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# bulletin

The official magazine of the Royal College of Speech & Language Therapists



## Why do men become SLTs?



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**COVER STORY:**

## Why do men become SLTs?

(see pages 12-14)

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# Moving into the limelight



Yesterday, I had the privilege of attending the launch of the new All Party Parliamentary Group on Speech and Language Difficulties at the Houses of Parliament.

Although the House of Commons was busy debating the future of Britain's nuclear weapons arsenal, and the House of Lords was voting on its very existence, the event attracted a great deal of cross party support.

I'm also pleased to report that Parliamentary Under Secretary of State for Care Services Ivan Lewis spoke at length at the launch.

His presence there, along with many eminent parliamentarians, confirms that speech and language therapy issues are beginning to move into the political limelight, as politicians from all sides begin to realise that these issues play an important part in all aspects of social and economic life.

The APPG aims to raise awareness of communication disorders; highlight the importance of early intervention for children with speech and language problems and press for increased provision of specialist therapy and teaching.

The RCSLT has worked with parliamentarians for several months to establish the APPG and is supporting the Group now that it is up and running.

You can read more about the launch on page 7 of this month's *Bulletin*. We will endeavour to keep you informed as the Group develops.

**Steven Harulow**  
Bulletin Editor  
bulletin@rcslt.org

## LETTERS

**Bulletin thrives on your letters and emails**  
Write to the editor, RCSLT, 2 White Hart Yard,  
London SE1 1NX  
email: [bulletin@rcslt.org](mailto:bulletin@rcslt.org)

Please include your postal address and telephone number  
Letters may be edited for publication (250 words maximum)

### Time for hard decisions

In response to the letter, 'Contributing to our own demise' (*Bulletin*, February 2007, p4).

When we reflect on the wonderful work of our colleagues, we do not consider that our profession is facing its demise.

We are proud of our capacity to adapt and change, for example the move towards indirect intervention and sharing responsibility for children's language learning.

Communication is everyone's business. We have a duty to share what we know.

Children make the best progress when the adults around them make changes. SLTs are powerful agents in this process and most successful when we inspire adults to think and act in new ways to support their children's communication.

Demand for SLT continues to outstrip supply, so we need to make hard decisions about priority for therapy.

If we do not, then decisions will be made for us. We must turn some clients away if we are to treat those at greatest risk and with greatest need.

But who will manage the children we do not see if we have failed to enable others to take responsibility?

We agree that graduate therapists need to build their clinical skills through direct therapy. We must provide a framework of support to ensure that this vital stage is nurtured.

SLTs deserve good management. We

look to those who will negotiate contracts with the new commissioners and trust that they will, with the support of RCSLT, identify and promote evidence of positive outcomes from best practice.

It is incumbent on all of us to evaluate our effectiveness and add to that evidence base.

#### Karin Evans

SLT, Head of Children's Services

#### Sally Parkin

SLT, Team Leader for Community Paediatrics (Newcastle under Lyme and Staffordshire Moorlands)

#### Janet Cooper

SLT, Team Leader for Community Paediatrics (City of Stoke on Trent) North Staffordshire PCT

### Another viewpoint

I agree wholeheartedly with everything the correspondent wrote in the letter, 'Contributing to our own demise' (*Bulletin*, February 2007, p4).

The situation has been growing for at least the last 20 years.

What she did not mention is that there is now a multiplicity of advisers going into schools.

We are now only one among many, possibly touching the lives of the same children and staff.

#### Patricia Otter

Chelmsford

**LETTERS – CONTINUED****Say sayonara to Sian**

Dr Sian Munro (pictured) is retiring from her post as Head of the University of Wales Institute Cardiff Centre for Speech and Language Therapy at the end of the academic year, after a long and distinguished career as an academic, therapist and researcher.

There will be a reception to mark her retirement at the Angel Hotel, Westgate Street, Cardiff on 8 July 2007 starting at 4pm.

We hope many of you will come and join us to celebrate her remarkable contribution to our profession.

The cost of the reception is £22 per head. Please make cheques payable to 'Sian Munro's Retirement Fund' and send with full details of your name, address and contact number to: Sandra Barry, Centre for SLT, UWIC, Western Avenue, Cardiff CF5 2YB.

If you wish to contribute to a gift please add the amount of your donation to your cheque or, if you are unable to attend the reception, send a cheque for your donation alone.

We look forward to seeing you at this very special occasion

**SLT Team**

UWIC Centre for Speech and Language Therapy (tel: 029 2041 6889)

**1965 reunion plans**

Were you a 1965 graduate from Kingdon Ward? A reunion is planned in London. Suggested dates are 21 or 28 April 2007.



Contact Anne Stoneman (nee Shaw), email: [anne.arches@yahoo.co.uk](mailto:anne.arches@yahoo.co.uk) tel: 07808 1377 50 or Carol Rieley (nee Cubitt), email: [rieley@mistral.co.uk](mailto:rieley@mistral.co.uk) tel: 01444 482387

**Congratulations Photis**

Congratulations to Photis Garapis, SLT manager at Queen Mary's Hospital, Sidcup and acting SLT manager at Queen Elizabeth Hospital, Woolwich.

Photis was recently awarded the Thames Valley University Chancellors prize for 'Student's outstanding academic achievement and contribution to the learning and support of peers' as well as achieving an MA in Leadership in Health and Social Care with Distinction.

This award acknowledged Photis' gentle, but effective leadership skills and his ability to support and inspire others.

**Philippa Hardy**

Manager, Speech and Language Therapy, Kings College Hospital

**You know who you are**

I am delighted that the *Social Use of Language Programme* (SULP) is proving effective with so many children and it is good to hear that the material is now being used in many schools across year groups.

Unfortunately, however, it has come to my attention that the material is being photocopied on quite a substantial scale.

I must make it clear that this is an illegal infringement of copyright.

We do offer substantial discounts for bulk orders of the programme and if you are interested in further information, please do not hesitate to contact my office (tel: 01483 268825, email: [wendy.rinaldi@ntlworld.com](mailto:wendy.rinaldi@ntlworld.com)).

Please also contact me if you would like to discuss updates to the programme, including training.

