



Which of the pre-registration eating, drinking and swallowing (EDS) competencies need to be face-to-face?

 = required face-to-face in the clinical setting

 = suggested face-to-face in the clinical setting

In developing these competencies, it is expected that learners will be exposed to all of the competency behaviours many times across their programmes. Specific practice-based experiences vary across services and time thus the requirement of what *must* be signed off in the clinical setting has been kept to a minimum to allow maximum flexibility for HEIs.

At the point of graduation, speech and language therapy entry learners will demonstrate competency in **at least 16 out of 20** of the following. They will be able to:

1. discuss the importance of EDS and the service user's goals with the service user/family/carer
2. apply health and safety procedures related to working with service users who are at risk of, or who present with, EDS difficulties
3. identify information required from case history and referral information that will guide the service user/family/carer interviews
4. obtain detailed background information from case notes, including cultural, social and psychological factors, relevant to EDS
5. carry out oral facial (sensory and motor) examinations on population without EDS difficulties
6. recognise the positive and negative impacts of modifying aspects of the EDS process
7. describe the indications for and against non-oral supplementation of nutrition and/or hydration
8. recognise the signs and symptoms of oropharyngeal and oesophageal dysphagia to inform diagnostic hypotheses
9. discuss service user/family/carer perspective when taking detailed case histories relevant to EDS
10. evaluate oral, facial, and swallowing functioning of service users at risk of EDS difficulties
11. formulate hypotheses and outline possible intervention options for discussion with the practice educator
12. apply knowledge of evidence-based rehabilitation and compensatory techniques to develop person-centred intervention plans
13. explain management programmes to service users/families/carers and relevant team members
14. use appropriate assessments to observe, record and evaluate EDS patterns, including trials of proposed intervention(s)
15. synthesise information on cultural, psychological, social, and biomechanical factors with assessment findings to formulate diagnoses
16. synthesise information on psychological, social, and biomechanical factors with assessment findings to develop person-centred intervention plans

17. identify specific person-centred outcomes to support review scheduling
18. identify specific person-centred outcomes to identify appropriate discharge points
19. discuss the ethical issues associated with EDS for service users/family/carers
20. identify situations associated with EDS issues that require the initiation of safeguarding discussions.