

bulletin

THE OFFICIAL MAGAZINE OF THE ROYAL COLLEGE OF SPEECH & LANGUAGE THERAPISTS

June 2019 | www.rcslt.org



Voice groups supporting the trans community

Predicting speech problems in children with cleft palate

When two heads are better than one: collaborative working across the NHS and independent practice



25-26 September 2019

IMPROVING QUALITY IN SPEECH AND LANGUAGE THERAPY

EVERYONE'S BUSINESS

BOOK YOUR PLACE FOR THE RCSLT CONFERENCE 2019

Join us at the largest gathering of RCSLT members in the UK
for an unmissable two days of CPD and networking

This year's event will explore *Improving quality in speech and language therapy: Everyone's business* and will showcase the latest in research and service delivery innovations.

This two-day event will feature oral and poster presentations, workshops, parallel and plenary sessions and keynote speakers with topics covering a wide range of adult and

child specialisms. The popular 'brag and steal' presentations will be back, highlighting how research evidence is being applied in clinical practice.

Whether you work in research, are a clinical practitioner, or just starting out in your career as an SLT, the RCSLT Conference 2019 will include something for you!

CONFERENCE THEMES

- ✓ New evidence for quality clinical practice
- ✓ Approaches to improvement: Quality Improvement, Improvement Science and Implementation Science
- ✓ Co-production of clinical services and research
- ✓ Collaboration, integrated service delivery and the value-added of speech and language therapy
- ✓ Leadership across the profession at all levels (clinical leadership, academic/ clinical academic leadership, and management)
- ✓ Extended scope and advanced clinical practice: Responding to developments in the healthcare landscape

BOOK EARLY AND SAVE MONEY

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Non-member	£210 (£175 +VAT)	£298 (£248.33 +VAT)
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RCSLT member	£210 (£175 +VAT)	£298 (£248.33 +VAT)
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Delegate fees include refreshments, lunch and materials.

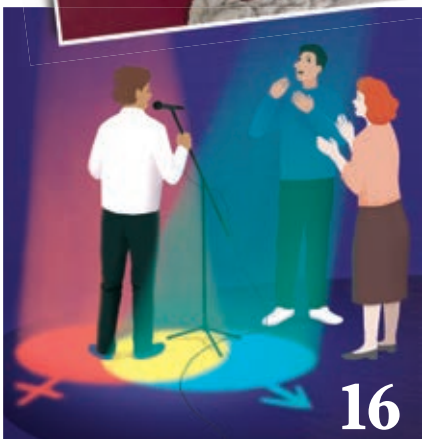
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#RCSLT2019

Contents

ISSUE 806



- 4 **Letters**
- 5 **News**
- 11 **Opinion by Yvonne Wren**
- 12 **Karen Massey and Helen Adkins** on the power of collaborative working
- 16 **Sean Pert** on trans and non-binary voice and communication groups
- 20 **Caroline Williams and Stephanie van Eeden** on predicting speech problems for children born with cleft lip/palate
- 24 **Research and Development Forum**
- 25 **In the Journals**
- 27 **Obituary**
- 29 **Clinical Excellence Networks**
- 30 **Your speech and language therapy job adverts**
- 33 **My working life:**
Becky Appleby



ROYAL COLLEGE OF SPEECH AND LANGUAGE THERAPISTS
 2 White Hart Yard, London SE1 1NX
 Tel: 020 7378 1200
 Email: bulletin@rcslt.org
 Website: www.rcslt.org
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COVER ILLUSTRATION
 Vicky Scott

President: Nick Hewer
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PUBLISHERS
 Redactive Publishing Ltd
 Level 5,
 78 Chamber Street,
 London E1 8BL
 020 7880 6200 www.redactive.co.uk

EDITORIAL
Editor: Victoria Briggs
Publications officer: Amelia Dale
Contributing editors: Amit Kulkarni,
 Lauren Longhurst, Katie Chadd
Art editor: Yvey Bailey

ADVERTISING
Recruitment sales:
 Tel: 020 7324 2755
 Email: rcsltjobs@redactive.co.uk
Display sales:
 Tel: 020 7880 7668
 Email: bulletin@redactive.co.uk



PUBLISHING DIRECTOR
 Joanna Marsh
PRODUCTION
 Aysha Miah-Edwards
PRINTING
 Buxton Press

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Victoria Briggs

EDITORIAL



Bulletin thrives on your letters and emails. Write to the editor, RCSLT, 2 White Hart Yard, London SE1 1NX. Email: bulletin@rcslt.org Please include your postal address and telephone number. Letters may be edited for publication (250 words maximum).



Plastic free

Back in December, we ran a letter from a member who'd written to us with a 'plea' for *Bulletin* to go plastic free. Many members have been in touch with us via email or social media in the months since then to say the same. It therefore gives us great pleasure to announce that, starting in July, *Bulletin* will no longer be mailed out to you in polywrap.

The environmental problem of plastic pollution can't have escaped anyone's attention in recent months, and here at the RCSLT we were determined to do our bit. The plan is to trial 'naked mailing' for a period of three months—that is, using an address label on the back page of the magazine, and no wrap whatsoever.

If the trial goes well, we'll opt for naked mailing as the magazine's default distribution method. And if we encounter any major issues in that time, then we've got the option of moving to a biodegradable potato starch wrapper instead, which can be composted. Either way, the plastic era is over for *Bulletin*. Good riddance to bad rubbish!

You can email info@rcslt.org with feedback on naked mailing, or anything else.

Victoria Briggs

editor

bulletin@rcslt.org

[@rcslt_bulletin](https://twitter.com/rcslt_bulletin)

Your RCSLT

CATHERINE DUNNET



I have been involved with the RCSLT throughout my career. Like most members, I started as an avid reader of *Bulletin* and attended RCSLT study days, progressing, over the years, to serving as the Scotland representative on the Management Board and the Membership and Communication Board.

Taking on the role of Scotland Trustee seemed like

a natural progression. The RCSLT's comprehensive induction, which included trustee responsibilities, governance, finance and strategic planning, helped to relieve any anxieties I had.

Working with highly experienced and motivated colleagues from across the profession, as well as attending meetings and events to represent Scotland, has been a privilege.

As I step down from the role, I would urge colleagues in Scotland to consider applying to take my place, for their own professional and personal development as well as the opportunity to shape the future of speech and language therapy through the work of RCSLT.

Catherine Dunnet, outgoing RCSLT country representative for Scotland

Email: catherine.dunnet@rcslt.org



Glasgow class of '69

Calling all SLTs who qualified from The Glasgow School of Speech Therapy in 1969. As 2019 is our 50th anniversary, we felt that this important milestone should be celebrated.

A group of us has arranged a reception and lunch at the Grand Central Hotel in Glasgow on **Tuesday 25 June 2019**, and hope that anyone who was in our year will be able to attend.

For further details and to confirm attendance please contact Jane Kerr (Stroyan) on any of the following:

Email: jnlskerr@aol.co.uk

Mobile: 07983 105226

Landline: 0141 570 0740

ATU network for SLTs

Following the shocking revelations in 2011 about the treatment of people with learning disabilities (LD) and challenging behaviour at the Winterbourne View care home, NHS England set up the Transforming Care Programme. The plan aimed to improve community services for people with LD and/or autism, thus reducing the need for inpatient assessment and treatment units (ATUs), under the heading 'homes not hospitals'.

Development of capable community services is on-going. A number of ATUs have closed across the country, while many have focused their eligibility criteria to only accept admissions of relatively 'local' patients. For some individuals with LD and complex behavioural, and/or mental health needs who are in crisis, a short, planned admission to a specialist inpatient unit may be a positive step to a more resilient long-term plan. Speech and language therapy is a crucial component of the multidisciplinary team approach to assessment and management of these complex individuals.

Following recent discussion on the ALD dysphagia network, a number of colleagues have expressed an interest in setting up a similar support and discussion network for SLTs working in ATUs. If you would like to be included in this network please email me at lesley.brown33@nhs.net and let me know where you work.

Lesley Brown, senior specialist SLT

FOLLOW THE RCSLT ON **facebook** AND **twitter**

VISIT: WWW.RCSLT.ORG AND FOLLOW THE LINKS





Deadline for RCSLT Honours awards nominations



'Easy EBP – resources to support you' webinar (1-1.45pm)



Minor grants deadline

Voice Box Cymru 2019

Congratulations to Leo Jones (pictured) from Llangors Church of Wales School in Powys, who was named as the winner of the inaugural Voice Box Wales joke competition.

The competition final took place at the Pierhead building at the National Assembly for Wales, where primary school age finalists from all across Wales assembled for the Voice Box Wales grand final.

This was the first time the RCSLT has held a dedicated Voice Box competition in Wales. The RCSLT Wales team was delighted to be joined at the final by the Deputy Presiding Officer, Ann Jones AM, who led the prize-giving duties, and Kirsty Williams AM, Wales' Minister for Education, who spoke about the importance of communication in the classroom. A number of other assembly members were also on hand to support the young finalists from their constituencies.

Leo's winning joke, below, was just one among several that filled the room with laughter:

'An inflatable boy went in to an inflatable

school with an inflatable headmaster, inflatable tables, inflatable chairs and inflatable teachers.

'One day the inflatable boy went running round the whole school with a drawing pin going phsst, phsst, phsst, phsst, and popping everything and everyone he could find.

'And then the inflatable headmaster called the inflatable boy to the office and the inflatable headmaster said, "I am very disappointed in you. You've let me down, you've let yourself down and you've let the whole school down."

The event was a powerful opportunity to celebrate children's progress, many of whom have received support for their speech, language and communication needs.

We wish to thank SLTs and SLTAs from



across Wales, particularly our Voice Box champions, for their support in promoting the competition. We hope this will now become an annual event, and plans are already underway for Voice Box Wales 2020!

Caroline Walters, RCSLT policy adviser (Wales)

Board of Trustees update



The RCSLT is pleased to announce that, as a result of the trustee election earlier in the year, Lesley Cavalli (pictured), the successful candidate, has been formally appointed to the Board of Trustees.

Lesley was a recipient of a 2018 RCSLT Honorary Fellowship, where she was recognised for her dedication in pioneering the speech and language therapy assessment

and management of the paediatric voice. She has published and presented widely in the area of voice and, having worked at University College London and City, University of London as a clinical tutor, possesses strong academic links.

Upcoming member ballot for Trustee elections

As a result of the vacant trustee roles advertised in April's *Bulletin*, it is likely there will be multiple candidates for the various positions, resulting in the need for another member ballot. In order to make the process easier for members, these elections will be run via an online voting system provided by election services provider UK Engage.

Expect to receive an email in your inbox in July with candidate details and a security code that will give you access to the voting portal.

Members wanting to opt to receive voting papers in hard copy should get in touch with the RCSLT enquiries team at info@rslt.org

New library journals added



Earlier in the year, we ran a series of trials for the inclusion of potential new journals in the RCSLT journals library. The trials showed

that, largely, we had the package right, but we've made some tweaks to include more of what members use, and less of what they don't. New additions include *The Journal of Palliative Care*, *The Journal of Nutrition, Health and Ageing*, and *The International Journal of Offender Therapy and Comparative Criminology*.

Visit the RCSLT website to read and download full-text articles from these journals, and hundreds more at bit.ly/2GEcsCa



@FeTaylor25

Honoured to have been asked to present at the Greater Manchester Health & Well-being Forum today about the importance of SALT input in Youth Justice. A great way to have raised awareness about the diversity of our role! #MySLTday

@1HannahHarvey

Lovely afternoon having giggles with @claireo776 @BCU_VoiceStudy and @GillianRudd turns even better with a total surprise from @SSpencerSALT – I'm so lucky to be around amazing women in SLT

SLTs among Shine a Light winners



Anna Biavati-Smith (pictured), an SLT from Edinburgh, has won the Katie Rough Memorial Award at the UK-wide 2019 Shine a Light Awards, for providing support to families of children and young people with selective mutism (SM).

Organised by learning company Pearson in partnership with The Communication Trust, the Shine a Light Awards celebrate innovative work and excellent practice in supporting children and young people's speech, language and communication development.

Anna, the owner of Word Steps Speech Therapy, was nominated for the award for her work with a service user with SM, as well as raising awareness of the condition in the UK and internationally.

Recognising that there was little public awareness of SM, Anna has developed materials for teachers, families and professionals (including a range of informative YouTube videos) and set up a Scottish SM group, which organises free evening sessions for families who travel from across Scotland to attend it, to share their experiences and learn key support strategies.

On receiving the award, Anna said: "I am delighted to have won... selective mutism is my passion as communication is vital for everyone, not only using words. Removing the pressure and believing in the children will help improve their self-esteem and take tiny steps towards communication. Sharing knowledge is fundamentally vital. We need to collaborate and create steps for these children."

Joanna McHugh, an NHS SLT from Coventry, received a commendation in the same category for her work with children with SM, while Stockport-based charity The Seashell Trust scooped the Augmentative and Alternative Communication of the Year Award for their work supporting children and young adults. Beccy Timbers, an SLT who works at the Seashell Trust, was also recognised for the innovative approaches she uses to promote positive communication outcomes for children with multi-sensory impairment.

The Shine a Light Awards were hosted by actress, television presenter and comedian Sally Phillips, and *Britain's Got Talent* winner Lee Ridley (known as Lost Voice Guy) performed at the ceremony. Award judges included RCSLT CEO Kamini Gadhok MBE.

For further information about the Shine a Light winners, visit www.shinealightawards.co.uk



Giving Voice Awards

Nominations are now open for the Giving Voice Awards, which aim to celebrate the impactful activities and achievements of Giving Voice campaigners, and to recognise those who have contributed to improving the lives of people with communication and/or swallowing needs.

The nominations are open to everyone, so if you or someone you know, work or study with has raised awareness of the speech and language therapy profession or the Giving Voice campaign in a notable way, then get nominating!

