worker). It is not intended to indicate a shift towards using the title in the work place.

The standards framework is based on the professional accreditation scheme *Signed up to Quality* (RCSLT, 2001).

Clinical Governance

The clinical governance agenda requires all health care organisations to provide evidence of effective and efficient services delivered by staff with the right skills. The standards for working with SLT support practitioners are therefore structured on the clinical governance model and designed to be auditable. It is recommended that the standards be audited by services on an annual basis as part of the individual performance review (IPR) process.

Format

The format of each standard enables you to indicate whether it has been achieved, not achieved or if the service is working towards achieving the standard. Most are followed by some examples of evidence that could be used to demonstrate that the standard is being met. Space is also provided to record actions to be taken forward and/or to note additional evidence.

Standards for Working with SLT Support Practitioners

1. Clinical Effectiveness / Evidence Based Practice

1.1 SLT support practitioners adhere to local, departmental and organisational policies

achieved / not achieved / working towards

- SLT support practitioners are aware of local, departmental and organisation policies and have indicated that they have read and understood them
- A copy of the current RCSLT Code of Ethics and Professional Conduct is available in the department and followed as appropriate by SLT support practitioners

Evidence/actions:

1.2 SLT support practitioners are encouraged to function as full members of the team with opportunities to input into the planning and formulating of policies that affect service delivery

achieved / not achieved / working towards

- Involvement may occur for example through staff meetings, membership of working groups, individual responsibilities

Evidence/actions:

1.3 There are agreed mechanisms in place with other agencies to support staff working in non-NHS settings

achieved / not achieved / working towards

- For example, this might include NHS-employed SLT support practitioners working in education or social services settings
- Mechanisms might include –
 - Service Level Agreements
 - Induction for support practitioners in non-NHS settings
 - Supervision

Evidence/actions:

1.4 A state-registered speech and language therapist holds professional responsibility for the clinical services provided by SLT support practitioners

achieved / not achieved / working towards

- ❑ Staff are familiar with RCSLT's guidance in the code of ethics
- ❑ There is a specific service policy in place concerning working with and supervising assistants and support staff
- ❑ The therapist's and other's responsibilities are clearly identified
- ❑ A named therapist with responsibility for each support practitioner is identified, who is suitably qualified and experienced (it is not recommended that a newly qualified therapist or returner is given sole responsibility for an SLT support practitioner)
- ❑ The role of speech and language therapists as supervisors, assessors, and trainers of support practitioners is reflected in job descriptions

Evidence/actions:

1.5 The amount and type of supervision and clinical advice required is based on the recorded knowledge and competence of the SLT support practitioner, the needs of the client, the service setting and the tasks assigned

achieved / not achieved / working towards

- ❑ All therapists working with support practitioners have clear expectations about the roles and responsibilities of individual assistants and bilingual co-workers within the service
- ❑ Training is provided to ensure competency in carrying out tasks
- ❑ Following initial in-service training, a written summary of the SLT support practitioner's skills, knowledge and competence is circulated to the therapists in the team (this will be updated as part of the IPR process and may include suggestions for the support practitioner's continued development)

Evidence/actions:

1.6 There is a system for SLT support practitioners to access supervision and clinical advice from a speech and language therapist

achieved / not achieved / working towards

- ❑ The supervising therapist is responsible for designing a supervision system that protects client care and maintains the highest possible standards of care
- ❑ Regular supervision time is agreed between the therapist and SLT support practitioner, and a record is made of this time
- ❑ SLT support practitioners are able to access support as required
- ❑ The support practitioner shares responsibility for raising issues in supervision and may initiate or request additional material
- ❑ If for any reason an SLT support practitioner's designated supervisor is not able to provide the agreed level of supervision (e.g. maternity leave, long-term sickness), another state-registered speech and language therapist is assigned to supervise as soon as possible
- ❑ When the supervising therapist is absent from a setting where the SLT support practitioner is working, there is an identified contact in case of query or emergency

Evidence/actions:

1.7 The SLT support practitioner only provides services which are within his/her delegated responsibilities and competence

achieved / not achieved / working towards

- ❑ The SLT support practitioner's delegated responsibilities and level of competence are agreed by the therapist and support practitioner, and documented

Evidence/actions:

1.8 The work programme carried out by the SLT support practitioner is in line with the therapist's assessment and management plan, and is documented in the client's record

achieved / not achieved / working towards

Evidence/actions:

1.9 Intervention plans are modified and updated in consultation with the speech and language therapist

achieved / not achieved / working towards

- ❑ The SLT support practitioner takes responsibility for reporting to the therapist any changes in the client's response to the programme

Evidence/actions:

1.10 SLT support practitioners function as part of the multidisciplinary team where it is recognised good practice

achieved / not achieved / working towards

- ❑ The boundaries of the role of the SLT support practitioner in a multidisciplinary team are agreed and documented with all the stakeholders
- ❑ The SLT support practitioner can only be delegated tasks by staff from other professions where there is provision for this in department policies and procedures, and in the postholder's job description
- ❑ The SLT support practitioner's contribution to the multidisciplinary therapy goals is clear
- ❑ Appropriate induction and training are given for working in a multidisciplinary setting, including awareness of NHS and non-NHS policies, and procedures relating to off-site working

Evidence/actions:

1.11 The recruitment of bilingual co-workers is targeted to meet the needs of local community

achieved / not achieved / working towards

- ❑ Bilingual co-workers are members of the local community and reflect its demography
- ❑ Bilingual co-workers assist in the development of appropriate and acceptable materials and service delivery
- ❑ Support mechanisms are in place to ensure that the co-worker can feedback on all aspects of his/her work to the supervising therapist
- ❑ Both the speech and language therapist and co-worker are trained to ensure effective three-way communication between the client/carers and therapist
- ❑ Speech and language therapists working with bilingual personnel have received appropriate training

Evidence/actions:

2. Risk Management

2.1 There is an up-to-date organisational chart and service profile which includes SLT support practitioners

achieved / not achieved / working towards

- Organisational chart clearly shows lines of accountability within the organisation
- SLT support practitioners are clear about their lines of accountability
- Lines of accountability are clearly defined for support practitioners working outside of the SLT department (e.g. in schools)

2.2 SLT support practitioners comply with, and are aware of their duty of confidentiality and its implications

achieved / not achieved / working towards

- There is a clear local policy on the confidentiality, use, security and disclosure of health information
- There is guidance for staff

Evidence/actions:

2.3 The requirements of all relevant legislation pertaining to children and child protection are understood and complied with by all SLT support practitioners with responsibility for children.

achieved / not achieved / working towards

- There is a clear child protection policy and procedure known to and understood by SLT support practitioners with responsibility for children
- There is evidence of a system of police-checking of all SLT support practitioners with responsibility for children
- All SLT support practitioners working with children should receive training in child protection procedures on a regular basis as part of the departmental training requirement in this area

- ❑ SLT support practitioners working within other agencies are aware of procedures for child protection and are clear about their responsibility and lines of action.

Evidence/actions:

2.4 The regular monitoring of staff workloads includes those of SLT support practitioners

achieved / not achieved / working towards

The mechanism for monitoring might include –

- ❑ Sickness / absence review
- ❑ Use of occupational health / counselling services
- ❑ Inclusion in IPR process
- ❑ Supervision

Evidence/actions:

2.5 All SLT support practitioners have an up-to-date job description

achieved / not achieved / working towards

- ❑ Reviewed, signed and dated regularly (at least once per year) as part of the IPR process
- ❑ Job descriptions are kept in personal files
- ❑ Staff are familiar with the content

Evidence/actions:

2.8 SLT support practitioners maintain and contribute accurately to the client record

achieved / not achieved / working towards

- ❑ SLT support practitioners are appropriately trained in record keeping procedures and standards
- ❑ SLT support practitioners adhere to the department's record keeping procedures
- ❑ SLT support practitioners are aware of the boundaries of their role in reporting and recording activities

Evidence/actions:

2.9 SLT support practitioners are aware of service and organisational policies relating to the health and safety of clients and staff, and have access to the appropriate mandatory training

achieved / not achieved / working towards

- ❑ SLT support practitioners have completed the appropriate mandatory health and safety training required to comply with local policies
- ❑ There is a named safety representative known to staff with clear lines of contact

Evidence/actions:

2.10 SLT support practitioners are aware of the policy for dealing with complaints

achieved / not achieved / working towards

- ❑ Frontline staff are trained in dealing with complaints and comply with local policies