**Dr Wendy Rinaldi**

Author/originator Social Use of Language Programme

**New ways of working: The RCSLT Managers' Conference 2007**

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managers in 2007

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NEWS IN BRIEF

**Stammering self-help**

The Cambridge Self Help Group for Adults who Stammer is holding an open day in Cambridge on 14 April. Dr Per Alm will present on the brain, emotions, and fluency. Other participants will include the British Stammering Association's Norbert Lieckfeldt, Cambridge PCT, and the Starfish and Maguire therapy programmes. Workshops will focus on self-help and self-therapy, and include alternate therapies such as yoga, singing and religion. Contact Robert Coe, tel: 01223 411339 or email: cambridgeselfhelp@hotmail.co.uk

**'Nobel Prize' for charity**

The Beacon Fellowship Charitable Trust is calling for nominations for the 2007 £30,000 Beacon Prize. Together with the Government's Cabinet Office, UBS Wealth Management and The Vodafone UK Foundation, the charity is urging the public to nominate individuals who have made a significant charitable contribution in giving time, money or skills to a specific cause. Nominations close 1 May 2007. Visit: [www.beaconfellowship.org.uk](http://www.beaconfellowship.org.uk)

**AHPF Research Forum**

You can now access the latest newsletter of the Allied Health Professions Federation (AHPF) Research Forum on the RCSLT website. The newsletter contains updates from the AHPF professional bodies and research news for allied health professionals. Visit: [www.rcslt.org/resources/research](http://www.rcslt.org/resources/research)

**RCSLT website links**

Did you know that the RCSLT website has a wealth of useful links for SLTs and support workers? With over 100 links by subject, featuring topics from augmentative and alternative communication to voice, and general links, from Amicus to the University College London's Department of Phonetics and Linguistics, this is an ideal place to visit for your speech and language therapy activities. Visit: [www.rcslt.org/resources/links](http://www.rcslt.org/resources/links)

# UEA appoints new professor

The University of East Anglia has appointed Sally Hartley as Professor of Communication and Health.

Based in the School of Allied Health Professionals within the Faculty of Health, Professor Hartley (pictured) leads a research interest group about 'Communication and Health'.

This explores research relating to the role communication plays in individual health and well being as well as in providing health services and information about health to the public.

Subjects of interest include examining the service/provider



interface; how effectively health professional communicate with their clients/patients; how health and scientific messages can be

communicated effectively across cultures; and how the International Classifications of Functioning and Disability is used to address the rehabilitation needs of people with communication disabilities.

Professor Hartley also maintains her international work in relation to the nature and effectiveness of community-based rehabilitation (CBR) and how this can address the needs of people with communication disabilities around the world.

She acts as an advisor to the WHO in relation to CBR, disability and rehabilitation.

# Celebrating Central's century

London's Central School of Speech and Drama (CSSD) has published a fascinating account of its history to commemorate its 100th anniversary.

*The Central Book* chronicles the first century of an extraordinary training school, founded by the indomitable Elsie Fogerty in 1906 – now part of The University of London and the UK's designated centre for excellence in training for theatre.

From one room in the Royal Albert Hall, Elsie Fogerty built her small school into a world-famous

theatre training institution.

Such was her vision that Central was also the *alma mater* of many of the country's leading speech and language practitioners.

Within the School's first decade, its 'remedial speech' students had already begun working with patients in clinics, under Miss Fogerty's supervision.

By the 1940s, a separate speech therapy department had developed under the leadership of

the legendary, Joan van Thal, with the first specialist speech therapy training course recruiting its first students in 1945. The rest, as they say, is history.

Author, playwright, actress, teacher and director, Lolly Susi's masterful book follows Central through world wars and the ever-changing political climate, using not only some remarkable archive material but many personal accounts given to her by those intimately involved with Central's fortunes.

To order your copy of *The Central Book* (£20+ £2 P and P) tel: 0207 559 3997 or email: [j.fisher@cssd.ac.uk](mailto:j.fisher@cssd.ac.uk)



*The Central Book uses archive material and personal accounts by those intimately involved with Central's fortunes*

**Caroline Clark**  
Alumni officer CSSD

# APPG to fight for speech and language therapy services

All Party Parliamentary Group on Speech and Language Difficulties celebrates official launch

More than 120 invited guests with interests and expertise in speech and language therapy issues attended the launch of the All Party Parliamentary Group on Speech and Language Difficulties at the House of Commons on 14 March.

The APPG, supported by the RCSLT and chaired by John Bercow, MP, aims to raise awareness of communication disorders; highlight the importance of early intervention for children with speech and language problems and press for increased provision of specialist therapy and teaching.

MPs and members of the House of Lords took time out from a busy schedule of voting on nuclear weapons and constitutional issues to meet representatives of the RCSLT and organisations, including the Prison Reform Trust, Basic Skills Agency, National Literacy Trust, Stroke Association and the National Autistic Society.

Opening the event, John Bercow said, "Communication is the core of all social interaction. People who suffer from speech, language or communication difficulties need early intervention and specialist help to overcome those difficulties.

"Overcome them early and there is every prospect of people with such difficulties going on to lead normal, constructive,

purposeful and successful lives.

"The APPG will fight to raise awareness of the issue and push Government for the services needed to help people live fulfilling lives and for the benefit of society as a whole."

"This is a pretty serious agenda and there is a lot of work to be done. Our objective is to bring these matters from the back of people's, including sometimes busy ministers' minds, to the front of people's, including busy ministers' minds ... raising the salience of speech and language issues in the educational and political debate."

Parliamentary Under Secretary of State for Care Services Ivan Lewis, MP, addressed the launch, adding, "The message needs to go out to leaders, managers and commissioners in PCTs and to some extent in social care and in education, that speech and language is not a marginal side show issue.

"It is right at the heart of *Every Child Matters*, this great term, that every child will truly matter if they have the speech and language that enables them to participate in their education and with their peers.

"I will seek to work closely with the APPG and the RCSLT to ensure speech and language difficulties, and the impact they have on people's lives, remain a government priority.

RCSLT CEO Kamini Gadhok said, "The establishment of the APPG is a significant step in placing communication disability firmly on the Government's agenda.

"We are delighted that parliamentarians have shown they realise the vital role communication plays in enabling people of all ages to



John Bercow (left) and Ivan Lewis address the APPG launch

maintain relationships, access education and contribute to society."

"By prioritising children with disabilities across children's services, including health, we will give these children most in need the best possible start in their young lives."

John Podmore, Head of Community Prisons and Transitional Facilities at the Home Office shared some of his 22 years' experience in the criminal justice system.

"I am delighted to be associated with work that is about early intervention, and the criminal justice system should be about early intervention," he said.

"If we are to reduce re-offending we must look at what lies at the heart of re-offending and that is social exclusion.

"Mental health is coming out clearly as a key component of social exclusion and we know from a whole range of data that many [young offenders] presenting with poor mental health will also present with significant communication needs."

Pembrokeshire and Derwen NHS Trust SLTs Yvonne Bruton-Miller and Amanda Rees were on hand during the launch to demonstrate how it might feel to try and communicate without the use of speech.



SLT Yvonne Bruton-Miller (left) and RCSLT Policy Officer Sarah Keegan spread the speech and language therapy word

**To receive details of future APPG activities and outcomes, email: [claire.moser@rslt.org](mailto:claire.moser@rslt.org)**

Photographs by Rod Leon

## NEWS IN BRIEF

### Jewish children's trust

Jewish children with Down syndrome will benefit from the launch of a new trust in London. Rabbi Michael Bernstein, the father of a child with Down syndrome, founded the Leads Trust to promote the language and educational achievements of Jewish children with the condition. The first of the trust's educational and awareness services and programs will enable any UK Jewish child with Down syndrome to receive specialist speech and language therapy.