For more details and to submit your nomination, visit bit.ly/2Pcxlac

Nominations close at 9am on 1 July 2019.

RCSLT anniversary survey

On 6 January 2020, the RCSLT will mark its 75th anniversary. As we start making plans to celebrate all the ways the profession has been helping to transform lives since 1945, we are asking members to fill out a short survey on:

- What our key messages for 2020 should be
- What hashtags we should use on social media to raise awareness of the anniversary within the profession, as

well as for external audiences

- How you think we could mark the anniversary nationally and support members to mark it locally.

To take part in the survey, visit

bit.ly/2OSx0te

It should only take around 10 minutes to complete and is open until 6 July.

If you have any queries about the survey or the upcoming anniversary celebrations, email peter.just@rcslt.org

@bethkellySLT

#MySLTday Discussion with staff about our emotional connection with food and the impact this has on staff following dysphagia management plans. Risks / restrictions / mealtime enjoyment always a careful balancing act

@andrewryderSLT

My evening consists of writing an ADOS report and reviewing brand new language and communication resources for the BBC! #norestforthewicked #MySLTday



DELLA MONEY & KAMINI GADHOK

Leadership mentors workshop



The RCSLT's network of leadership mentors met for the first time at a recent workshop to reflect on the first year of the leadership mentors programme, and to help shape its future direction.

Leadership mentors have experience of providing leadership in a wide range of areas in the profession and support other RCSLT members with service issues such as building a business case, dealing with change, quality improvement and patient safety.

Chaired by Kamini Gadhok MBE, RCSLT CEO, the workshop began with an overview of the type of queries received by mentors, along with feedback from an evaluation of the programme to date.

Dr Amanda Smith (a member of the RCSLT's Finance and Resources Committee) led a session on the principles of mentoring, which include active listening, empathy, empowering mentees to 'work out solutions for themselves', and encouraging mentees to challenge their 'blind spots'. The group discussed the need for clarifying expectations for both leadership mentors and mentees so that everyone is clear on their responsibilities.

Leadership mentors Bryony Simpson and Catherine Dunnett led group sessions reflecting on aspects of the programme that have worked well and where improvements could be made. The group identified the need to have a clear triaging process to differentiate between mentees seeking longer term development and helping members who might be in crisis. Leadership mentors also looked at additional resources to be developed and ways they could provide peer support as part of a shared learning approach.

Rachel Middle, another leadership mentor, says she took on the role out of a desire to share her knowledge and develop her own mentorship skills.

"A leadership mentor is someone who feels able to use and share their own leadership experiences to guide others," says Rachel. "This can involve signposting people to relevant resources or sometimes just listening and asking the right questions to help people consider what might be the best solution to the issue they are experiencing."

If you need help from a mentor, visit bit.ly/2TZ95dM for more information.

Victoria Harris, RCSLT learning manager

WEBINAR WATCH

Since 2014, the RCSLT has been developing a range of webinars for both members and non-members on a variety of topics. A webinar is an interactive, web-based seminar that allows an audience to attend from remote locations, and to submit questions and comments before or during the presentation.

Recent webinar topics have included inclusive communication, supporting looked-after children, public health, and practice education. Our webinars are co-designed and delivered with both partner organisations and members and, over time, we have seen an increase in access and reach from across the UK, as well as internationally.

We try to host webinars over the lunchtime period (1-1.45pm) to enable better access, but if you don't have time to listen in live, you can find the recordings, presentations and any supporting documents on the RCSLT website and YouTube channel, where you can access them at a time that suits you best.

To illustrate, the webinar, 'DLD: what do the changes mean for your service delivery?' attracted 176 live participants, while almost 2,200 people have since watched the recording on YouTube.

The 'Making IDDSI work for you' webinar, produced jointly with IDDSI and NHS Improvement, had 167 live participants, and the recording was viewed more than 100 times in the first month after it was uploaded.

Our webinars' online chat facility enables participants to ask questions and, if these are not answered on the day, they are responded to after the event. We also use feedback from webinar evaluations to inform future topic areas, as well as the design and technical elements of delivery.

If you have not yet had an opportunity to listen to or actively engage in a webinar, we would encourage you to visit www.rcslt.org/webinars, where you can find all the webinars from 2017 to the present.

In addition, if you and your colleagues have an idea for a future webinar topic, please contact kaleigh.maietta@rcslt.org. We're always looking for topic ideas and presenters, so please do get in touch!

"We have seen an increase in access and reach"

Dr Della Money, RCSLT chair, and Kamini Gadhok MBE, RCSLT chief executive. Email: kamini.gadhok@rcslt.org

Website updates



Now that the RCSLT's new website is up and running, you may have noticed that CQ Live (Communicating Quality Live), as it was known, no longer exists. This is because, in addition to updating the content for that section, we have also taken the opportunity to rename it.

We now have four areas where you can

access the content that previously sat within CQ Live:

- Clinical guidance—where you'll find guidance, learning, evidence and influencing information around a range of clinical topics.
- Delivering quality services—for guidance around topics to support SLTs to deliver quality services.
- Professional accountability and autonomy—for guidance to help SLTs meet the Health and Care Professions Council's regulatory standards.
- Settings—for guidance, learning,

evidence and influencing information for SLTs working in different settings.

To navigate to these guidance pages, go to 'menu' first, then 'guidance'. You will need to be logged in to the website to see this content. If you have any difficulty logging in, please email info@rcslt.org or visit bit.ly/2Phr5hf for more information.

Funding boost to increase staffing

The community paediatric speech and language therapy department employed by West Suffolk Foundation Trust, covering east and west Suffolk, has been given an additional £1 million over the next two years from NHS Ipswich and East Suffolk and NHS West Suffolk clinical commissioning groups (CCGs), to permanently increase staffing.

The funding comes as a result of a steering group, set up in 2017 with various stakeholders, to highlight the significant gap between demand and capacity in the department. The group used evidence from the RCSLT and the *Bercow: Ten Years On* review, and had a dedicated project manager to support a business case to request the additional funding.

The funding will enable the service to:

- increase capacity to include staffing into special schools, community clinics, mainstream schools and pre-school children with complex needs;

- develop training for referrers from health and early years to understand the development of speech, language and communication needs (SLCN);
- develop early intervention care packages;
- reduce the length of waits to three months for therapy following assessment; and
- work with education colleagues to deliver training for schools to promote communication-friendly classrooms.

Additional funding from the county council will also provide Makaton training and a screening assessment tool for use in early years settings and primary schools.

"We are all very excited that our CCGs have recognised and made SLCN a high priority for this additional funding," said Peta Cook, paediatric SLT lead for community paediatric speech and language therapy, West Suffolk Foundation Trust.

Email: peta.cook@suffolkch.nhs.uk

DLD research priorities workshop



In March, a range of stakeholders came together to discuss research priorities for developmental language disorder (DLD), in the second of two workshops organised by the RCSLT. Working in small groups, participants discussed a range of topics including, early identification, assessment, intervention and long-term impact, while developing ideas around where future research should be focussed.

The outputs from the day will inform a prioritisation survey and ultimately a 'top 10' list of research priorities for DLD. For more information, including opportunities to get involved, visit bit.ly/2URU3dI or email lauren.longhurst@rcslt.org

Cookie policy

If you've visited the RCSLT website recently, you'll have noticed that we are now asking for your permission to use cookies (a cookie being a small text file that's stored on your computer so the website can recognise you and track your movements within the site). This follows a new law requiring visitors to give active consent for cookies to be used.

The RCSLT has begun to use essential cookies to enable the site to function properly, and non-essential cookies to anonymously count visitors and track user behaviour. We plan to use this information to help us improve the site. If you haven't done so already, please click to accept non-essential cookies the next time you visit our website. If a pop-up message about the cookies does not appear, click the grey triangle at the bottom of any website page in order to enable them.

To find out more about the RCSLT's cookie policy visit: www.rcslt.org/cookie-policy

up to
54%

of children with behaviour
problems have language
impairment

163

meetings held at RCSLT venue
hire spaces in 2018



**Derek
Munn**

COLUMN

BSLTRU anniversary lecture

The Bristol Speech and Language Therapy Research Unit (BSLTRU) at North Bristol Hospital Trust marked its 30th anniversary in March by hosting the Underwood Trust inaugural lecture.

At the event, the unit's dedication to improving speech and language therapy practice through high-impact, clinically-based research over the past three decades was celebrated by BSLTRU director Dr Yvonne Wren, who paid homage to past and present BSLTRU members, funders and collaborators.

Over the years, the BSLTRU has laid claim to a string of highly successful clinical-academic researchers, perhaps none more so than Emeritus Professor Pam Enderby, who provided an entertaining account of the BSLTRU's modest launch in 1987, and demonstrated its impressive growth since.

The event's keynote speaker was RCSLT research trustee Dr Rebecca Palmer (pictured), who said it was exposure to the BSLTRU team, and others like it, as well as the opportunities to form supportive relationships with researchers in the field, that led to her decision to undertake doctoral study. Rebecca's talk exemplified her research journey from doctoral student to the recent culmination of her large, multi-site, randomised controlled trial of computer therapy intervention for people with post-stroke aphasia (the Big CACTUS project).

As if the audience needed reminding of the BSLTRU's endless pot of talent, Emeritus Professor Sue Roulstone, Chair of the BSLTRU Steering Group and previous director, rounded up the event, giving kudos to Rebecca and fellow SLT researchers who work to advance the research-active and evidence-based foundation of the profession.

Watch the lecture at tinyurl.com/y54mww2g or find out more about the BSLTRU at tinyurl.com/y59co5xq. If you're interested in knowing more about clinical-academic careers in speech and language therapy, email katie.chadd@rcslt.org

Katie Chadd, RCSLT research support officer



ON COMMISSION

Across the nations of the UK, the four Children's Commissioners are valuable allies for us in making the case for the speech, language and communication needs of children and young people. For example, the Children's Commissioner for Wales is strongly concerned with transitions for 16- and 17-year olds in health settings, and we have been part of work she has convened as the Welsh Government develops guidance in this area.

In England, we've been working with the Office of the Children's Commissioner (CCO) since late 2017, to help them to understand how children's communication needs and speech and language therapy relate to the mission of the Children's Commissioner: to promote and protect the rights of children, especially the most vulnerable, and stand up for their views and interests.

We are pleased, therefore, that the Commissioner's *Vulnerability Report 2018* recognises children with speech and language difficulties as a vulnerable group in their own right for the first time.

Speech and language therapy was also highlighted in the Commissioner's recent report on gang violence, as the intervention most often raised in the course of their research. The report also sets out that she is using her data-gathering power to undertake a nationwide audit

of the provision of speech and language therapy, to understand how much is commissioned by who, and the extent to which it varies across England. We have worked with the CCO and RCSLT members to help formulate the questions used in the audit. The report will be published later this year.

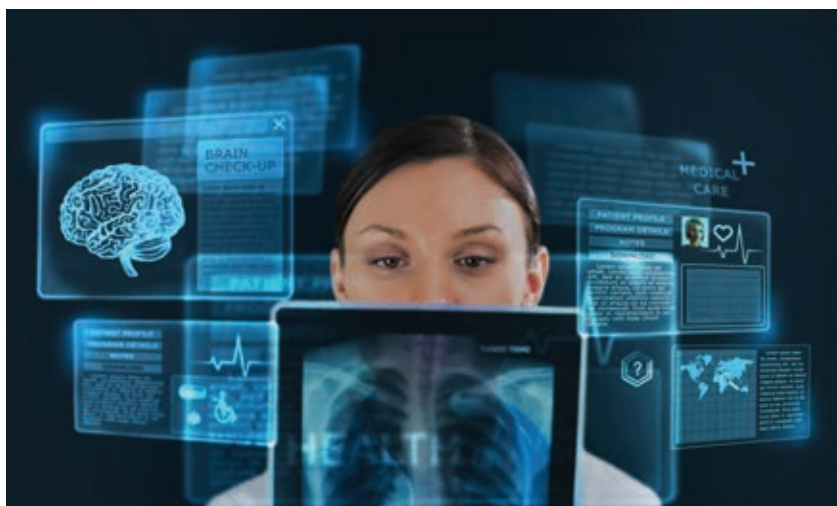
We've also supported the CCO with an upcoming report examining the experiences of children with autism and learning disabilities in inpatient mental health settings—members provided expert advice on how to consult with these young people, including adapting materials for communication needs.

The Commissioner's engagement with children's language has been strong—we'll be watching for developments.

“...the report recognises children with speech and language difficulties as a vulnerable group in their own right for the first time”

Derek Munn, RCSLT director of policy and public affairs. Email derek.munn@rcslt.org

A digital framework for AHPs



A new publication by NHS England, *A Digital Framework for Allied Health Professionals*, has been launched to support allied health professionals (AHPs) to become 'digitally ready', 'digitally mature' and 'data enabled' for the benefit of service users and the wider health and care system. The publication provides a structured approach to the digitisation of AHP services and is aimed at clinicians, managers of AHP services and healthcare leaders.

Supporting AHPs to utilise information and technology is one of the four priority areas set out in the national framework *AHPs into Action*. The new publication follows other NHS England and Health Education England initiatives, like the *NHS Long Term Plan*, which highlight the role of information and technology in improving health, care and well-being.

Projects and resources

The RCSLT is leading on a number of projects to support the speech and language therapy profession in these areas, such as work on developing the clinical terms available to SLTs in SNOMED. Furthermore, the phased roll-out of the RCSLT Online Outcome Tool is aligned with the ambition outlined in the framework relating to

the use of data to drive quality improvement, evaluate the impact of interventions, and understand variation in care and outcomes.

On the RCSLT website, you can find resources and guidance relevant to digital health and care, including technology, telehealth, information governance and apps. There is also a learning journey on eHealth for members, which acts as an introduction to apps, telehealth, social media and information governance, and their application and relevance to speech and language therapy (see: www.rcsltcpd.org.uk).