Evidence/actions:

3. Professional User and Client / Carer Involvement

3.1 Clients are informed when they will be receiving care from an SLT support practitioner

achieved / not achieved / working towards

- The service has a clear policy relating to consent
- There is clear guidance for staff

Evidence/actions:

3.2 Discussions with the client/carer are recorded in the case notes by the SLT support practitioner

achieved / not achieved / working towards

Evidence/actions:

3.3 Where employed, bilingual co-workers have a key role within the service in offering relevant training on cultural and linguistic issues, and acting as an information resource for materials and cultural issues

achieved / not achieved / working towards

Evidence/actions:

4. Education and Lifelong Learning

4.1 There is a planned orientation, induction and support programme for newly employed SLT support practitioners

achieved / not achieved / working towards

- There is a policy in place relating to the induction of SLT support practitioners in relation to the service, employing organisation and the setting within which they are working
- The content may includes –
 - preparation for roles and responsibilities
 - familiarisation with policies and procedures
 - explanation re: emergency procedures
 - information re: health and safety, including risk
 - supervision / support mechanisms
 - flexibility around individual needs – including identification of personal development needs
- Records of the induction process are kept – signed by staff member, dated and reviewed

Evidence/actions:

4.2 There is a system of monitoring SLT support practitioner ability through performance review, appraisal and personal development planning

achieved / not achieved / working towards

- This process may include evaluation of –
 - compliance with job description
 - compliance with policies and procedures
 - interaction with clients and colleagues
 - accomplishment of pre-determined objectives
- The process includes discussion of personal development needs
- An annual personal development plan (PDP) is agreed which includes identification of competencies and agreement of responsibilities carried out by the SLT support practitioner (signed by the SLT support practitioner and therapist)

Evidence/actions:

4.3 There is a systematic approach to the training and development of SLT support practitioners

achieved / not achieved / working towards

- SLT support practitioners have a structured training programme to enable them to develop the ability to transfer skills to a variety of situations, and to be able to produce creative therapeutic responses to a range of disorders
- SLT support practitioners have access to continuing development opportunities (e.g. S/NVQ, BTEC, local in-service training programmes and other training relevant to the job)
- Information about educational / training opportunities is available to staff
- There is a system for the application for training
- Records are maintained for all training undertaken, and benefits are evaluated
- Opportunities and funds for training are equitably managed

Evidence/actions:

4.4 Where specialist skills are required by an SLT support practitioner, training is provided and updated

achieved / not achieved / working towards

- There is a system for reviewing the requirements of a post
- Where specialised training needs are identified, are they met?

Evidence/actions:

4.4 The service can demonstrate that SLT support practitioners keep clinically up-to-date

achieved / not achieved / working towards

- Participation in personal development planning and monitoring
- Membership of SIGs etc.
- Clinical supervision

Evidence/actions:

4.5 SLT support practitioners are involved in forums for the sharing of good practice

achieved / not achieved / working towards

- Peer review
- SIG membership, local groups, assistant support groups
- In larger services there maybe examples within the service
- Contributions to quality activities and clinical audit

Evidence/actions:

4.6 There is a system of training and support available to supervising therapists

achieved / not achieved / working towards

- Therapists with responsibility for SLT support practitioners will have received training in supervisory skills
- Newly qualified therapists are introduced to working with support practitioners as part of their induction
- Students are exposed to the work of assistants and bilingual co-workers when undergoing clinical placements wherever possible

Evidence/actions:

References:

Communicating Quality 2: Professional Standards for Speech & Language Therapists (RCSLT, 1996).

The Association of Speech & Language Therapy Managers, Supporting Speech & Language Therapy: Training Modules for Assistants (STASS Publications, 1996) [out of print].

The following documents can be downloaded (free of charge) by members from the RCSLT website [www.rcslt.org]:

Signed up to Quality (RCSLT, 2001) - RCSLT professional accreditation scheme standards.

Williamson, K (2001) *Model of Professional Practice*. RCSLT.

Williamson, K (2002) *Competencies Project: Support Practitioner Framework*. RCSLT.

Royal College of Speech & Language Therapists
2 White Hart Yard, London SE1 1NX
Tel: 020 7378 1200 / Fax: 020 7403 7254
E-mail: postmaster@rcslt.org / Website: www.rcslt.org