*Jerusalem Post*

### Talking Point expands

I CAN, the children's communication charity, has expanded its *Talking Point* information website as part of *Make Chatter Matter Month*. *Talking Point* is a UK-wide postcode-searchable database that allows parents and practitioners to access local communication development services for children under five.

Visit: [www.talkingpoint.org.uk](http://www.talkingpoint.org.uk)

### Credit where it's due

Although, Dr Paula Leslie was involved in the setting up of the first UK Stroke Forum Conference, as part of UK Swallow Research Group (*Bulletin*, February 2007, p11), she would like to state that she had emergency dental work on the day of the conference and consequently did not present her session. Paula adds, "I'm sure it was lively but I can't take any credit!"

### In the picture

Disabled children will be better able to understand their experiences through a new story-based leaflet published by Scope. The *In The Picture* project has published *Celine's New Splints* – a leaflet telling the story of a young girl with ankle foot splints. "A story like *Celine's New Splints* immediately gives disabled children a narrative, and images with which they can identify," a Scope spokesperson said.

Visit: [www.scope.org.uk](http://www.scope.org.uk)

# Tributes to a children's 'champion'

The RCSLT is saddened to report the death in January of Peter Clarke, the first Children's Commissioner for Wales, aged 58.

Peter (pictured) paved the way as the first UK children's commissioner when he was appointed in March 2001, partly in response to the Waterhouse inquiry into abuse in children's home in north Wales.

During his years in office Peter spoke out on issues ranging from bullying, to smacking, to the welfare of children in care.

First Minister Rhodri Morgan said Peter had, "made an enormous contribution to the lives of children and young people in Wales in the past six years and many thousands have benefited, and will benefit in the future, from his work."



## Sign up now for the *Connecting for Health* annual conference

Places are going fast for the second NHS *Connecting for Health* annual conference for nurses, midwives healthcare professionals and practitioners, taking place at the QEII conference centre, London, on 1 May.

*IT: here and now* promises to provide delegates with the opportunity to learn more about the National Programme for IT and how it will deliver better and safer care, from a clinical and patient perspective.

The free conference will be an opportunity to hear how healthcare professionals across England

are using new IT systems within their roles, and how it has benefitted them and their patients.

There will also be an update on the progress achieved over the last year, and an opportunity to see live demonstrations of software packages.

An interactive session will also demonstrate key areas of the programme such as e-prescribing, e-care pathways and education, training and development.

**Visit:**

<http://etdevents.connectingforhealth.nhs.uk/753>

## Monument immortalises Roberta's achievements

RCSLT member Roberta Lees MBE is, "An outstanding person pushing forward the frontiers of speech and language therapy and teaching."

These are the words of RCSLT Vice President Baroness Michie of Gallanach, one of 1,000 women asked to write on a Scottish woman they thought had made, or was making a significant contribution towards Scottish life.

The collected sentences were converted into a porcelain sculpture and put on three stone



tablets for a permanent wall installation in the Scottish Parliament in Edinburgh.

After 40 years as an SLT, Roberta (pictured) has now retired. She was a lecturer and

then a reader at Strathclyde University where she facilitated international student placements, and has held management positions, including undergraduate programme coordinator, postgraduate course director and head of department in speech and language therapy.

Roberta was also been a valuable adviser to the RCSLT on stammering and an adviser to the British Stammering Association.

She received an MBE for her services to education in June 2005.

# RCSLT honours: it's nomination time

For the past 62 years, the RCSLT has given annual honours awards and to date there have been over 300 recipients

Anyone, from a newly-qualified therapist to an individual with many years of experience, can receive an honour, provided they meet the entry criteria.

There are three categories of award:

**Honours** are given for distinguished service to the RCSLT, for example as a member of Council, assisting in developing policy, or for representing the RCSLT with other professional and allied organisations.

Honours also acknowledge excellence in service to the benefit others, for example as an officer or member of a recognised specific interest group, or as an outstanding clinician

Honours recipients can include the initials Cert MRCSLT Hons after their names.

**Fellowships** are given to members for outstanding scholarship, in areas such as research and publishing; teaching; clinical



The 2006 RCSLT honours winners at the award ceremony in Edinburgh

expertise or management.

Fellowship recipients can use the initials *FRCSLT* after their names.

**Honorary Fellowships** are given to non- and overseas SLTs who have contributed outstanding services to the profession can receive these awards.

There are three categories:

- For distinguished service to the RCSLT, for example as a lay member on an RCSLT committee, assisting in policy or liaising with other professional organisations on behalf of College
- For distinguished service in promoting the profession, for example in the charitable sector or to the public, or in other

professional and allied organisations

- For distinguished service in, for example, research, teaching or clinical practice
- Honorary Fellows can use the initials Hon FRCSLT after their names.

An honours committee discusses the nominations and make recommendations to the RCSLT Council in early summer. The Council decides on the year's recipients at its summer meeting.

Nominations for this year's RCSLT Honours close on 27 June 2007. To nominate someone for an award, you must be a certified RCSLT member. Contact Bridget Ramsay for an information pack. Email: [bridget.ramsay@rslt.org](mailto:bridget.ramsay@rslt.org) or tel: 0207 378 3001

## Parents: make time to talk to your children

Parents spend so much time at work, watching television or doing housework that they do not make time to talk to their children, according to children's communications charity I CAN.

An I CAN poll of over 1,000 parents found half spent more than two hours a day watching TV and more than a third (36%) spent more than two hours doing housework.

Only 32% spent the same amount of time talking to the children in the home.

I CAN CEO Virginia Beardshaw said the results were concerning, but not surprising.

"There are so many demands put on us, particularly for us parents," she said.



"It is unrealistic for us to yearn for years gone by when we had more family time. 21st Century life is here to stay and we acknowledge this."

Clinical psychologist and television presenter Dr Tanya Byron said, "Communication skills... enable children to acquire

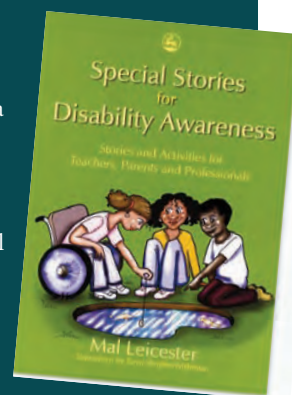
vital social skills and help to maximise their potential in all aspects of learning.

"Nursery rhymes, songs, stories and happy chatter provide the firm foundations for our excellent future communicators."

I CAN will soon launch their *Chatter Matters* DVD offering tips for parents on how to maximise conversations with children.

## April Bulletin book draw

RCSLT *Bulletin* readers can win a copy of *Special Stories for Disability Awareness* by Mal Leicester. To win your free copy, send your name, address and



membership number to April Book Draw, *Bulletin*, 2 White Hart Yard, London SE1 1NX. Entries close 13 April 2007. Only one entry per person.