The RCSLT is currently involved in a number of UK-wide initiatives related to digital, data and technology, including the development of national standards for the structure and content of health and care records. If you are interested in getting involved with any of the RCSLT's work related to digital health and care, please let us know by emailing info@rcslt.org

For more information about *A Digital Framework for Allied Health Professionals*, visit bit.ly/2Ho2S5s

Kathryn Moyse, RCSLT outcomes and informatics manager
Victoria Harris, RCSLT learning manager

'Easy EBP' webinar

Join our 'Easy EBP—resources to support you' webinar at 1-1.45pm on 17 June for an introduction to the evidence-based practice model and a comprehensive overview of RCSLT resources that can support members in taking this approach to practice. Featuring Dr Hazel Roddam, researcher in allied health at the University of Lancashire, the webinar will cover why the EBP model is important to SLTs and a discussion about resources.

📍 To register for a webinar place, visit tinyurl.com/y5n6nutt

SLTA study day

A study day for SLTAs is to be held on 9 July at Manchester Metropolitan University (MMU), hosted by Twinkleboost Community Interest Company, MMU's speech and language therapy department, and the RCSLT.

'Innovative Approaches and Developments for Speech and Language Therapy Assistants' will share new innovations, approaches and resources, and provide a chance for SLTAs to reflect and plan for the year ahead.

📍 For more information and to book a ticket, visit: bit.ly/2UU9Mcr

Draft guidance

The RCSLT is working with the British Association of Teachers of the Deaf (BATOD) to develop guidance for collaborative working between SLTs and teachers of the deaf. The draft guidance will be open for consultation from 10-28 June. For further details, email lorna.baxter@rcslt.org

We're also updating our dysphagia clinical topic guidance and resources. If you'd like to be involved in reviewing the draft update, email louise.borjes@rcslt.org

For the latest on our end-of-life care guidance, visit the project page at: bit.ly/2ZwDble

For those interested in our apprenticeships work, visit: bit.ly/2DsGbMr

Parkinson's singing group

SLTs are invited to attend a King's College Hospital event in London on 26 June organised by Sing to Beat Parkinson's (STBP), a network of singing groups for people with Parkinson's (PWP). STBP works with PWP and uses singing as an intervention. The event is an opportunity for SLTs to learn more about STBP's work and ethos.

📍 To reserve a place, email Nicola Wydenbach on nicolawydenbach@yahoo.co.uk



**Yvonne
Wren**

Opinion

Yvonne Wren discusses the impact that gender imbalance in speech and language therapy and other caring professions has for equality and women in general

On an equal footing

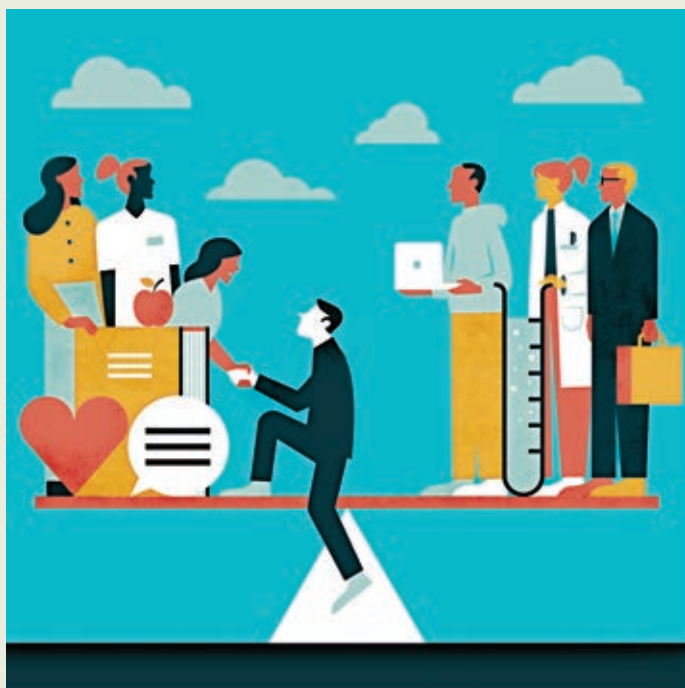


ILLUSTRATION BY Sara Gelfgren

The percentage of practising UK SLTs who are male was published in the January issue of *Bulletin*. Standing at just 2.9%, the figure is shockingly low, and messages that followed on social media expressed responses ranging from dismay to disgust. Certainly no-one wants to see such unequal representation in the profession.

However, in common with other female-dominated professions, there is a disproportionate number of men in leadership positions within

speech and language therapy (as discussed recently by Rogus-Pulia, Humbert, Kolehmainen and Carnes, 2018). Although many attempts have been made to attract more men to the profession, clearly we are yet to find a strategy that works. We also need to reflect on the reasons why previous attempts have been unsuccessful and consider whether this is an issue that is much bigger than our profession alone.

Let's start with the 'glass ceiling'—a term so often used to describe the barrier to women

achieving in a patriarchal society. The implication is about getting to the top. The traditionally male-dominated professions tend to be those that come with power, influence and money: not things commonly associated with the caring professions. So what is the alternative for men who are successful in female-dominated professions? Is there a 'glass floor' they need to break through? That's hardly an inspiring or attractive option for any SLT.

We also need to consider how realistic a 50/50 gender split might be for some professions. In law, medicine, finance and business, women are strongly represented with increasing numbers at higher levels. Without doubt, there is also an increasing number of women studying STEM (science, technology, engineering and mathematics) subjects in higher education, but do we anticipate that some areas might always appeal to boys more than girls? The stereotypical 'computer geek' is a young man who prefers to work with screens and numbers rather than words and people. Of course, this is not true of all computer scientists, but as a group, is there something about the nature of the work that is going to attract more male interest? Likewise, are the caring professions, particularly those with a focus on communication, always going to appeal more to women?

“Female-dominated professions remain low status and low profile”

Whatever the reasons, we need to think about the impact. I am thrilled that women's football is now receiving media attention.

But what about netball, traditionally a female sport? Is anyone making a fuss about the lack of male involvement? Is anyone even aware that there's a fledgling men's netball game?

The reality is that female-dominated professions remain largely low status and low profile in society as a whole. They are not valued in the same way as those professions which were once, and to some extent still are, male-dominated. How much have we really achieved as women if the traditional areas where we have excelled consistently remain undervalued? More than two decades after Pam Enderby and a group of SLTs won their famous 'equal pay' case, how much has equality in the profession really advanced in terms of status and recognition in wider society?

To celebrate the achievements of women in general, we must recognise their value and contribution in all areas, not just those where we are seen as achieving in traditionally male roles or work. What we need now is a campaign to fight for the recognition and celebration of those work environments where women have always succeeded. If, through that, we can achieve a stronger profile and influence in society, then we might achieve our goal of making speech and language therapy, and other careers typically dominated by women, an attractive career option for men as well. ■

Yvonne Wren, director of research, Bristol Speech and Language Therapy Research Unit. Email:

yvonne.wren@bristol.ac.uk

@yvonne_wren



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When two heads are better than one

Karen Massey and Helen Adkins discuss ways of working collaboratively to support a child's communication skills

ILLUSTRATION BY Vicky Scott

The face of speech and language therapy has changed in recent years. Cuts to NHS funding mean that more and more therapists are working differently. Some work full-time in independent practice (IP), with others choosing to work across both NHS and IP sectors. Since 2010, there has been a year-on-year increase in the membership of the Association of SLTs in Independent Practice (ASLTIP), with 1,347 members at the time of writing.

The Health and Care Professions Council Standards (2016) state that when working in collaboration, therapists should:

- cooperate and collaborate with colleagues in all aspects of service users' and carers' management, within and across settings, sectors and professions in the best interests of service users;
- share information, knowledge and skills for the benefit of the service user;
- respect colleagues' perspectives and contribution; and
- work in partnerships with other services, putting the service user's interests first.

University courses are also responding to the increasing number of therapists venturing into IP. Having enquired into how IP features in UK undergraduate courses, one response, from the University of Reading, reported a year-on-year increase in students accessing placements

in IP. The university currently accesses clinical placements from eight different independent service providers and reports that students will likely experience at least one independent placement out of the eight. It also reports that IP is continually referred to throughout the course when discussing placement providers.

A typical experience

We are an NHS and an IP SLT who currently work together to support a child (Billy, not his real name) with Down syndrome who attends a mainstream school. As SLTs, we communicate frequently, share responsibility for targets and therapy, and have seen Billy benefit as a result. We wanted to find out if our experience was typical →

“We share the same targets and feel this unified approach makes it easier for school and home to follow the plan”



or whether there were any obstacles to partnership working. After developing our own partnership working over the past four years, we decided to share our experience. We consulted seven NHS and nine ASLTIP colleagues, asking for their opinions on three key areas: communication, targets and quality. We also consulted Billy's parents and school to hear their views. The following observations reflect our experiences and those of our colleagues.

Q What lines of communication do you have with NHS/independent SLTs and how regularly do you liaise? What potential communication barriers are there?

Responses confirmed our belief that communication is the key to success. After gaining consent, 13 of the SLTs we consulted confirmed that they contact each other by phone or email. Frequency varies from our practice of communicating following each visit, to communication at the start and end of blocks of therapy. Joint sessions are rare (occurring in only one case) but are seen as very valuable. One therapist uses parents as a go-between.

Communication covers both assessment and management plans. It helps to build a better picture of what is happening for the child. Six therapists experience resistance and do not automatically experience shared communication. Occasionally, communication does not take place because therapists are unaware of any other involvement. Interestingly, there were no ascertainable differences in response dependent on role: NHS and IP therapists responded in a very similar way. Everyone agreed that communication sharing was important.

Q Do you share and work from the same targets or have separate ones?

We share the same targets and feel this unified approach makes things easier for school and home to follow the plan. Six of the SLTs we asked decide to take a focus each; e.g. one works on fluency while another works on speech or oral motor. Six divide language and speech. Ten therapists find that they might share the same targets but work in different ways, often with the NHS therapist providing more of an advisory role and the independent SLT working more directly with the child. One respondent shared a concern that working on the same targets might lead to mixed messages about the child's therapy needs. Communication really is key in getting this to work.

Q Do you feel that if there are two SLTs involved for a child, it means a better level of service for a child, or does it depend on the above?

This is an area that therapists found harder to gauge. In our case, the overall quality of therapy is enhanced by both therapists reinforcing the same messages and bringing different skills to the table. Five SLTs feel that where an independent therapist is involved the child benefits from increased frequency of input, often 'topping up' the therapy that the NHS SLT is able to provide. The outcome is better if the therapists work together and respect each other's roles.

Q What would be your main reason/s for involving private SLTs alongside NHS ones?

The reason why we are both involved is because Billy's parents wanted to gain more frequent, direct input for Billy and also more guidance for the school staff. Constraints to NHS resources meant parents felt the level of support needed to be supplemented. In this way, they describe achieving, "a level of support that works for our child".

Q Does it seem like a 'joined-up' approach from your perspective?

Do you ever feel you are not working on the same things or are confusing either yourselves or school staff?

Reassuringly, Billy's parents feel they receive a "highly joined-up approach" and have been happy to continue in this way for a number of years. Of particular importance is the communication channel: "You keep each other, parents and school apprised of what you are each doing, and work collaboratively to provide a similar approach and tasks for (him), together with one SLT report for annual review. It feels like we are all moving in the same direction with the same goals and methods, and it is not at all confusing."

The special educational needs coordinator and teaching assistant we work with report how useful it is when two SLTs, with their own set of ideas/areas of expertise, both contribute to Billy's development and that it is crucial that we both communicate about our areas of focus.

Tips for joint working

With the increase in independent practitioners set to continue, joint working is sure to become more of a part of what we all do. Here are our 'top tips' for making it as effective (and enjoyable) as possible:

- Approach it as an opportunity for learning/professional development. For independent practitioners working in isolation, 'colleagues' may be few and far between. Make the most of having someone to 'pick the brains of', bounce ideas off and generally learn from and share ideas with.
- Respect different interaction styles and ways of doing things.
- Make liaison a priority; an integral part of managing the case.
- We know it's a cliché, but don't reinvent the wheel. We share targets and reports. Keeping a record of email communications we use to feedback makes this easy to do. ■

.....
Karen Massey, highly specialist SLT, Pennine Care NHS Foundation Trust; Helen Adkins, independent SLT for children, Stockport.
Email: kmassey1@nhs.net and helenc.adkins@sky.com



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ASLTIP: beta.helpwithtalking.com
RCSLT guidance on collaborative working: bit.ly/2lACNmb
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FOODS

Talking loud and clear

Sean Pert shares a community initiative to set up trans and non-binary voice and communication groups involving student SLTs

ILLUSTRATION BY Daria Skrybchenko

While attending a discussion event at Manchester Pride in 2015, I was astonished to hear that Manchester had no integrated care pathway for trans individuals. The city, while famous for its diversity and Gay Village, had no one-stop location for trans people to seek support.

Paul Martin, OBE, Chief Executive of the Lesbian, Gay, Bisexual and Trans (LGBT) Foundation, a charity in central Manchester, explained that trans people often had to travel to different cities to access gender identity clinics (GICs), and even then, waiting lists were long and services frequently limited. Paul commented that service users had highlighted speech and language therapy as particularly challenging to access, while SLTs often reported feeling that they did not have the skills to work with trans individuals. I introduced myself and asked how I and my students at the University of Manchester might help on a voluntary basis.

Trans people are a minority group facing severe discrimination. Even within the relatively accepting 'gay scene', trans people and their needs have been poorly understood.

Almost half of trans people under 26 reported that they had attempted suicide (McNeil et al. 2012). Discrimination and violence towards trans people is common and on the increase, almost trebling between 2011-2015 (Yeung, 2016), although '...trans hate crime ranks alongside disability hate as the most underreported' (Broadstock, 2015: 8).

