



End-point expectations for learners graduating with the pre-registration eating, drinking and swallowing competencies (2021)

Post-graduation, learners **entering in 2021** and completing their course while the competency framework is being implemented will expect to:

1. Complete a post basic course, with clinical experience hours and formal end point assessment *or* receive a formalised work-based training programme in EDS with a signing off point via a programme which is very specific to that workplace.
2. Go into the workplace carrying a portfolio-type document which sets out their personal profile in respect of competencies and what they expect to still experience and demonstrate / evidence competency.

They will expect that it is their own responsibility to set out for employers where they are uniquely profiled in respect of EDS competencies.

Post-graduation, learners **entering in 2022 onwards** and/or completing their course by AY 2025/2026 (depending on HEI implementation timeline) will expect to:

1. Be mentored in a Band 5 (or equivalent) post for EDS, aligned to mentoring in communication.
2. Go into the workplace carrying an audit-type document which demonstrates their competencies at the point of graduation. This will be their own unique profile in respect of EDS competencies which will be the starting point for the EDS mentoring. This profile should include the ability to:
 - a. discuss the importance of EDS and the service user's goals with the service user/family/carer
 - b. identify information required from case history and referral information, and obtain detailed background information from case notes relevant to EDS, including the service user/family/carer perspective
 - c. apply health and safety procedures related to EDS difficulties
 - d. use appropriate assessments to observe, record and evaluate EDS patterns, including trials of proposed intervention(s)
 - e. evaluate oral, facial, and swallowing functioning of service users at risk of EDS difficulty
 - f. recognise the signs and symptoms oropharyngeal and oesophageal dysphagia to inform diagnostic hypotheses
 - g. synthesise information on psychological, social, and biomechanical factors with assessment findings and apply knowledge of evidence-based rehabilitation and compensatory techniques to formulate diagnoses and develop person-centred intervention plans
 - h. explain management programmes to service users/family/carers and relevant team members

- i. identify specific person-centred outcomes to support review scheduling and identification of appropriate discharge points
- j. identify situations that require the initiation of safeguarding discussions

They will expect that employers will know where their baseline is, supplemented by their own unique profile in respect of EDS competencies.