The winner of February's draw is Fiona Deeney from Bradford. A copy of *The complete guide to Asperger's Syndrome* is on its way.

# Reflections on the HPC

In February, the Health Professions Council (HPC) welcomed the Government's White Paper on the future direction of the regulation of health professionals in the UK.

*Trust, Assurance and Safety, The Regulation of Health Professionals in the 21st Century* sets out reforms to modernise the system of professional regulation.

## Key changes include:

- measures to make regulators more independent, such as the appointment of council members
- measures to ensure healthcare professionals are objectively revalidated throughout their career and remain up to date with clinical best practice
- changing the standard of proof used in fitness-to-practise cases from the criminal standard to the civil standard with a sliding scale

HPC President Dr Anna van der Gaag (pictured) used the occasion of the HPC's response to talk to the *Bulletin* about the HPC and its relationship with SLTs and the RCSLT.

## Are SLTs interested in the HPC?

It seems fair to assume most SLTs have little or no interest in the HPC or its day-to-day business. However, the recent interest in the post of SLT member – there were 38 applications – was very encouraging. It suggests there are therapists who feel strongly that we need to be involved in the development of regulation.

## Why do SLTs need to engage with the HPC?

The HPC is the regulator and sets the standards of conduct and performance to which SLTs must adhere. There are statutory requirements to undertake continuing professional development (CPD) as well as the requirement to adhere to the standards of proficiency and conduct. We encourage engagement in the form of consultations and listening events and always ask registrants to let us know how we can improve our service.

## Is the relationship between the RCSLT and HPC important?

Yes. The professional body serves therapists

and the regulator protects the public, but those two objectives are not mutually exclusive. They provide a different but complementary emphasis, and both are equally important. A good example is CPD. The HPC has set standards on CPD to ensure professionals keep up to date. The RCSLT supports its members to maintain those standards.

## What are your key objectives as President?

Accessibility, analysis and dialogue are my three 'watchwords'. I would like the HPC to become more accessible to the public, professionals and other organisations. I want to see more analysis of the vast amounts of data HPC has on fitness-to-practise trends, CPD, education and training and standards. I also want to encourage dialogue and more mutual understanding on regulatory issues.

I want to see improvements in our governance so we are more 'fit for purpose' as a Council and can see and discuss our own strengths and weaknesses. I also want us to be better at involving the public in our decision-making processes, and would like to see more consistency across health regulation overall.

## What are your views on revalidation proposals?

I am much less convinced this is the right way forward for non-medical professions like ours. I believe a much more pressing priority – in terms of public protection – is bringing unregulated health and social care groups into a robust regulatory system. In our response to the Government's proposal on revalidation, we said we wanted to wait until the results of the first wave of our CPD audits before making a decision about the need for another layer of inspection.

## And the proposals for appointed versus elected Council members?

I am in favour of this. We already have appointed lay members of Council, and we have found their contribution invaluable. By moving to an appointed system for all members, individuals who have the right mix of skills and experience become part of the Council.



**“The recent interest in the post of SLT member – there were 38 applications – was very encouraging”**

They still bring their experience from their own profession, but they do not represent the profession in the same way. No single SLT could, in my view, honestly represent the views of all therapists.

The drawback of an elected system is that elected individuals may feel obligated to represent the views of a minority group from within a profession, rather than look at the bigger governance agenda and regulation in general.

**Visit:**  
[www.dh.gov.uk/PolicyAndGuidance/fs/en](http://www.dh.gov.uk/PolicyAndGuidance/fs/en) to read the White Paper

**Visit:** [www.hpc-uk.org](http://www.hpc-uk.org) to read the HPC's response

# Setting the standard for language assessments

*The Clinical Evaluation of Language Fundamentals – Fourth Edition UK*

*(CELF-4UK) and Clinical Evaluation of Language Fundamentals – Preschool Second Edition UK (CELF-Preschool 2UK)*, published by Harcourt Assessment, has seen a successful first year of publication.

Released last May, the *CELF-4UK* and *CELF-Preschool 2UK* can be used for the identification, diagnosis and follow up evaluation of language and communication disorders. The tools have already sold more

than 1,200 copies collectively.

This new approach to assessment provides a comprehensive solution for assessing the nature and extent of a child or adolescent's language difficulties.

The new and enhanced editions include fully updated UK norms based on a diverse standardisation sample and several new subtests.

For more information visit:  
[www.harcourt-uk.com](http://www.harcourt-uk.com) or tel: 01865 888188



## New website for Donaldson's College

Donaldson's College – Scotland's national school for hearing, speech and language impaired children – has launched its first comprehensive website.

The site contains sections on everything from admissions, educational specialists, British Sign Language classes and its new college site being built in Linlithgow.

Visit: [www.donaldsons-coll.edin.sch.uk](http://www.donaldsons-coll.edin.sch.uk)



## Journal discount for RCSLT members

SAGE Publications is offering RCSLT members a 30% discount off an individual subscription to *Child Language Teaching and Therapy*.

According to SAGE, *Child Language Teaching and Therapy* is a peer-reviewed journal with articles of high practical relevance on all aspects of spoken or written language needs of children.

Articles focus on practitioner research, action research, case studies and small-scale studies, together with papers discussing professional, theoretical, methodological or philosophical issues in the field of child language teaching and/or therapy.

Simply contact the subscription department and let them know the 30% discount is part of the offer specific to RCSLT members.

Tel: 020 7324 8701 or email: [subscription@sagepub.co.uk](mailto:subscription@sagepub.co.uk)

Visit: [www.sagepub.co.uk](http://www.sagepub.co.uk)



## Baby and Me DVD

*Baby and Me* is the first parenting DVD to be narrated in Arabic, Sylheti, and English, to help parents form a closer relationship with their babies from birth.

Hollywood actress Olivia Williams gave her support by kindly narrating the English version.

The DVD is inspired by SLT Liz Lowton and family psychotherapist Yvonne Bailey-Smith from Church Street Sure Start Local Programme, who work with multicultural families in the City of Westminster, London.

"When we looked at what visual information was available for families, we found there was nothing which properly reflected the community in which we work," Liz says.

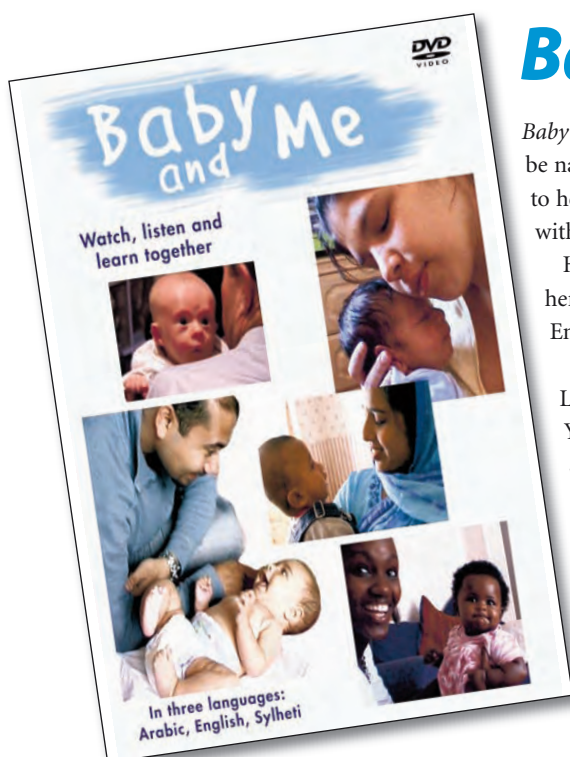
"Our experiences as practitioners are that sometimes parents are not aware of the different abilities of very young babies. Such lack of knowledge can lead to even less interaction where there's a child with special needs.