The LGBT Foundation recently changed its name to reflect the need to be inclusive and provide support to the trans community. Taking a lead from trans people themselves is vital to ensure that services are developed and shaped according to their needs. It was this community-led ethos that has helped to develop a dynamic trans programme in Manchester.

Trans programme coordinators at the LGBT Foundation Zane Robinson and Louie Stafford were quick to recognise the value of speech and language therapy. The team provided participants with training, excellent workshop facilities and application process support for the voice and communication sessions.

Gender dysphoria

Trans people do not consider themselves to be suffering any kind of mental illness

and often reject the medical model. This will be familiar to lesbian, gay and bisexual people, whose behaviour was once considered a mental illness, until it was removed from the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders* in 1973. However, it is widely recognised that gender dysphoria—when a person's physical presentation does not match their gender—causes great distress. The voice is often closely aligned with the sense of self, and so a voice that does not match one's gender can greatly contribute to the negative feelings associated with gender dysphoria. With this in mind, the team wanted to develop and deliver a group model rather than the traditional one-to-one model. We saw this as having the following key benefits:

- Trans individuals could support each other to change and monitor their communication.
- The workshops could also provide social support, allowing trans people to meet each other in a relaxed environment.
- There would be no need to 'pick a gender' and conform to traditional gender roles in workshops. Some trans individuals





do not identify with any gender, while others wish to change the gender they project at different times. Some individuals may not wish to change their sex through surgery or other medical treatments but do wish to project their preferred gender. This is reflected in the Trans and Gender-Diverse Voice & Communication Therapy Competency Framework (RCSLT, 2019).

It is important to consider that while many trans individuals may benefit from speech and language therapy, they do not have communication impairment. However, we were aware that trans individuals found access to speech and language therapy so difficult that they often turned to the internet and unqualified individuals for advice. This meant that people might follow potentially harmful practices, which could result in vocal abuse. It was therefore our first aim to promote vocal hygiene and highlight safe voice change.

Workshops

I developed an introductory voice and communication workshop series consisting of four 90-minute workshops. This proved highly popular and led to a second intensive voice and communication workshop, where trans clients received individual

“A voice that does not match one’s gender can contribute to the negative feelings associated with gender dysphoria”



Louie Stafford and Sean Pert were awarded the Sternberg Award for Clinical Innovation at the 2017 RCSLT Awards.

assessment and intervention. We involved undergraduate student SLTs from the University of Manchester as volunteers, who were provided with:

- trans awareness training by the LGBT Foundation trans team—this included information on trans people and how to successfully engage with clients by using client-centred language and avoiding misgendering or making errors in personal pronoun usage; and
- voice and communication training and workshops from me—this ensured the students understood the advice given and the activities that were to be provided, and crucially, were able to demonstrate them to the clients.

The activities provided were practised as a group. This combination of mindfulness, vocal coaching and speech and language therapy voice therapy techniques was clinically supervised by Matthew Mills, consultant SLT (voice and communication) at the GIC in London, who also provided vital and enthusiastic clinical supervision and advice (see Mills and Stoneham, 2017).

The groups attracted between 12 and 35 attendees for the introductory course and we offered 12 clients, who previously completed the introductory course, places on the intensive course.

I was delighted to work with an enthusiastic and motivated client group, in a safe space where peer support is the

norm. Students have been welcomed by the clients, and I am constantly impressed by the honesty of the trans clients in their conversations with students. The trans community values speech and language therapy highly and many clients hope that this experience will help students to become confident working with trans people. We are fortunate to have worked with trans women, trans men and non-binary clients. In February this year, we welcomed our 100th client and have been joined by student volunteers from the University of Sheffield and Manchester Metropolitan University, and several local SLTs specialising in voice, who wished to gain more experience with this client group.

Feedback from both the clients and the student volunteers was positive, with both groups developing skills and confidence through the experience.

Clients valued vocal hygiene advice and practical exercises on the various aspects of voice and communication, including breath support, pitch change, articulation and language use. Their comments showed that the group model was acceptable and that they enjoyed working with the student volunteers.

Half of the students had not met a trans person previously. All reported that they felt more skilled working with trans people as a result of the groups and all would recommend volunteering to their peers.

Positive outcomes

We continue to run three groups a year in partnership with the LGBT Foundation, including a ‘taster session’ at the Sparkle weekend (Sparkle is the national charity for trans people). A former group member has started a monthly peer support group that we provide with supervision, advice and support, as requested by the group. We also deliver a weekend intensive course for trans people who find it difficult to access groups during the working week.

Our films of trans and non-binary people demonstrating voice and communication techniques feature on the LGBT Foundation website. We hope that these will serve as reminders for former group attendees, and also reach trans people who are considering voice and communication change but who may feel isolated from services.

By collaborating, the LGBT Foundation and the University of Manchester have been able to provide positive mutual learning opportunities for trans people and students alike.

The team was delighted when our work was recognised at the 2017 RCSLT Awards, where we received the Sternberg Award for Clinical Innovation. In addition, the University of Manchester awarded us the Making a Difference Award for Social Responsibility: Outstanding Contribution to Equality and Diversity (2017) and Staff Volunteer of the Year (2018). ■

Dr Sean Pert, senior clinical lecturer, University of Manchester; Louie Stafford, former trans programme coordinator, LGBT Foundation

**E-mail: sean.pert@manchester.ac.uk
Twitter: @SeanPert Instagram: @seanpert**



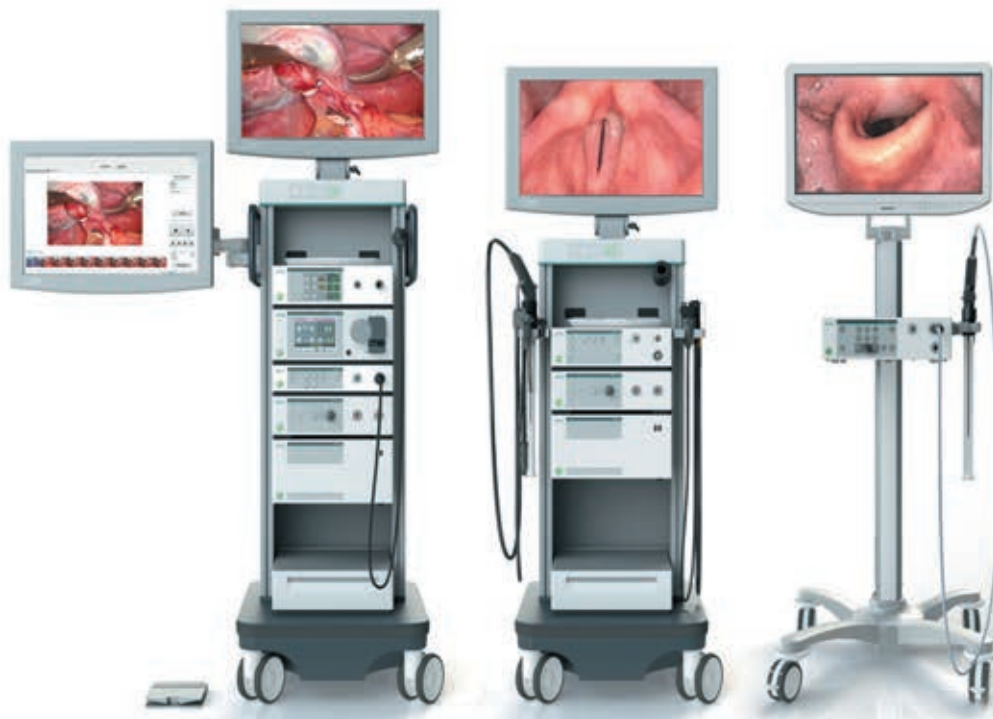
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Predicting the risk of speech problems

Caroline Williams and Stephanie van Eeden evaluate the 12-month speech and language visit for children born with a cleft palate

ILLUSTRATION BY Jennifer Leem-Bruggen

More than 1,000 babies are born annually in the UK with cleft lip and/or palate (Cleft Registry and Audit Network, 2017). Families receive input from multidisciplinary teams (MDTs) and will see a specialist SLT for advice on speech and language development before palate repair.

A pilot study conducted by the Northern and Yorkshire Regional Cleft Lip and Palate Service (De Lange et al, 2013) found parents who received a visit from a specialist SLT when their child was 12 months old, rather than a consultation in an MDT clinic, were more likely to retain information about their child's speech and language development (80% versus 40%). These findings resulted in modification of the care pathway for children born with a cleft palate in Newcastle to include this visit as a routine assessment point. We have been evaluating the 12-month visits since their introduction, in terms of our ability to accurately inform parents of the risk of later speech problems, regarding both velopharyngeal function and articulation.

Background

There is little evidence surrounding the best way to predict speech outcomes at an early age for children born with a cleft palate. Previous studies investigating early speech predictors did not reach conclusions sufficient to widely influence practice (Lieberman and Lohmander, 2014; Klinto et al, 2014; Hattee et al, 2001).

Assessment of babbling has been described as a robust factor when predicting outcomes. Lieberman and Lohmander (2014) concluded that the frequency and type of consonants in babbling are significant for later speech and language skills. Significant correlations between high numbers of high-pressure oral stop consonants, such as /b/ and /d/, at early ages with correct articulation at 21 months and three years of age were reported. Predictions specifically related to palatal function have not been explored with young children. Useful indicators for good palatal function, such as the use of oral high-pressure consonants and the absence of airflow errors, are noted clinically.

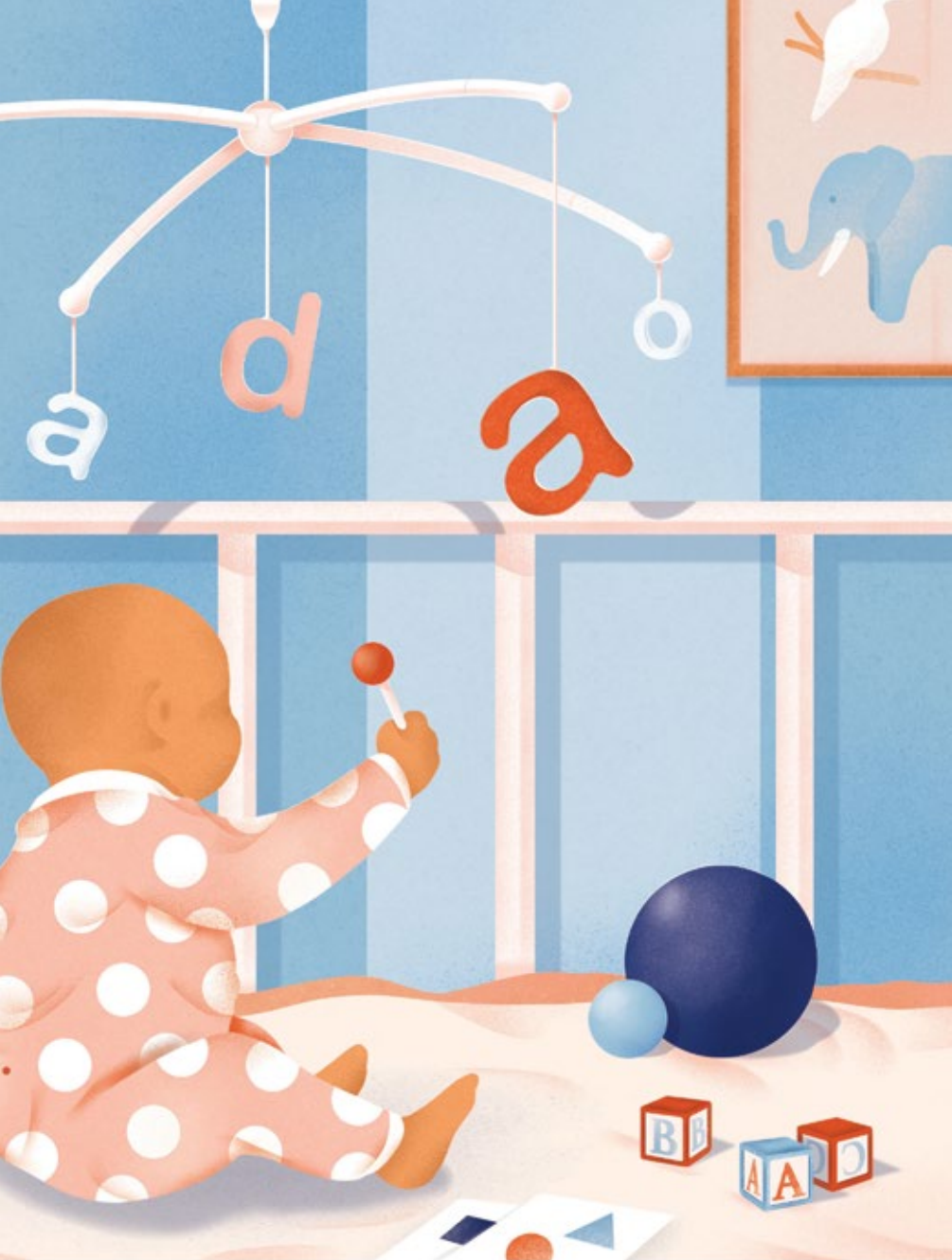


Analysing assessment

Our aim was to evaluate the assessment of canonical babbling and presence of high-pressure oral consonants as diagnostic markers for later speech outcomes. The participants in our study were 130 patients (all cleft types) born between October 2010 and December 2013. There were 60 exclusions; therefore, 70 children took part.

Specialist cleft SLTs assessed participants at 12 months and 36 months. Assessment observations were retrospectively rated by a specialist cleft SLT using a traffic light system, whereby green signified speech within normal limits, amber highlighted some moderate areas of difficulty and red indicated the highest level of concern (Harland, 2006). One rating was allocated at 12 months for 'speech' and two ratings were given at 36 months, one related to their palatal function, 'resonance and airflow', and one for articulation, 'cleft speech characteristics' (CSCs) (see Table 1 opposite).

