

Advanced Clinical Practice in Community Learning Disability Services

Natalie Hewitt
ACP / Speech and Language Therapist
@nataliehewittn1





About me

- BSC (Hons) Psychology and Speech Pathology
 - 13 years SLT Clinical experience in:
 - Adult Acute and Community Rehab
 - Children's (community clinics & schools)
 - Learning Disabilities –Forensic, Inpatient and Community Teams
- ILM Level 5 Diploma in Coaching Management
- Mary Seacole Programme (NHS Leadership Academy)
- MSc in Advanced Clinical Practice

Starting the journey

- 2018 - Flyer received from HEE & University of Chester to our NHS Trust advertising an opportunity for a 2 Year MSc ACP programme
- “Expressions of interest” in this opportunity submitted to senior management
- Formal interview & ‘Pitch’. As the role was new to Learning Disability Services we were encouraged to communicate a vision of how this role could have a positive impact on patient care and their journey through services. HEE (2017) multi-professional ACP framework was useful for this.
- University Interview & Induction attended:
 - Requirement for a Medical Supervisor to support and sign off development of clinical capabilities.
 - 1st Speech and Language Therapist to begin this course. In my interview, the course leader repeatedly emphasised the physical health assessment components to check I was on the right course!

HEE Funded MSc Training

- Physical Health Modules in 7 systems:
 - -MSK, ENT, Respiratory, Gastro-intestinal, Eyes, Cardio, Neurology
 - (mental health has been added in 2020)
- OSCES & Written Exams
- Taught sessions in Leadership, Research and Education
- Shadowing / experience essential
- Option of Research Module & Dissertation
- Or
- vs. Portfolio Module
- Independent Modules x 2 completed in Quality Improvement projects
- (to replace the 60 credit Non-medical prescribing module)



Challenges during my training

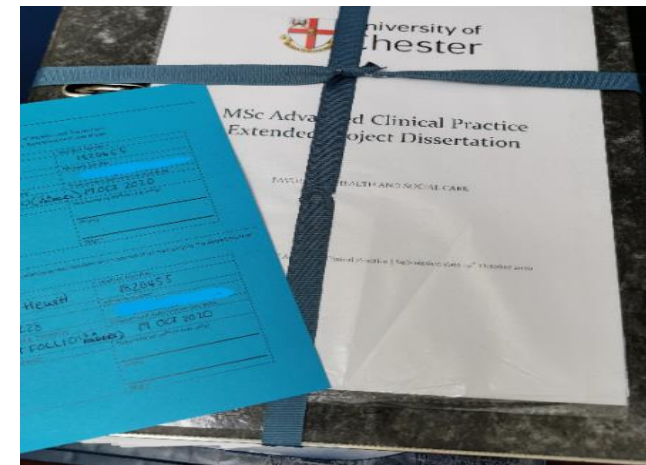
- Only SLT in cohort (and none previously). Most modules aimed at Nurses.
- First cohort to have student from Learning Disability or Mental Health Services
- LD & Autism Service ACP framework not available prior to starting
- 1st SLT ACP in LD Services – no support network for the first 2 years
- Course appeared to be aimed more at Primary Care services, however the University team were flexible and supportive to adapt the Portfolio
- No Mental Health or Neurodevelopmental Disorders Module

Challenges during my training

- “Dysphagia” only considered a symptom (not a condition) which forced me to broaden my learning of diagnosis, investigations and management of other health conditions
- SLTs unable to prescribe
- COVID-19 restrictions brought about problems with time management and with developing physical ‘hand-on’ examinations
- No Job description or Job plan before training - This was also a benefit, as it gave me a great deal of flexibility to help develop and apply my formal and experiential learning.

Benefits of the MSc programme route

- Portfolio route – demonstrates skills & pushed me to broaden my areas of learning.
- 4 pillars provide structure, balance and increase credibility
- Greater understanding of Research & Critiquing
- Greater understanding of minor ailments and serious physical health conditions = improved clinical assessment and/or health facilitation
- The ACP programme is now suitable for AHPs in generalist and specialist services
- Observed Structured Clinical Exams (OSCE's) and Exams are an excellent way of demonstrating learning activity. Also helps to feel equal ability to nurses in terms of acquiring new skills.



ACP brings quality improvements in Learning Disability Services

- More thorough initial assessments
- Opportunistic consultations & examinations (especially when a differential diagnosis is suspected)
- Referring patients directly to secondary care
- AHP involvement in research & education with CANDDID (Centre for Autism, Neurodevelopmental Disorders and Intellectual Disabilities) www.canddid.nhs.uk
- Neurodevelopmental Disorders (NDD) in Learning Disabilities - leading on developing evidence based NDD pathways
- Involvement in education and training
- Career progression for AHPs above band 7 - where they may have previously moved into Management
- Continuous development & role flexibility as evidence base and clinical pathways change
- Formal leadership role

Am I a SLT, ACP or both?



- There is still a lack of understanding of ACP because the multi-professional frameworks are very new.
- I hold advanced skills in communication and Dysphagia, so why wouldn't I continue to use these?
- As a AHP ACP I feel there is an increased credibility amongst Medics but confusion amongst Nurses.
- Assumptions around regulation – AHP ACPs are not regulated by the Nursing and Midwifery Council (NMC)
- No ACP uniform, so which uniform would I chose if required?
- Patients and carers who have been known to services struggle to understand the new role
- No other ACP in learning Disability Services to compare my role toyet!
- If I were to progress, would I work towards being a Consultant SLT or a Consultant ACP?

Exciting Opportunities

- Filming with HEE & Nice Tree Films
- Developing training with CANDDID
- Research in Avoidant/Restrictive Food Intake Disorder (ARFID) and developing pathways for assessment and treatment.
- Prescribing in the future?!
- My story presented as a 'case study' in the University of Chester Academic Portfolio
- Teaching on MSc with University of Chester
- Presenting with HEE to encourage more clinicians to work as a ACP in Learning Disability and Autism services



Time for questions

Natalie Hewitt
ACP / Speech and Language Therapist
26 January 2021
@nataliehewittn1