"This DVD shows a range of parent/carers being the experts in positive and responsive interactions with their babies."

*Baby and Me* contains important messages for non English-speaking parents living in this country and reflects the diversity of a modern UK.

There have already been enquiries for *Baby and Me* to be made available in Polish and Portuguese.

Purchase the DVD for £18.50, including postage and packaging, from: [www.socialbaby.com](http://www.socialbaby.com)



# Why do men become *SLTs*?

**Fiona McKinson** finds out why the few men in speech and language therapy became SLTs – and what they think will attract more men into the profession

Men have been largely absent from the ranks of speech and language therapy, traditionally accounting for between 1-2% of SLTs. There are currently only 294 men among the Health Profession Council's 11,459 registered SLTs (2.5%).

Research by Greenwood *et al* (2006) confirms that “white women” dominate the speech therapy profession and suggest that a possible explanation for this under-representation is because of poor awareness and understanding of speech and language therapy as a profession.

Boyd and Hewlett (2001) considered the dearth of men in speech and language therapy by looking at undergraduate speech and language therapy students.

They concluded, given the few men then in training, that there was little prospect of a change in this situation in the near future.

Given this apparent state of inertia, the RCSLT used its continuing professional development network to ask those men who had taken the plunge why they had entered the world of speech and language therapy.

## **Men speak out**

A number of themes emerged from the responses we received.

Many men entered the profession having had another career, and many had had exposure to situations where they had seen first hand the benefits of speech and language therapy.

For example, **Ben Vickerstaff**, 33, has been an SLT for 11 years. He works in adult acute dysphagia with one other male SLT.

“I was interested in speech and language therapy because my mother worked in a

school for children with learning disabilities," Ben says.

"We lived opposite a Victorian asylum, and many of my 'friends' were adults with learning difficulties who were integrating with the local community."

**Patrick Kelly**, 57, has been an SLT since 1986. "I got into the field because I have stammered since three years of age and have had a huge amount of therapy on and off for 50 years," Patrick says.

Like many other respondents, Patrick also describes some of the barriers he faced when entering the profession.

"In my first post as a therapist in Bury I arrived on my first day at the health centre and the building was being painted and decorated.

"I approached the centre manager and she assumed I was one of the painters and directed me to the contractors' room. She thought I was joking when I told her I was the new SLT."

**Andrew Green**, 32, has been working as a paediatric SLT for six years.

"Luckily I was able to observe a male SLT before I made my decision to do speech and language therapy at university, which convinced me that it was an interesting career," Andrew comments.

"I remember having to attend a careers talk at the sister girls school in order to find out about speech and language therapy.

**Mark Jayes**, 36, has been a specialist SLT for three-and-a-half-years, working with adults.

Mark says, "I had studied language and psychology, had taught language and been a trainer in communication skills and done voluntary counselling work.

"I wanted to develop a career in the NHS, and speech and language therapy seemed to bring together all my professional experience, skills and interests."

**Martin Smedley**, 52, is a paediatric principal communication pathologist. He says, "I became interested in speech therapy while studying linguistics.

"In 1977 I wrote to the then National Hospitals College of Speech Sciences (now University College London), but was politely informed that only women were accepted by the college."

**Neil Thompson**, 44, has been a paediatric SLT for 11 years.

"I was looking for a practical career which would involve my interest in languages. I was also unsatisfied with my previous career – electronic design – which lacked the variety and contact with people that speech and language therapy has," Neil comments.

"When I first wrote for information from the college about a career as a speech and language therapist (back in 1990), the letter I received back began 'Dear Miss Thompson...'

**Colm O'Keeffe** is Principal SLT in Mental Health at the South London and Maudsley Foundation Trust. He qualified in 1992.

"My father had a stroke in the 1970s and I've had personal experience of the impact of communication disability. I considered training as an SLT or a clinical psychologist, but opted for speech and language therapy as it involved more direct face-to-face interventions," Colm says.

**Antony Aricci**, 40, qualified in 2004 and says, "I chose speech and language therapy after a process of elimination. I originally considered physiotherapy, but decided it wasn't exactly what I wanted. So, on the advice of my wife I spent a couple of days with an SLT and loved it."

### How can we encourage more men to join the profession?

Like many other commentators, Greenwood *et al* (2006) conclude that in order to increase the gender diversity of SLTs, the profile of the profession needs to be raised – with increased awareness of the degree level courses, the scientific and evidence-based nature of the work, and improvements on current salary scales.

There are a number of initiatives, such as the Aimhigher Healthcare Strand, which aim to promote recruitment for, and widen participation in, the health professions.

On 8 February Aimhigher ran an event in Truro, Cornwall called 'Boys into Health'. Robin Simpson-Green, one of the College of St Mark and St John ex-students and now working as a therapist in Plymouth, starred in a video shown at the event as a role model example of a young man who has recently joined the profession.

RCSLT CEO Kamini Gadhok adds, "Encouraging men to join speech and language therapy needs to be addressed

through looking at the whole organisational system – including public perceptions, training recruitments, work experience and career development."

A Department of Health spokesperson says, "We recognise the significant value of speech and language therapy to children and adults with speech, communication, language and swallowing disorders.

"While there is no specific target for these services, SLTs make a significant contribution to national priorities, such as achieving access targets, improving the patient experience with better discharge from hospital, improving public health and improving educational outcomes.

## In Australia, they have a SIG 'Blokes in Speech Pathology'

"It is for primary care trusts in partnership with local stakeholders to determine how best to use their funds to meet national and local priorities for improving health and to commission services accordingly.

"The Department has no specific policy initiatives as such in encouraging more male SLTs.

"However, the Allied Health Professionals Federation with funding from the DH recently published *Picture yourself as one of these*, which promotes the role of SLTs among young people and gives an example of a male trainee SLT enjoying his training.

"The RCSLT's recent publication *A career in speech and language therapy* also profiles a male SLT student.

"Both of these documents will help raise the profile of the profession and increase awareness of the degree level courses, the scientific, evidence-based nature of the work, and current salary scales in order to increase gender diversity of SLTs.

"The NHS careers website also has information promoting the pay and benefits of SLTs, which should also increase awareness amongst prospective male trainees."