The 12-month visit took place in the family home, allowing naturalistic observation methods to be applied, as described in



Lieberman and Lohmander (2014). During the visit there were approximately 45 minutes of free play with age-appropriate toys. Findings from observations and parental reports were noted. The presence of canonical babbling in more than 15% of the sample (Oller et al, 1994) and consonant inventories were documented.

The children were seen in a clinic or their nursery setting at 36 months. A formal assessment of articulation and phonology was conducted using the Phonological Screening Assessment (Stevens and Isles, 2001). Judgements were also made about resonance and airflow errors, based on spontaneous speech during play. Informal assessments during conversation and the Derbyshire Language Scheme: Rapid Screening Test (Knowles and Masidlover, 1987) were administered to ascertain whether language levels were age appropriate.

A retrospective case note review was completed for all participants. Qualitative information was gathered regarding hearing, feeding, language levels and SLT intervention. Ratings at 12 months were compared to 36-month outcomes and SLT prediction accuracy at 12 months was analysed.

Results

The SLT’s predictions of palatal function were highly accurate if green ratings were allocated at 12 months. Of these children, 97% (31) presenting with good canonical babbling and pressure consonants had good palatal function at 36 months. Predictions were more likely to be inaccurate for participants who were rated as amber or red at 12 months. False positives were identified for palatal function (46%, 32); some improved by 36 months because their development was delayed and SLTs rated cautiously if limited samples were heard.

For all predictions made regarding articulation at 12 months, 64% (45) were accurate at 36 months. False negatives were indicated for some participants (26%, 18); for example, later difficulties emerged when their fricatives developed as active nasal fricatives. Accuracy of predictions also declined for those who presented with confounding factors (Figure 1 overleaf); 23 participants presented with one or more of these. For all participants with inaccurate predictions confounding factors were identified, which provided explanations as to why predictions at 12 months were difficult to assign.

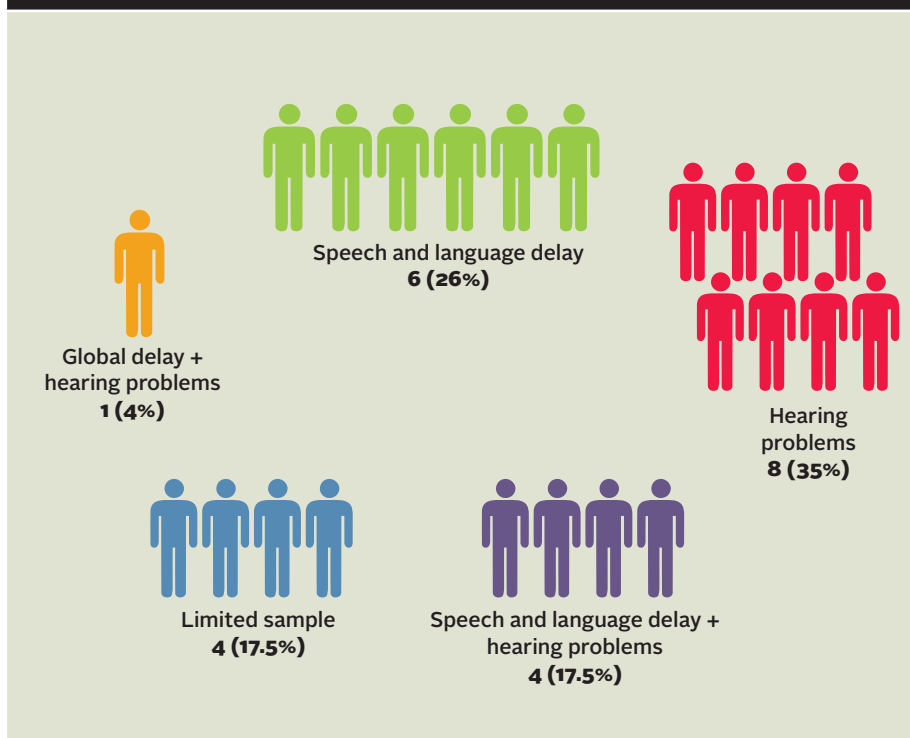
The SLT’s prediction accuracy for all of the ratings in the categories ‘resonance and airflow’ and ‘CSCs’ were analysed using a Spearman’s rank correlation test. This was found to be statistically significant for

Table 1 – Categorisation of speech characteristics

	12 months	3 years – resonance and airflow	3 years – CSCs
RED	Reduced consonant inventory, no canonical babbling.	Moderate-severe hypernasality, frequent nasal emission or nasal turbulence.	Backing to velar/uvular, pharyngeals, glottal stops, nasal fricatives, double articulations, weak/nasalised consonants, nasal realisations.
AMBER	Canonical babbling <15% of sample. Babbling on nasals, vowels, approximants. Occasional pressure consonants observed.	Mild hypernasality, marked hyponasality.	Palatals, ingressive fricatives.
GREEN	Using oral pressure consonants. Canonical babbling >15% of sample.	Absent/borderline hypernasality, mild/absent hyponasality, absent/inconsistent nasal emission, absent/occasional nasal turbulence.	Normal articulation, laterals, dentals.

“Assessment at an early age is useful clinically, in terms of predicting speech outcomes and developing relationships with families”

Figure 1 – Confounding factors



‘resonance and airflow’ ($r=0.028$, $p<0.05$) and highly statistically significant for ‘CSCs’ ($r=0.001$, $p<0.001$) (see Figure 1).

Conclusions and implications

The 12-month assessment was found to be a useful time-point to advise parents on risks of later speech problems in children with cleft palate. Clinicians can be confident when advising parents about

their child’s expected palatal function if a green rating is given for their speech at 12 months. Predictions with regard to speech sound development are more challenging due to ongoing changes in phonology at this age. This study also highlights the impact of variables, such as hearing and language skills—confounding factors can make assessment of risk more challenging. Moreover, assessment of risk may be more

reliable when conducted at a specific time period post-palate repair, instead of routinely at 12 months.

This study was not without limitations; many patients were excluded as their palates were repaired later than 12 months. This raises the question as to whether we should complete their assessment at 12 months or at a certain time period post-operatively. Data was analysed retrospectively, which is not as reliable as a prospective research study. We would conclude that assessment at an early age is useful clinically, in terms of predicting speech outcomes and developing relationships with families. Concerns detected at an early age can be managed appropriately and further early intervention can be provided to counter adverse development. This study adds strength to previous findings describing the positive impact of early intervention, but still requires further investigation. ■

Caroline Williams, specialist SLT, and Stephanie van Eeden, lead SLT, Northern and Yorkshire Cleft Lip and Palate Service
Email: Caroline.Williams2@nuth.nhs.uk
Twitter: [@carolinewill08](https://twitter.com/carolinewill08)



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From Michael Palin Centre for Stammering Children, London: **Frances Cook**, MSc, Cert. CT (Oxford), Reg UKCP (PCT), Cert MRCSLT (Hons); **Willie Botterill**, MSc (Psych. Couns.), Reg UKCP (PCT), Cert MRCSLT; **Ali Biggart**, MSc, BA (Hons), Dip. CT (Oxford), Cert MRCSLT; **Alison Nicholas**, MSc, BA (Hons), Cert MRCSLT; **Jane Fry**, MSc (Psych. Couns); **Barry Guitar**, Ph.D., University of Vermont; **Peter Ramig**, Ph.D., University of Colorado-Boulder; **Patricia Zebrowski**, Ph.D., University of Iowa; and **June Campbell**, M.A., private practice, Carmel, CA, provided additional footage.

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- 1. Streaming video at www.StutteringHelp.org/Streaming**
- or**
- 2. DVD No. 9600 at www.StutteringHelp.org/Store**





Amit Kulkarni

Research and Development Forum

In a continuation of our series on healthcare improvement, we offer further recommendations and resources to help with designing and conducting implementation science projects

Healthcare improvement: part four

In the last few issues of *Bulletin*, the Research and Development Forum has provided members with an introduction to healthcare improvement. Last month, the team from KIS and CIS looked at implementation science, outlining what implementation science is, what it can help us to achieve, and providing recommendations for implementing evidence into practice that draw from this field. But it's one thing reading about the theory of implementation science and quite another using it to design a high-quality implementation project. Therefore, the KIS and CIS team has also provided top tips and directed us towards the key resources in Table 1.

Carrying out implementation research

Despite the rapid growth of implementation science in recent years, designing high-quality implementation research remains a complex and daunting task. This is because implementation research is very different from the efficacy and effectiveness research that health researchers typically

conduct. Rather than solely focusing on determining the effectiveness of a particular intervention, implementation research is also concerned with understanding the barriers and facilitators to successful implementation, and identifying effective implementation strategies that promote the adoption, implementation and sustainment of evidence-based interventions.

If you are looking to design an implementation research project but don't know where to begin,

fear not! A number of resources have been developed to help design high-quality implementation research, as shown in Table 1 below.

Future plans

The below resources aren't the only ones that exist and, over the coming months, the RCSLT will start to develop new webpages that will signpost you towards these. We would also like to support members' improvement efforts in other ways. For example, this year's RCSLT conference theme is 'Improving quality in speech and language therapy'.

At the conference, members will learn more about improvement methodology from world-leading experts, and there will be a discussion on healthcare improvement policy across the UK. Improvement projects carried out by SLTs will also be showcased, as will the uptake of improvement and implementation science research within the profession.

We very much hope as many members as possible will be able to join us at the conference to showcase their work, and to develop the skills and understanding required in this crucial aspect of today's

healthcare environment.

As the KIS/CIS team have shown us over the last few months, the time has come to fully embrace improvement methodologies in speech and language therapy. Whether this is via locally-focused efforts using a quality improvement approach, or research projects using improvement or implementation science methodologies, all approaches are integral to developing safe, quality, cost-effective speech and language therapy services.

The RCSLT research team looks forward to much more discussion about these developments and the continual drive forward of improvement in the profession in the months and years ahead. ■

Amit Kulkarni, RCSLT research manager.

Email: amit.kulkarni@rcslt.org
Dr Louise Hull, King's Improvement Science senior researcher and deputy director, Centre for Implementation Science; Barbora Krausova, King's Improvement Science researcher; Dr Lucy Goulding, King's Improvement Science programme manager;
Email: kis-team@kcl.ac.uk
Twitter: @CLAHRC_SL

Table 1: Key resources for designing implementation research

Key resources	Summary	Link
Implementation science research development (ImpRes) tool and guide	A free online resource providing a systematic step-by-step approach to designing high-quality implementation research.	bit.ly/2XKrgFb
Implementation science exchange	A free online source for those interested in resources to help design, acquire funding for, execute and disseminate implementation science research projects.	unc.live/2UxUMMka
Implementation Science journal	<i>Implementation Science</i> publishes research relevant to the scientific study of methods to promote the uptake of research findings into routine healthcare in clinical, organisational or policy contexts. All articles published in <i>Implementation Science</i> are freely and permanently accessible online, without subscription charges or registration requirements.	bit.ly/2Vpy25E



Our monthly look at the latest in published research

In the journals

To review an article or suggest an article for review, email katie.chadd@rcslt.org

Classroom SCERTS intervention

This study found that a group of teachers trained to deliver the Social Communication, Emotional Regulation and Transactional Support (SCERTS) intervention throughout the school day may have impacted communication and behavioural skills of 5–8 year old children with autism spectrum disorder (ASD).

197 students with ASD and 129 teachers across 60 special and mainstream classrooms took part in this cluster randomised controlled trial.

‘Intervention-group’ (IG) teachers received a three-day SCERTS training workshop and twice-monthly coaching sessions, involving assessment and selection of goals, use of resources to integrate goals and supports with target activities, and guidance for implementing the approach across classroom activities. ‘Control-group’ (CG) teachers accessed general ASD education via online training. Outcomes were gathered via blinded video observations, standardised assessment and parent/teacher-reported measures. Small-moderate effect sizes indicated children in the IG classes showed improved communication, social interaction skills and increased executive functioning, with reduced ‘problem behaviours’. But only 60% of IG teachers implemented the SCERTS strategies to ‘acceptable levels’ (70%).

Whilst noting the modesty of treatment effects, authors suggest the study provides evidence that SCERTS could be a ‘feasible, comprehensive model of intervention that can be implemented in a variety of educational... settings’.

Nicki Witkin, highly specialist SLT, Hertfordshire Community NHS Trust and Independent Practice



Reference

Morgan, L., Hooker, J., Sparapani, N., Reinhardt, V., Schatschneider, C. & Wetherby, A. (2018). Cluster randomized trial of the classroom SCERTS intervention for elementary students with autism spectrum disorder. *Journal of Consulting and Clinical Psychology*, **86** (7), 631-644. [dx.doi.org/10.1037/ccp0000314](https://doi.org/10.1037/ccp0000314).

Communication disability and falls

This systematic review found some evidence to indicate that patients with, or who are likely to have, a communication disability could be at an increased risk of falls in hospital, but reasons for this are unclear. The review aimed to identify research on the potential impact of patients’ communication disability on their risk of falls. It included studies in English published in peer-reviewed journals up until June 2016. All studies were based in hospitals and included adult participant(s) with a health condition associated with communication disability. Exclusion criteria included non-original research and studies focusing on patients with hearing loss.

61 studies met the criteria for qualitative synthesis: 46 directly reported patients with communication disability (e.g. from stroke), and the others with a condition associated with communication disability (e.g. dementia). Two thirds of the studies stated communication disability as a contributor to falls.

However, a lack of consensus for terminology of communication disability was found alongside unsatisfactory measurement of communication. Often people with communication disability were excluded from research, making comparisons between studies and exploration of causal relationships difficult.

Including both participants with communication disability and SLTs in falls research teams is suggested in future, to help ‘ensure that measures of communication appropriately identify and detail relevant features of the person’s communication disability’.