**Table one: possible measures to encourage more men into the profession**

Problems	Possible solutions
<ul style="list-style-type: none"> <li>■ Lack of awareness of speech and language therapy among boys</li> </ul>	<ul style="list-style-type: none"> <li>■ Early/targeted recruitment via careers services etc</li> <li>■ Workshops in schools with male sixth formers to give them the real picture</li> <li>■ Promote language teaching and linguistics in schools so more boys become interested</li> <li>■ Offer mentor support by male SLTs, where possible, to prospective applicants</li> </ul>
<ul style="list-style-type: none"> <li>■ Historically seen as a profession with poor pay and costly training</li> </ul>	<ul style="list-style-type: none"> <li>■ Promote speech and language therapy as the excellent career opportunity it is</li> </ul>
<ul style="list-style-type: none"> <li>■ Perceived poor working conditions. Seen as a role with little opportunity for advancement and under- recognition of achievements. Lack of respect from within employing organisations</li> </ul>	<ul style="list-style-type: none"> <li>■ Increase the profile of the profession within NHS organisations. Emphasise the benefits of successful speech and language therapy intervention for other professional groups</li> </ul>
<ul style="list-style-type: none"> <li>■ Perceived female stereotype</li> <li>■ Working with children and communication seen as 'feminine'</li> </ul>	<ul style="list-style-type: none"> <li>■ Image rebrand (eg communication therapists) to counter existing stereotypes</li> <li>■ Target publicity to highlight the evidence-based, scientific analytical nature of our work and the variety of other clients/professionals we work with</li> <li>■ Provide more positive images of male SLTs in the media</li> <li>■ Set up a working party to try to come up with better ideas</li> </ul>

**What do our men think?**

We asked our male SLTs for their views on how to get more men into the profession. Their replies are summarised in table one.

**Colin Barnes**, 41, a Specialist SLT in elderly mental health, says, "I think College does a good job already promoting a balanced image of RCSLT.

"When I started, *Bulletin* especially was more full of pictures of twin set and pearls. I don't think it's about getting men or women, but identifying people who are suited to the job."

**Gino Hipolito**, 30, has been an SLT for two years following his studies in Australia.

"We should highlight job satisfaction through face-to-face contact with clients/patients," Gino says.

"This has been a common theme in the reason for males to join speech and language therapy in the McAllister and

Neve (2005) study."

"In Australia, they have a SIG 'Blokes in Speech Pathology'. You could possibly start one up and use it as a think-tank to come up with a strategic plan to recruit more males."

**John Swan**, 36, qualified in 1996. "I have been pleased to see posters and things like *Bulletin* front covers showing photos of SLTs of both sexes, and I think this is more male effective. I think our professional profile has improved enormously in the 10 years since I qualified."

**Wayne Wilson**, 52, has been an SLT for seven-and-a-half-years. He says, "We need exposure. Not in a speech and language therapy male nude calendar or anything, but more targeted publicity.

"Perhaps there should be joint information packs on all of the bio-medical/therapy degrees, eg information from all the allied health profession groups together."

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**Acknowledgement:**

Many thanks to all the SLTs who replied to our questions. We had far too much information to use here, but we will pass on your comments to the RCSLT Membership and Communications Board.

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# Group communication

**Kit Barber** discusses her research into the benefits of group communication training tailored to the partners of clients with aphasia

The North East Wales speech and language therapy service has provided communication therapy groups (CTGs) since 1997.

The groups offer people with aphasia the opportunity to engage in functional communication and use the Supported Conversation for Aphasic Adults (SCA) approach (Kagan, 1996 a&b).

Most group members are community outpatients, but inpatients also attend when appropriate. Clients tend to join the groups when consolidation of identified functional communication strategies is required.

Two groups cater for mild to moderate aphasia and two focus on moderate to severe aphasia. A technical instructor (TI) runs each group under my guidance.

We had been aware for some time that communication strategies used by the clients in the groups and suggested carer/partner communication strategies were not generalising into the home or other functional settings.

We felt this was due partly to limited liaison with the partners (a review with the client and partner occurred every six months), but primarily due to the partners needing 'hands-on' communication skills training.

There has been a shift from the medical to the social model of disability in aphasia treatment.

Speech and language therapists recognise that to achieve optimal return of function and well being, the client cannot be treated in isolation, but must be treated alongside those people with whom they communicate on a daily basis.

Since untrained conversation partners can hinder effective communication (Kagan, 2001), the value of training partners on a one-to-one basis in the home setting has been firmly established.

However, few studies have investigated the advantages of providing tailored communication training in the group setting.

I decided to investigate what benefits such



*Clients improved their general interaction skills once their partners had received training*

training would have for the partners of clients who attended the moderate to severe CTGs, since these clients generally need the full range of supported conversation techniques.

I hoped communication training tailored to the individual, but delivered in a group setting, would improve the partners' communication skills and level of well being, and that this would lead to clients' improved functional communication and well being.

## Project outline

Nine clients and their partners took part. I videoed the natural conversation between each couple at home, before and after a 10-week communication training programme.

I used the pre-training video information to set personal goals for each partner to work on during and after the once weekly 90-minute training sessions.

The two carer training groups (containing five and four partners, respectively) took place alongside the CTGs – eliminating concerns about arranging alternative care for clients during the training period.

Participants completed 'Well Being' questionnaires (partners and clients) (Zigmond, 1983; Hilari, 2002) and a self-devised questionnaire about aphasia (partners) before and after the training programme.

The video data analysis measured the partner's skill in acknowledging and revealing the client's competence, the amount each client participated in conversation (Kagan, 2001) and concepts from Supporting Partners of People with Aphasia in Relationships and Conversation (SPPARC) (Lock, 2001), which targeted specific communication behaviours relevant to the partners taking part.

Finally, an independent SLT assessor experienced in using SCA examined the video data in order to minimise bias.

I used SCA and SPPARC because they focus directly on the collaborative nature of communication, highlighting the carers' responsibility to support their partners during conversation.

The training aimed to provide the carers with as much 'hands-on' experience and support as possible. Sessions included role-play exercises, personalised video analysis and feedback and discussion.

Wherever possible, I provided carers with personal and general goals to work on. The personal goals were informed by each carer's personalised video extracts and reflective accounts of interactions at home.

The training incorporated handouts primarily from SPPARC and video footage from SCA (Kagan, 1996b), SPPARC and the CTGs.

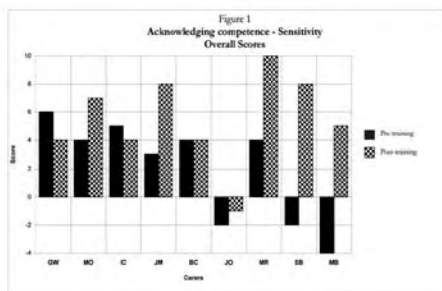
I found improvements not only in the partners' interaction skills following the training, but also in the clients' general interaction skills.

The partners made the greatest overall improvement in acknowledging competence through sensitivity to the client (figure one).