Rebecca Allwood, SLT, Queens Medical Centre, Nottingham



Reference

Helmsley, B., Steel, J., Worrall, L., Hill, S., Bryant, L., Johnston, L., Georgiou, A. & Balandin, S. (2018). A systematic review of falls in hospital for patients with communication disability: Highlighting an invisible population. *Journal of Safety Research*, **68**, 89-105.

Aphasia therapy in the community

The authors of this paper suggest that speech and language therapy input for people with aphasia (PWA) living in the community is often focused on rehabilitation, and indicate the intensity and dosage may not reflect what is considered optimal for effective outcomes by the evidence base.

Researchers revisited data gathered from a previous study: 278 PWA participated from a range of NHS Trusts in urban and rural areas. Participants were over 18 and at least four months post-stroke. A quantitative content analysis explored therapy goals over a three month period. The mode (e.g. face to face vs. telehealth), frequency, duration and provider of intervention (SLT vs. assistant) were also investigated.

Participants receiving therapy in the observed time period stood at 45%.

Therapy goals were coded into categories, with the most frequent being rehabilitation (60%) followed by enabling (17.2%). The median amount of therapy received was 6.3 hours, averaging one 60-minute session every two weeks. Despite this, face-to-face therapy provided in a one-to-one environment was favoured.

The authors observed that clinicians need ‘to ensure the dose and intensity of treatment provided are in line with the type of goals being pursued’ and may consider efficiency measures (for example, use of telehealth or computer-based therapy) to supplement routine clinical practice.

Sukhi Aujla, clinical specialist SLT, Central London Community Healthcare Trust



Reference

Palmer, R., Witts, H. & Chater, T. (2018). What speech and language therapy do community dwelling stroke survivors with aphasia receive in the UK? *PLoS ONE*, **13** (7), e0200096.

This section aims to highlight recent research articles that are relevant to the profession. Inclusion does not reflect strength of evidence or offer a critical appraisal. If you find any of these interesting, follow them up and apply your own critical appraisal.

Vacancies on RCSLT Professional Practice and Policy Committee (PPPC)

If you are excited and passionate about the big issues facing our profession then the PPPC is the place for you.

Applicants are expected to have previous experience of active engagement in RCSLT business and to be able to demonstrate that they are part of a professional network of SLTs. Although not essential, applicants currently involved in service delivery would be beneficial to the committee and we would like to recruit one member with expertise in mental health, mental capacity or secure services. The term of office will run from the AGM on 25 September 2019 until the 2022 AGM with an option to re-apply for a further three years.

Strategic and in-depth, the PPPC monitors and anticipates both the external environment and internal developments on behalf of the Board of Trustees. Recent business has included research and innovation, international work, extended scope and advance practice and engagement with service users. The agenda for future meetings will be just as full.

We are seeking to fill two general vacancies on PPPC which are open to any member.

If you are interested in applying, please contact Jo Offen:
Email: jo.offen@rcslt.org | Tel: 020 7378 3007

Deadline for submission of applications is 9:00 am on Monday 8 July 2019.

Application details can be found on our website:
www.rcslt.org/about-us/join-the-team-overview





Bulletin remembers those who have dedicated their careers to speech and language therapy

Obituary

Carol Rieley

1944–2018



Carol was born in Oxford and grew up in the district of Eltham in southeast London. Her parents wanted her to be a secretary, but luckily for the profession Carol wanted to train as an SLT.

After qualifying, Carol moved to Bristol where she met her husband John. They moved to Lindfield in West Sussex with their two children, Christopher and Elizabeth, in 1974.

Carol initially worked at Cuckfield Hospital, which later moved to the Princess Royal Hospital in Haywards Heath. She remained working there for her entire NHS career, with a focus on adult neurology and voice patients.

I met Carol when I was a struggling final-year SLT student. I rang my local hospital out of the blue and told them I thought I was going to fail my exams—could I come and spend some time observing an SLT during the last holidays before my finals? In those days things were clearly simpler (or perhaps Carol just made them so). “Of course,” she replied, “Come along on Monday and we will sort everything out”. Poor Carol, she really didn’t know what she let herself in for in those two weeks. On top of already feeling like a failure, I then received some devastating news about a much loved family member. In between allowing me to observe her with her patients, Carol held me together and made me believe in myself. Only two weeks before, she had never even heard of me and now she had me

sobbing in her arms every day.

Watching Carol with her patients, the thing that sang out about her was her kindness. She had time for everyone, even the most challenging of clients. All of the examples I gave during my final exams were of her work and her approach. Over the years we continued to write to each other and she followed my career path through the rapidly changing NHS. Her insightful observations were very amusing. She always referred to herself as “just a therapist”; to her clients I know absolutely she was not “just a therapist”, but a skilled, kind and caring clinician. I also know many came to regard her as a friend.

Carol retired from the NHS in 2006, but always an SLT to her core, she carried on supporting people with communication and swallowing difficulties. She became the chair of the local Motor Neurone Disease Association and undertook volunteer visitor training. She also ran communication groups for the local Parkinson’s Disease Association. She remained interested in research for

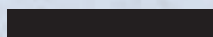
both diseases and would often pump me for information about what was new in the world for either condition.

Carol was diagnosed with ovarian cancer in 2016, but in her very Carol way she just told me that she “had been a bit unwell”, never revealing the full extent of her illness. She loved reading, travelling, the theatre, opera, champagne, donkeys, finding bargains, and was an excellent cook and hostess. She was so proud of her children and grandchildren. In 2017 she gave an address to the Target Ovarian Cancer conference in Brighton. The same year she and John celebrated 50 years of marriage.

Carol died in St Peter and St James Hospice in Crawley with “lovely smelly” flowers around her. When sorting her things, her daughter came across the following quote from the writer George Eliot: “Voices, I think they must go deeper into us than other things—I have often fancied heaven must be made of voices”.

.....
Dr Morwenna Collins, friend and specialist SLT

“She was not ‘just a therapist’, but a skilled, kind and caring clinician”



The Royal College of Speech and Language Therapists

We are the professional body for speech and language therapists across the UK

Our Mission: Enabling better lives for people with communication and swallowing needs.

Our Purpose: We are the professional body that promotes excellence in speech and language therapy

Director of Professional Development - Starting Salary £65,805

This is a strategic role providing vision and leadership to help the speech and language therapy profession to achieve greater impact through practice. Our members are passionate about delivering positive outcomes for their patients and service users. Your role will be to develop and implement strategies and resources that support them to do so, within the context of different employment sectors and structures, regulatory requirements, professional standards and taking account of the latest evidence-based practice.

The successful candidate will ideally be a speech and language therapist. They will be dynamic, quick at grasping new areas of work, and possess strong leadership and critical thinking skills; with a track record of success in workforce strategy and service transformation. They will enjoy taking on new challenges and take pride in helping to deliver sustained change at any level. Like us, the successful candidate will be passionate about improving quality of care for people with speech, language or eating and drinking difficulties, championing engagement and co-production in the development of new solutions and resources with our members and stakeholders.

The postholder will be accountable to the Chief Executive and work as part of the Senior Management Team, to support delivery of the RCSLT's strategic plan.

Key areas of accountability include: responding to key issues relating to professional practice using a variety of means including establishing expert working groups, holding roundtable events, influencing senior policy makers and/or leading the development of new professional guidance and resources.

Closing Date: 9am, Monday 1 July 2019. Interview Date: Thursday 18 July 2019

For more information and how to apply visit:
www.rcslt.org/about-us/join-the-team#section-3



JUNE CEN NOTICES

CLINICAL EXCELLENCE NETWORKS

Send your CEN notice by email to bulletin@rcslt.org by 1 July for the August issue and 1 August for September's. To find out more about RCSLT CENs, visit: tinyurl.com/CENSatRCSLT

Venue hire at the RCSLT – special rates for CENs. For further details or to arrange to view our refurbished rooms, email: venuehire@rcslt.org

London Special Schools CEN

4 June

'Working with and engaging families'. Location: The Village School Brent. Book via EventBrite or email lgarfield.312@lgflmail.org for details. Students welcome.

MSI/ VI CEN

6 June

The spring/summer MSI/VI CEN meeting will be held at Seashell Trust, Manchester. Cost: members and students £5 (plus £15 annual membership if applicable); non-members £15. To book, email msvi.cen@gmail.com

Zones of Regulation: Yorkshire ASD CEN and SEMH CEN North

7 June, 3-6pm

Zones of Regulation webinar viewing, live streamed from the US with opportunities for group discussion. Cost: £26. University of Sheffield. Visit: zones-of-regulation-sheffield.eventbrite.co.uk

East of England Stroke CEN

11 June, 1-4.15pm

For SLTs working across all settings in the East of England with stroke patients. Speakers include Dr Tom Stevenson (stroke clinical psychologist), Dr Ciara Shiggins (aphasia researcher) and a session on dysphagia (either NSTEM or IQORO devices). Tea/coffee provided. Cost: free for members (£5 annual membership fee to attend). To become a member, contact Jane Veal at strokeeastcen@gmail.com or Sara Eltringham at sara.eltringham@nnuh.nhs.uk. Venue: The Willow Centre (free parking, just off the A11), Cringleford, Norwich NR4 7JR.

West Midlands AAC CEN

12 June

Venue: Smartbox, Malvern WR14 1JJ. Cost: free for members of the CEN (yearly membership £5 for 3 meetings). To book a place, email valentina.osborne@bhamcommunity.nhs.uk. For more information, view the flyer online: www.bhamcommunity.nhs.uk/patients-public/rehabilitation/act/training/

Yorkshire Dysfluency CEN

12 June, 9.30am – 12.30pm

Meeting: We will be discussing the Social Model and Stammering Therapy. Venue: The Reginald Centre, 263 Chapeltown Road, Chapeltown, Leeds, LS7 3EX. Tel: 0113 8434331. Tea/coffee provided.

Mainstream CEN, London and South East Region

12 June, 9.30am – 4.30pm

Venue: UCL, Chandler House, Wakefield Street, London, WC1N 1PF. The day's theme will be Word Finding Difficulties, with speakers Wendy Best and Victoria Fleming of UCL presenting, 'Exploring Assessment for Word Finding Difficulties and an Introduction to a New Picture Judgement Task'. The afternoon will include a breakout session on information and resources regarding Word Finding interventions. Cost: £20 via Eventbrite. Visit mainstreamcen.yolasite.com for details. Email mainstreamcen@gmail.com for other queries.

SLTs in Neonatal Care CEN

13 June

'Hot Topics in Neonatal Care': An exciting day of presentations and discussions of new research and developments for SLTs in neonatal care, including instrumental assessments; lactation consultants and SLT role on the NICU; and the developing role of the SLT in NICU and follow up. Agenda TBC. Where: City University. Cost: £35. Email neonatslts.uk@gmail.com to register your interest.

Midlands SEMH CEN

14 June, 9.30am – 4pm

Location TBC (close to Birmingham city centre). Talks from external speakers Sarah Spencer (SLT, researcher and lecturer at Sheffield University) on adolescent language disorders and interventions; and Paula Backen (Intermediary, SLT and anger management specialist) on approaches to anger. Plus time for case discussions, networking and SEMH updates. Annual membership: £15. To book, email claire.westwood1@nhs.net

West Midlands DLD CEN

19 June, 9.30am – 4pm

Study day: practical issues/revision of Word Aware, EBP in action, AGM and networking. Cost: £10 (to include membership and refreshments). Please note that lunch is not provided. Location: St James Scout Hut, St James Church, 61 Mere Green Road, Sutton Coldfield B75 5BW. Contact: Nicola.Shegog@swft.nhs.uk

Computers in Therapy CEN (CITCEN)

20 June, 9.15am – 4.30pm

Skype in the NHS: Member presentations about their experiences of Skype implementation in their services, and sharing resources to support this. Plus Technology & Aphasia Review: Kathy Cann to present the results of her survey of more than 200 people regarding technology used by people with aphasia. Cost: £22.50 full-day attendance; £10 livestream attendance (½ day). Venue: Weston Super Mare. To book, visit citcenjune2019.eventbrite.co.uk

Trent Voice CEN

21 June, 9am – 4.30pm

Feedback from Newcastle Voice Conference 2018 including IOL, Reflux and 'Pre and Post voice therapy benign vocal fold lesions: developing the evidence' by Anna White. Plus AGM. Venue: Innovation Centre, Chesterfield Royal Hospital S44 5BL. Cost: members £10; non-members £20. Please email us and pay online to secure your place. TrentvoiceCEN@outlook.com

All Wales Speech CEN

25 June, 9.30am – 4.30pm

This study day will provide an opportunity to review the new speech pathway for Wales and the most recent evidence for speech interventions. Rhonwen Lewis presenting her PhD on 'A templatic approach to bilingual phonological development: typical and atypical patterns'. Dr Anne Harding-Bell presenting on phonetic-phonological-psycholinguistic considerations in therapy. Cost: members £6; non-members £20; students £10. Venue: Transport House, Cardiff (video conference option available in Bangor). Email allwalespeechsoundcen@gmail.com

North East Deafness/Hearing Loss CEN

26 June

Meeting in Sunderland. For more information, please email Poppy at p.welsh@percyhedley.org.uk

Secondary SLCN CEN

28 June, 9.30am – 4pm

Social Communication Interventions for Secondary Aged Young People. The day will include: TalkAbout Social Skills with Alex Kelly, an introduction to assessing and teaching social skills; SMILE Therapy with Karin Schamroth, an introduction to SMILE; and a workshop on sharing experiences of social communication assessment and interventions. Venue: RCSLT, London. To reserve your place, email Nafisa.Shehu@merton.gov.uk

London and South East Region CEN in Selective Mutism

2 July, 9.15am – 4pm

The London and South Eastern Region CEN in Selective Mutism invites you to a day on the topic, 'Selective Mutism – Learning from the Community'. Venue: RCSLT, London. To book, visit: bit.ly/2BhKnoy. For enquiries, contact Roberta Mendes at londonsmcen@gmail.com

South East and London Stammering CEN

12 July, 9.30am – 4.30pm

A study day exploring how we talk about stammering to clients, parents and in the media. Featuring Jaik Campbell, stand-up comedian, on his experience of stammering in comedy; and the British Stammering Association on their new stamma campaign and the public perception of stammering. Plus opportunities for discussion and sharing ideas with SLT colleagues. Cost for the day and CEN membership: £20; students and retired: £10. Venue: RCSLT, London. Email: sealsmembership@gmail.com

Trent Voice CEN

18 July, 9am – 5pm

Paediatric Voice Therapy Study Day: 'Paediatric Voice Disorders: What Are We Dealing With?' For paediatric therapists (with +3 years experience) and adult voice therapists beginning to work with children. Will cover anatomy differences between the adult/child larynx, common pathologies and management of dysphonia in children. Rotherham General Hospital. Cost: members £30; non-members £60 (including membership). Speakers: Rehab Awad, Clinical Lead SLT, Lewisham Hospitals; Lizzie Nash, ENT SLT Lead, Evelina London. Email trentvoicecen@outlook.com

Trent Dysphagia CEN

12 September, 9am – 4.30pm

Chesterfield Royal Hospital's Education Centre. The day will include presentations, case studies and discussions on the McNeill Dysphagia Therapy Programme and Functional Neurological Disorders including Functional Dysphagia from a psychotherapy/SLT perspective. Email trentdysphagiacen@outlook.com to secure your place. Light lunch and refreshments provided. Cost: £10.

Appointments

We are looking for a HCPC Registered Speech and Language Therapist to join our Academy.

Speech and Language Therapist

36 hours per week, Term time only + 5 training days

Permanent

£26,925 - £32,295 per annum; Scale So2 – POA, point 32-39

Plus, Special School allowance: £1,100

REF: SCH/17039SR



Location: Bramble Close, Middlesex

Work Pattern: 5 days a week

Start Date: September 2019

Salary info: Scale So2 – POA, point 32-39 + Special school allowance - £1,100
Job share and Newly Qualified applicants will be considered.

The Eden Academy is an outstanding multi-Academy Trust. We are currently looking to recruit a Speech and Language Therapist to join an innovative and dynamic team of therapists providing services to a range of pupils with learning difficulties. Experience working with Learning difficulties is essential.

The therapist will be based at two of our schools in Hillingdon (Ickenham and Pinner) with opportunity to provide input into our outreach service in mainstream schools. Full UK License and own car is essential.

This role will have potential for future work at other schools within the Academy, including an exciting opportunity to be part of the creation of two new free schools.

Speech and language therapy within the Eden Academy offers:

- Structured training opportunities and career progression
- Exemplary multidisciplinary team working
- Clinical and peer supervision and strong CPD support
- Excellent relationships with class teams and senior leadership

**For an informal discussion and further information please contact:
Alison Futerman or Lauren Garfield on 01895 437 799.**

CLOSING DATE: 21st June 2019 - Noon

CVs will not be accepted

The School is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment. The successful candidate will be subject to an enhanced DBS check, satisfactory references and other pre-employment checks.

The Eden Academy | Bramble Close, Middlesex, Uxbridge, UB8 3BF | Tel: 01895 676401 | E-mail: info@theedenacademy.co.uk

Vacancy: Speech and Language Therapists

AFC Band 5 - Permanent (full-time)



Moor House is seeking highly motivated Speech and Language Therapists to deliver exceptional outcomes for students with Developmental Language Disorder (DLN).

An Ofsted "Outstanding" rated school and college, Moor House caters for students aged 7-19, providing intensive, interdisciplinary therapeutic interventions.

These positions offer a fantastic opportunity to develop and specialise your skills in a dynamic, well supported and highly specialist interdisciplinary team.

An exciting opportunity to work in a dynamic, well supported team



Requirements for the role

- HCPC registration and RCSLT membership
- A commitment to professional development
 - Excellent people and organisational skills
- A desire to work within an interdisciplinary team



What we offer

- An environment that fosters CPD and research opportunities
- Family friendly holiday allowance
- Generous pension scheme
- Employee Assistance Programme



Moor House School & College is committed to safeguarding and promoting the welfare of children and young people, and expects all staff to share this commitment.

All applicants will be screened, including checks with past employers and with the Disclosure and Barring Service (DBS).

Application information available on our website:

www.moorhouseschool.co.uk/vacancies

Closing date: 9am on 20 June 2019

Interview date: w/c 24 June 2019

**Surrey County Council's Speech and Language Therapy Service is expanding!
Our creative and innovative team are looking to recruit to Specialist SLT roles
working in mainstream schools, special schools and specialist centres in Surrey.**

Working 42 weeks per year, 36 hours per week, the salary per annum starts at £31,844.

Your main duties in the role of a Specialist Speech and Language Therapist will include but not be limited to:

- Clinical decision making in conjunction with school staff and families around the level of support needed to achieve the best possible outcome for the children on your defined caseload.
- Providing support, training and shadowing opportunities to more junior colleagues, and formally line managing a junior member of the team.
- Working with speech and language therapy assistants, setting targets for the children and young people they are supporting, and monitoring of the delivery and outcomes of their work.

We are very proud of the work we do and the positive outcomes we deliver for young people who use our services and we are always focusing on new initiatives, research and methods to continuously improve the service we deliver. If you're a positive and friendly team player with a passion for speech and language therapy then we would welcome your application.

With some of our roles requiring more remote working, it is important for us that our employees feel connected and supported. We offer the following to ensure our team members not only enjoy their roles but can continuously develop within them:

- Online Jive Platform – Jive is an internal networking forum that all employees at Surrey have access to. It allows our team members to connect with colleagues, share ideas and receive support.
- Continuous Professional Development- whether it be local team meetings, structured in-service training, external courses or regular supervision sessions with managers, our employees are able to take time to reflect on their work and focus on their professional career progression.
- Professional Leadership- having managers who are Speech and Language Therapists themselves has proven to be a huge benefit to our employees. It allows them to work knowing they have an experienced support system to use if needed.



We would welcome a conversation with you if you'd like to find out more about the role and our team.

For an informal discussion contact Barbara Paulger on **07970 765803** or by e-mail at **Barbara.paulger1@surreycc.gov.uk**.

To apply, please visit **surreycc.gov.uk/jobs** and search for 'Specialist Speech and Language Therapist' where you can complete an application.

We also welcome informal enquiries from new graduates who are considering starting their career to call/email us to discuss opportunities further.



**SPEECH & LANGUAGE THERAPIST
VACANCIES**

£24,313 - £26,999

Pro-Rata Term Time only + 2 weeks

Winchelsea School is a community special school committed to developing the communication skills of pupils, aged 4 to 16, with a wide range of learning difficulties.

Recent expansion has led to a number of vacancies within school and we are seeking to employ two additional Speech and Language Therapists to join our team. This post is suitable for newly qualified therapists and is considered to be broadly equivalent to a Band 5. Supervision will be provided in house by our Senior Speech and Language Therapist. You will have a diverse caseload and will be supported to develop your direct therapy style to include both individual and whole class therapy sessions. We have a dedicated therapy space and a wide range of therapeutic resources and assessments.

Previous experience of working with children, specifically those with learning difficulties and autism, would be an advantage, but not essential as we will provide substantial training and development.

Applicants are very welcome to visit the school, please contact Lynne Ralston, Senior Speech & Language Therapist on l.ralston@winchelsea.poole.sch.uk or 01202 746240.

For full details and to apply please visit: <https://jobs.bcpccouncil.gov.uk/>

The closing date for this post is 21st June 2019. If you have not been contacted by the school by 28th June 2019, then please assume that your application has been unsuccessful.

This school is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share the same commitment. Applicants to this post will be required to complete an enhanced Disclosure & Barring Service Check.

**Are you ready to make a difference and inspire
both staff and pupils at Ripplevale School?**

SaLT Specialist

Closing Date: Friday 14th June 2019 at midday

Interviews: TBC

Pay Scale: negotiable dependant on experience

Start Date: Immediate

We are looking for an innovative and passionate SaLT specialist with at least 12 months experience who is looking for an exciting post in a well-established Independent school.

You will be responsible for leading and overseeing the SaLT provision throughout the school from primary aged children through to 6th Form. You will be a self-starter working as part of a multidisciplinary team, responsible for the delivery of the SaLT and communication initiatives.

You will monitor and report on the SaLT provision for individuals and groups of pupils and ensure that you take the lead in identifying any support or training requirements to support the highest standard of SaLT delivery.

You will demonstrate initiative and drive to facilitate the best outcomes for all our pupils, families and carers.

**To request an application pack please
telephone Ripplevale School on
01304 373866.**



FINANCE AND RESOURCES COMMITTEE MEMBERS WANTED

The FRC will have two vacancies starting in September 2019:

- Do you want to broaden your professional skills?
- Do you like the challenge of thinking strategically?
- Would you like to play a part in the running of your RCSLT?
- Do you want to help safeguard your profession?

If the answer is 'Yes', then think about joining the RCSLT's Finance and Resources Committee (FRC). This is a chance to be part of the RCSLT's governance, covering the organisation's finance, investments, HR, contracts, performance management, audit, risk, facilities, heritage work and membership administration.

Although it is desirable rather than essential to have professional expertise in one or more of the above fields, you do need to be able to assimilate information, think strategically and have a willingness to make decisions on behalf of the RCSLT.

The Committee meets four times a year in London. There will also be an induction day held on 31 October 2019, and further training will be given if required. The role is unremunerated, but expenses are paid. The term of office is for three years, starting from the AGM on 25 September 2019, with an opportunity for a further three years if selected.

For details, please email jo.offen@rcslt.org or call **0207 378 3007**.

For more information, supporting documents and application forms, visit:
www.rcslt.org/about-us/join-the-team-overview

The deadline for completed applications is **Monday 8 July 2019**.



Becky Appleby

OCCUPATION: HIGHLY SPECIALIST SLT, HERTFORDSHIRE COMMUNITY NHS TRUST

“...the charity needed more SLT support, I took the leap, applied and was successful.”



As I celebrated five years of working as an SLT, I started to wonder if it was worth exploring if I could do more in the world—even if it was just for a summer. Questions that were uppermost in my mind included: is there a need for voluntary speech and language support in developing countries? Is it possible to make an impact in speech and language therapy over a short period of time? Have I got enough experience and knowledge to help?

The charity Ekisa Ministries runs a residential home, special school and community outreach programmes for children with disabilities in the town of Jinja, Uganda. I had been following Ekisa’s journey since my friend Emily Henderson founded the charity in 2010. Its ethos—to change the stigma against disability in Uganda so that children can be celebrated for their abilities and cared for by empowered families—was one I felt strongly about. When Emily told me the charity needed more SLT support, I took the leap, applied and was accepted.

My role was to support Ugandan SLT Brian Bwire (the only SLT in the region) to implement long-term strategies that staff could continue to use independently. Brian was keen to discover how we assess, advise, train and deliver therapy with children with communication needs in England. Brian’s “Wow!” response to our resources and ideas made me reflect on how grateful we all should be. As Brian works alone, Hertfordshire Community NHS Trust allowed me to share locally created tools for assessing and supporting children with autism and



learning difficulties. Brian loved how we could assess multiple children at once by observing them in situ, and by gathering more information from their mamas (carers) and teaching staff. Brian and I were able to use a template that he’d created to write up-to-date reports, targets and strategies for every child. I loved doing more hands-on therapy and assessment, and learned a great deal about a wide range of disabilities.

Brian and I adapted and delivered Hertfordshire’s autism training based on the SCERTS model to the local community in Jinja and received excellent feedback. As part of our work, Brian and I set up a ‘sign and strategy of the week’ in the school and home. This thrilled one of the older boys who saw me teaching ‘good morning’ to the mamas. With a beaming smile, he led me by the hand to the bus driver, the mama hanging out the laundry, then to the gate guard, so that I could show them the sign too.

I found it fascinating that Ekisa’s focus on parent empowerment mirrored some of the work we did in Hertfordshire, where there was a strong focus on working with parents, empowering them through techniques such as ‘appreciative enquiry’ (SCERTS) and on courses such as Hanen’s ‘More Than Words’. Back home, I had seen how this approach supported family relationships, helping them to celebrate their child’s differences. Similarly, Ekisa staff worked tirelessly to empower parents and to raise awareness of disability within communities. They educated families about disability, and highlighted and celebrated each child’s abilities.

In Uganda, there is still a lot of stigma around disability. Myths persist that parents cause disabilities, or that children are cursed, which leads to those children being left at home without access to education, or being put into care. Ekisa exists to help keep families together, to care for abandoned children, and to work on improving understanding, acceptance and attitudes towards children with disabilities.