This involved communication behaviour improvements, such as 'not interrupting the client', 'not insisting on the correct target' and 'using passing turns'.

Interestingly, the partners made greater improvements with the more negative communication behaviours, such as the first two examples above.

Although the partners did show



improvements with communication behaviours that revealed competence (eg, encouraging the client to use compensatory communication strategies), the gains were not as significant as the improvements with communication behaviours that acknowledged competence.

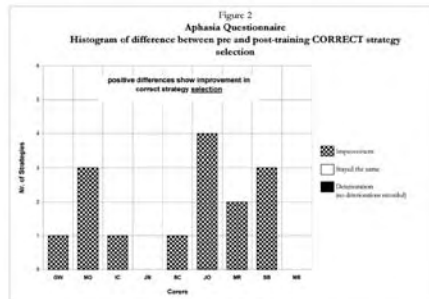
I believe the partners found it easier to stop or reduce existing negative communication behaviours than to adopt new communication behaviours, since the latter would require more time, practice and confidence.

The independent assessor identified most of the post-training video extracts correctly. For example, she identified when seven out of nine partners had received the training.

She also found more changes occurred with the behaviours that acknowledged competence. For example, she noted that many clients produced longer turns and initiated more when the partners had changed their communication behaviour, ie they left more gaps and did not interrupt.

The post-training aphasia questionnaire showed the carers had increased their awareness as to which communication strategies were helpful when communicating with their partners (figure two) and which were not (figure three).

I was unable to draw any definitive

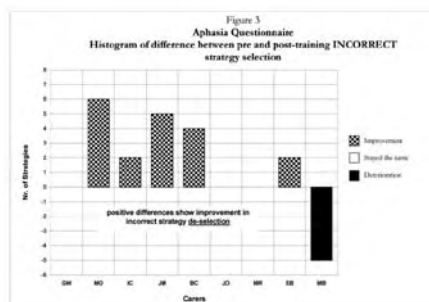


conclusions from the well being questionnaires, because it was impossible to prove that any improvement in client or partner well being was directly linked to the communication training, given the presence of multiple, uncontrolled variables which also had the potential to affect well being.

The clients improved their general interaction skills (eg equal participation/initiation/maintenance) once partners had received training.

For example, clients significantly reduced 'giving-up' during interactions. This could be linked to the carers supporting their partners better in their interactions.

The CTG TIs also observed informally that six clients improved their general interaction skills, and all of the clients improved their spontaneous communication strategies in the group setting.



The partners generally improved in achieving their allocated personal goals. This suggests that tailored training in a group format is beneficial. According to their feedback, none indicated they would have preferred training on a one-to-one basis.

The carers felt it would have been helpful to receive training soon after their partner was diagnosed with aphasia and reported the training had improved their aphasia knowledge and how to support conversation better with their partners. They also said it provided them with support.

Most partners, including those with long-standing experience of cerebral vascular

accident, reported they enjoyed the peer support and indicated the group reduced feelings of isolation, promoted problem solving, helped to share experiences, gave greater understanding and the opportunity to learn from one another.

Several partners wished to attend a post-training support group to maintain the established support network.

## Future developments

We need to formalise carer training so carers automatically receive communication training alongside direct client intervention.

Training the partners of CTG clients in a group format has benefited both the partner and client. It can potentially reduce one-to-one therapy and CTG time.

Speech and language therapists routinely advise carers on how to achieve effective, natural interaction with their partners, but in order to modify communication strategies consistently, carers also need designated, ongoing training sessions where they can practise strategies in a supportive environment with their peers.

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# EARLY INTERVENTION PROGRAMMES: service implementation and evaluation

**Deborah Gibbard** discusses the effects of developing early intervention programmes for pre-school children with language impairment

In 2002, the Portsmouth City Teaching PCT Speech and Language Therapy Department changed its working practice for pre-school children with speech and language difficulties.

Our aim was to implement current research evidence, ensuring that any prospective change of practice was effective, reduced local waiting times and was acceptable to local users.

This article aims to represent service evaluation to date.

In order to be able to plan for any change in practice it was essential to know in detail what our current practice was across the wide geographical area covered locally.

To this end, we carried out an audit involving all paediatric SLTs. We collated information on levels and frequency of intervention for pre-school language impaired children.

Following collation and analysis of results, we found very few children were receiving intervention more frequently than at three-monthly intervals.

Most pre-schoolers were being seen for three- to six-monthly review appointments, with verbal advice given on how to encourage language development.

Following this audit, we developed new intervention programmes for pre-school children with language impairment and instigated a change in the model of service delivery.

Using the evidence available, we aimed to increase the frequency of intervention children received (Glowgowska *et al*, 2000), use indirect intervention (Law *et al*, 1998) and use a group model of intervention (Gibbard, 1994; Gibbard, Cogan and

MacDonald, 2004).

Over the course of 12 months, we developed early intervention programmes (EIPs), based on the type and severity of language impairment.

Each EIP takes between three and six months to deliver and is delivered through indirect parent group intervention.

We have developed a rolling programme of EIP implementation. One of each type of EIP is offered in each geographical area of the trust on a termly basis.

All geographical areas are included, spanning a wide range of socio-economic areas. Local Sure Start projects support attendance, where possible, by providing parents with transport.

Any child whose parent is unable to attend is offered a review appointment (as was the situation prior to the change in service delivery).

Evaluation is ongoing and includes pre- and post-intervention assessment of children's language development, and collation of parent's perceptions and views.

## Parents' perceptions

The following represents the views of 147 parents completing an EIP group.

On completion of each EIP course, we asked parents to complete a questionnaire, giving their opinions around the following topics:

- Practical issues and group intervention
- Advice given and language targets set
- Achieving language aims at home
- Impact of the training
- Understanding of language development and support gained

We asked parents to rate a set of statements



*Early intervention programmes develop children's language skills effectively while providing early and timely intervention*

under each topic from 'strongly agree' through to 'strongly disagree'.

Open questions also gave them the opportunity to raise other issues and comment on their perceptions of the service.

The following figures represent the views of parents agreeing or strongly agreeing with statements.