Despite having limited resources, it was inspiring to observe Ekisa staff providing high-quality, child-centred care, as well as excellent therapy in sometimes challenging conditions. I would highly recommend volunteering in a developing country. The highlight of my trip was seeing the endless smiles on the children’s happy faces. ■

**For more information about Ekisa Ministries, visit www.ekisa.org
Email: rebecca.appleby1@nhs.net
Twitter: @Herts_SLT**

QUICK LOOK DATES

Various dates, London

Reading Adult Videofluoroscopies

9 September: Introduction to neurological disorders. Common neurological dysphagia presentations, utilisation of VFS and approaches to analysis. Intermediate, 28 November: Challenging neurological diagnosis, refining analytical skills and dysphagia management plans. Location: Queen Square, London. Cost: £200 both days; £110 individual days. Email: Alkida Domi at uclh.enquiry.therapy.courses@nhs.net; tel: 020 3448 3476; visit: www.uclhcharitycourses.com

6-7 June, RCSLT, London

smILE Therapy Training: Day 1 and 2

For SLTs and teachers. Innovative 10-step therapy teaching functional communication and social skills in real settings. Outcome measures and empowering parents integral. For information and training for your local team, email: info@smiletherapytraining.com; visit: www.smiletherapytraining.com

4 July, Birmingham

Shape Coding™

Learn this effective system to help school-aged children improve understanding and production of grammar. Suitable for SLTs and teachers. No prior knowledge of Shape Coding is required. Cost: £220. Visit: coursebeetle.co.uk/shape-coding-july-2019-birmingham; email: info@coursebeetle.co.uk

5-7 July, Wirral

PROMPT LEVEL 1: Introduction to Technique

This three-day intensive workshop focuses on teaching the technique of PROMPT (PROMPTs for Restructuring Oral Muscular Phonetic Targets), embedding this within a holistic framework for the assessment and treatment of speech and language disorders from a speech-motor perspective. 9am – 4.30pm, The Village Hotel, Wirral CH62 4UE. Visit: www.promptinstitute.com/calendar

7 July

Hormones and Voice

Hormones are crucial to our wellbeing. They are also important to our voice. This BVA

Study Day focuses on the role of hormones on our voices. It is intended for everyone who works with voice: SLTs, singing teachers, physical therapists, doctors and performers. Study Day concludes with the presentation of the 2019 Gunnar Rugheimer Lecture by Jean Abitbol. Visit: www.britishvoiceassociation.org.uk (Events); email: administrator@britishvoiceassociation.org.uk

9 July

Hearing loss and social competency in teenagers

Gain confidence to recognise the complex skills our deaf teenagers need to thrive socially. A focus on how the language we use and our actions

affect what people think, imagine and feel about us and what we can do about it. Cost: £90, bring a friend for £10. The Ear Foundation. Email: Susanna@earfoundation.org.uk

15 July, Derby

A Journey through Leadership Using Empathy

Lecturer: Carolyn Cleveland. The day is an empathy journey that will help develop an understanding of the psychology and neuroscience of empathic and emotionally focused thinking and challenging unconscious processes. It will examine, in an authentic and honest way, how our own emotions and biases influence us and our outcomes. Venue: London Road Community Hospital, Derby. Fee: £115. CPD: 5 hours. Visit: www.ncore.org.uk; email: dhft.ncore@nhs.net

18-19 July

Foundation of Neurology Course

'Foundations of Neurology' for SLTs working with adults living with neurological disease. Focusing on aspects of neuroplasticity, differential diagnosis and assessment using a hypothesis-testing approach to underpin the nature of disorders and possible SLT interventions. Cost: £200. Venue: The National Hospital for Neurology. Email: Alkida.Domi@uclh.enquiry.therapy.courses@nhs.net; tel: 020 34483476; visit: www.uclhcharitycourses.com

16 July, London

Motivational Interviewing for SLTs

Develop skills in supporting clients and carers who may present as being ambivalent about change. Motivational Interviewing skills centre on collaborative conversations seeking to evoke and strengthen the person's own motivation and commitment to change. Cost: £109. Venue: City Lit, Central London. Email: corinne-moffatt-santos@citylit.ac.uk; tel: 020 7492 2578.

16-17 July, London

Accent Method: A three-day course

An effective rehabilitation technique for voice disorders and stammering and applicable to work with performers. The course is practical and interactive and includes the evidence base behind the technique. The final day provides opportunities for consolidation and troubleshooting. Follow-up day 13 January. Visit: www.britishvoiceassociation.org.uk (Events); email: administrator@britishvoiceassociation.org.uk

September, Midlands

VitalStim Specialty Certification

VitalStim Therapy and Beyond: DINES (Dynamic Integration of NMES and Exercise for Swallowing) two-day intermediate level course. The principles of NMES (Neuro Muscular Electrical Stimulation) will be taught with active dysphagia exercise therapy. Email: info@vitalstim.co.uk

9-11 September, Edinburgh

More Than Words® Certification Workshop

Learn how to involve parents of children with autism to facilitate their child's social and communication skills in everyday contexts, fulfilling the key criteria for effective early intervention for these children. Visit: hanen.org/mtw-9-sept-2019-edinburgh

10 September, Birmingham

The current evidence base for school-aged children with Developmental Language Disorder

An update on the current evidence base for intervention for school-aged children with language impairments led by Dr Susan Ebbels. Cost: £215. Visit: coursebeetle.co.uk/developmental-language-disorder-sep-2019-birmingham; email: info@coursebeetle.co.uk

10 September

Speech Acoustics

Learning speech acoustics is a bit like marmite – you love it or you hate it. A practical interactive approach to speech acoustics. From consonants to vowels, formants to frequencies, all will become clear. Cost: £100, bring a friend for £50. The Ear Foundation. Email: susanna@earfoundation.org.uk

16, 23 & 30 September, Nottingham

Nottingham Inter-Professional Stroke Educational Programme

Lead Facilitator: Dr Sunil Munshi. A high-quality, three-day course providing teaching on the whole stroke patient pathway. The course comprises three modules (Acute Care, Rehabilitation, and Stroke in the Real World) delivered through a variety of interactive teaching opportunities. Suitable for all Multidisciplinary staff (nurses and therapists) working with stroke patients and is delivered by an experienced multidisciplinary team. Venue: Nottingham City Hospital. Fee: £150. CPD: 20.45 hours. Visit: www.ncore.org.uk; email: dhft.ncore@nhs.net

17 September

Update on Child Speech Disorders: Diagnosis & Treatments

This course will present both an overview and recent discoveries in the field of childhood speech disorders. We tackle the latest neuroscientific evidence and translate findings for a clinical audience. ICH Events. Visit: www.ichevents.com; email: ich.events@ucl.ac.uk; tel: 020 7905 2675.

20 September, Birmingham

Achieving positive outcomes for adolescents through awareness of neurological changes and untapped potential for learning

Led by Jo Stockdale. Cost: £120, or £100 per person when two places are booked. Visit: coursebeetle.co.uk/achieving-positive-outcomes-sep-2019-birmingham; email: info@coursebeetle.co.uk

23 September, Derby

A Journey through Complaints Using Empathy

Lecturer: Carolyn Cleveland. This thought-provoking, one-day course empowers staff to journey through and explore the emotion behind, concerns, complaints and serious incidents to improve outcomes and the emotional experience. Venue: London Road Community Hospital, Derby. Fee: £115. CPD: 5 hours. Visit: www.ncore.org.uk; email: dhft.ncore@nhs.net

27 September, London

Stammering Pride and Prejudice

This exciting book launch event is open to SLTs and people who stammer. Presentations, chapter readings and discussions will challenge commonly held views about stammering. Cost:



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2 hours DVD 6740

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2 hours DVD 6730

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£40. Venue: City Lit, Central London. Tickets available on Eventbrite. Visit: bit.ly/2WxrRK4; email: corinne-moffatt-santos@citylit.ac.uk; tel: 020 7492 2578.

2-4 October, Birmingham

1, 2 or 3 Day Masterclass: Selective Mutism for Professionals and parents/carers

With Maggie Johnson. Suitable for teachers, therapist and parents. Cost: £195-£499. Visit: coursebeetle.co.uk/selective-mutism-oct-2019-birmingham; email: info@coursebeetle.co.uk

5 October

Auditory Processing Disorder Information Day

An information day for families, adults and professionals to learn more about Auditory Processing Disorder (APD). We are excited to welcome a panel of experts including Dr.Doris Bamjiou, Dr.Nicci Chapman, Dr.Chrysa Spyridakou and Sam Bealing. Cost: £40. The Ear Foundation. Email: susanna@earfoundation.org.uk

8-9 October, RCSLT, London

Supporting Children and Adults Using AAC – Accredited CPD

Suitable for SLT assistants, SLTs and educationalists. Practical strategies and activities will be taught to give learners a thorough grounding in AAC. Cost: £340 + VAT. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

8-9 October, RCSLT, London

Elklan Total Training Package for Pupils with SLD

This course equips SLTs and teaching advisors to provide accredited training to staff working with pupils with SLD in different educational settings. Cost: £495 + VAT. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

10 October, RCSLT, London

Elklan Training Package: Supporting Children and Adults Using AAC

Equipping SLTs to provide accredited training to staff supporting users of AAC. Covers effective use of high and low tech communication aids. Cost: £235 + VAT. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

10-11 October, RCSLT, London

Elklan Total Training Package for Vulnerable Young People (VYP)

Equipping SLTs and teaching advisors to provide accredited training to staff working within youth offending institutions, prisons and vulnerable situations. Cost: £495 + VAT. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

11 October, Birmingham

Introduction to working with children and young people with SEMH needs

Presented by Melanie Cross, lead author of the Royal College of Speech and Language Therapists clinical guidelines on SEMH. Cost: £215. Visit: coursebeetle.co.uk/semh-slcn-oct-2019-birmingham; email: info@coursebeetle.co.uk

17 October, Birmingham

The current evidence base for speech interventions: Translating research into practice

Best practice recommendations for transcription and analysis will be included. Presented by Dr Anne Hesketh of Manchester University. Cost: £215. Visit: coursebeetle.co.uk/speech-interventions-oct-2019-birmingham; email: info@coursebeetle.co.uk

21-23 October, RCSLT, London

PROMPT LEVEL 1: Introduction to Technique

This 3-day intensive workshop focuses on teaching the Technique of PROMPT (PROMPTs for Restructuring Oral Muscular Phonetic Targets). Teaches a system for assessing and treating language and speech disorders from a perspective of speech-motor control and learning. The course trains SLTs to provide tactile-kinesthetic input to support the development of speech movement. Using a holistic framework, participants will learn how to embed speech goals within functional communication, thus developing social interaction and language. 9am – 4.30pm. Instructor: Justine Rhind. Register at www.promptinstitute.com/event/10421

6 November, Derby

Atypical Parkinson's Study Day

The aims of the course are: gain an increased knowledge and understanding of these conditions; understand the management of these conditions; understand and know how to implement the therapy interventions; and have an understanding of how such conditions can impact an individual. Venue: Royal Derby Hospital, Derby. Fee: £130. CPD: 5.15 hours. Visit: www.ncore.org.uk; email: dhft.ncore@nhs.net

6-7 November, Midlands

TalkTools Level One

Tactile sensory approach to improve speech and feeding. Level one will teach assessment, planning and programme application using Oral Placement techniques. Suitable for SLTs, OTs, physiotherapists, BCBA's, nurses, SENs. Visit: www.eg-training.co.uk; tek: 01530 274747; email: info@eg-training.co.uk

8-9 November, Midlands

TalkTools Level Two

Tactile sensory approach to improve speech/feeding. Level two will develop specific therapeutic program plans to meet Oral Placement needs. Practical examples will be shown via video and live assessment sessions. Visit: www.eg-training.co.uk; tel: 01530 274747; email: info@eg-training.co.uk

11-12 November, Cheltenham

Johansen IAS

Independent learning (equivalent of two attended days) plus two taught days. How to use specific and customised music recordings to organise and enhance listening and auditory processing. Supports spoken and written language for all ages. Individual and group programmes. Cost: £500 (early bird £450). Email: cathy@johansenias.com; visit: www.johansenias.com

14-15 November, RCSLT, London

smiLE Therapy Training: Day 1 and 2

For SLTs and teachers. Innovative 10-step therapy. Teaching functional communication and social skills in

real settings. Outcome measures and empowering parents integral. For information and training for your local team, email: info@smiletherapytraining.com; visit: www.smiletherapytraining.com

18-19 November, RCSLT, London

Elklan Total Training Package for 5-11s

Equips SLTs and teaching advisors to provide accredited, evidence-informed training to staff working in primary schools. Cost: £495 (+ VAT). Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

18-19 November, RCSLT, London

Elklan Total Training Package for Verbal Pupils with ASD

Equipping SLTs and teaching advisors to provide accredited training to staff supporting verbal pupils with ASD, 3-18 yrs. Cost: £495 + VAT. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

20-21 November, RCSLT, London

Elklan Total Training Package for 0-25s with Complex Needs

This course equips SLTs to provide accredited training to staff who manage pupils with complex learning needs. It covers pre-intentional to early intentional communication. Cost: £495 + VAT. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

20-22 November, RCSLT, London

Elklan Total Training Package (TTP) for 3-5s with optional TTP for 0-3s

3-5s on 20-21 November and 0-3s on 22 November. Equipping SLTs and EY advisors to provide accredited training to Early Years staff. Cost: £495 for 3-5s; £250 for 0-3s; £745 for both (all

prices ex. VAT). Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

22 November, RCSLT, London

Elklan Let's Talk Together Training Pack

Practitioners will be equipped to provide accredited training to parents of pupils with social communication need including ASD. Relevant Elklan Level 3 qualification essential. Cost: £235 + VAT. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

22 November, RCSLT, London

Elklan Let's Talk with 5-11's Training Pack

Educationalists will be equipped to provide accredited training to parents of 5-11s. Relevant Elklan Level 3 qualification essential. Cost: £235 + VAT. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

22 November, RCSLT, London

Elklan Let's Talk with Under 5s Training Pack

SLTAs and EY practitioners will be equipped to provide accredited training to parents of pre-schoolers. Relevant Elklan Level 3 qualification essential. Cost: £235 + VAT. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

7-9 January 2020, RCSLT, London

Communication Support for 0-25s with Complex Needs

Two-day course for practitioners with accreditation. Followed by 'Let's Talk with Special Children' Tutor Pack on day three. Cost: £390 + VAT. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk



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References

1. <http://iddsi.org/> Date accessed: November 2017
2. Fresenius Kabi data on file - Thick & Easy Clear - Acceptability Study Report Sept 2014.

Date of preparation: March 2019. Job code: EN1461. Thick & Easy is a trademark of Hormel Health Labs. Fresenius Kabi is an authorised user.



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