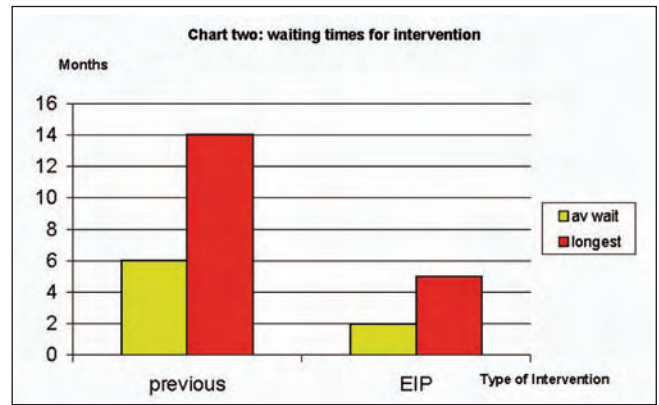
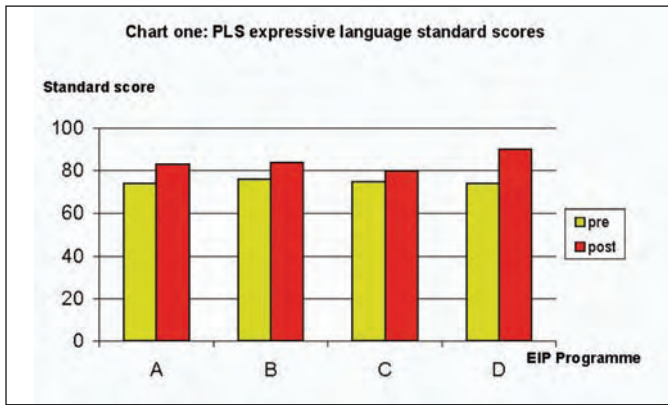
In the first section of the questionnaire, parents gave their views around group intervention in general and practical issues such as location and times of sessions:

- 122 (83%) found the location of the course convenient
- 115 (78%) found the timing convenient
- 146 (99%) felt it was easy to raise their concerns during the sessions
- All indicated it was easy to share ideas with other parents during the sessions

In the second section of the questionnaire, parents rated statements about the advice given and language targets set in the EIPs:

- 124 (84%) felt the advice they received was appropriate
- 122 (83%) felt it was easy to apply advice received to their child
- 141 (96%) indicated it was easy to understand the targets set
- 134 (91%) indicated it was easy to report on their child's progress

In the third section, parent's rate statements around achieving the language or



communication aim at home:

- 131 (89%) felt it was easy to carry out activities for the aims set
- 132 (90%) indicated it was easy to fit targets into daily routines
- 138 (94%) felt it was easy to adapt suggested activities to their own child's interests

In section four we asked parents to rate statements around the impact of the training:

- 126 (86%) felt there was a significant improvement in their child's language
- 135 (92%) felt there was an improvement in their child's communicative ability
- 97 (66%) felt their child had attained all targets set
- Of the other 50 (34%), 46 (92%) indicated they were confident in continuing to work on the targets at home

In section five, we asked parents to rate statements relating to their general understanding of language development and the level of support they felt from participating in a parent group:

- 143 (97%) indicated there was a significant improvement in their understanding of the techniques used in promoting language development
- 141 (96%) indicated they had gained support in language and communication

Overall, the questionnaire results indicate a high level of acceptability and satisfaction with this model of service delivery for the parents who have attended.

### Childrens' language levels

We assessed children's language development pre- and post-EIP intervention using a range of measures, including a standardised assessment.

We also developed evaluation checklists for each EIP measuring the child's language post-intervention against the initial objectives set.

Table one shows the mean severity ratings for the children's expressive language levels both pre- and post-intervention on each EIP.

Chart one shows the scores on standardised assessment both pre- and post-intervention.

### Waiting times

Chart two shows the average and the longest waiting times for speech and language therapy intervention before and after the introduction of our early intervention programmes. Waiting times for intervention have reduced significantly.

### Conclusions

Our initial aims were to effect a change of service delivery that was effective, resulted in reduced waiting lists and was acceptable to local users

We have shown that EIP develops children's language skills effectively while also providing early and timely intervention.

Additionally, there are high levels of parent satisfaction for those attending EIP sessions.

As a department, we are working in collaboration with other professional

colleagues to try to support take-up rates and attendance even further.

Initiatives have included the provision of crèche facilities; evening courses; annual information sessions for other professionals working with these children; and the production of a poster to enhance awareness of EIP.

We have established an EIP planning group, which meets termly, and coordinates ongoing developments and improvements (eg, producing video clips to support sessions).

This group also coordinates annual training for all paediatric SLTs to ensure a cohesive departmental approach to service delivery.

We are continuing to evaluate results from ongoing EIP groups and plan more detailed analysis of results in the future.

**Dr Deborah Gibbard** – Chief SLT (Paediatric Language and Research), Portsmouth City Teaching PCT  
Email: Deborah.Gibbard@ports.nhs.uk

**Table one: mean severity ratings for the children's expressive language levels**

EIP	Pre-intervention severity rating	Post-intervention severity rating
A	moderate	mild
B	moderate	mild
C	moderate	mild
D	moderate	within normal limits

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# Sharing the learning

**Rena Lyons and Libby Kinneen** describe the establishment of a new degree programme in speech and language therapy

A new department, offering a four-year BSc. (Hons) degree in speech and language therapy, opened in the National University of Ireland, Galway, in February 2003. The first cohort of 25 students started the programme in September 2003.

While the primary objective of any professional programme is to prepare the student for the realities of professional practice, there is relatively limited literature on the process of becoming an SLT (Brumfitt, Enderby and Hoben, 2005).

There are particular challenges in relation to the clinical education of SLTs in training, including changes in the workplace and the standards required by accrediting bodies (McAllister, 2005).

An additional challenge in Ireland was an acute shortage of practising SLTs, resulting in tiredness and burnout, coupled with a 328% increase in the number of SLTs in training – all requiring clinical education.

We will describe the journey of establishing a new degree programme in speech and language therapy in terms of an action research process in which the cycle is continuous and iterative.

Coghlan and Brannick (2001) outline four stages in the cycle: diagnosing, planning, taking action and evaluation.

We used an organisational development (OD) approach, which aims to achieve planned system-wide change.

A core principle of OD is that people support change they help to create (Beckhard and Harris, 1987).

We considered the process by which the programme was developed was as important as the outcomes in terms of engendering a sense of participation, inclusiveness and shared ownership.

Brumfitt, Enderby and Hoban (2005) highlight the importance of involving both educators and professional partners in the education process:

*“The changing nature of the role of the*



*There are particular challenges in relation to the clinical education of SLTs in training*

*professional, the continuing development of evidence as related to speech and language therapy, as well as the modernisation of health services, necessitates continuing communication between training establishments and service managers to ensure that curricula are developing iteratively.” (Brumfitt et al, 2005: 155).*

The first step of the journey was to establish a set of principles that would underpin the development of the programme:

- Adopt a partnership approach
- Respond to the needs of a modern and fast-changing health service
- Promote interdisciplinary and interprofessional understanding through shared learning

- Promote best practice in teaching and learning
- Promote student-centredness
- Focus on quality
- Promote a research culture

## **Involvement of stakeholders**

The next step was to identify key internal and external stakeholders who needed to be involved in the process.

The internal stakeholders included SLTs in training, core staff, teaching staff in related departments, and other administrative services in the university.

Core staff were intrinsically involved in all stages of planning and designing the curriculum.

One of the ways we achieved an integrated approach was to organise facilitated team-building sessions.

These focused on developing a values-based mission statement, role clarification, reviewing the learning each year, developing an action plan based on the findings, and personal development planning for each staff member.

Our learning was that we did not have a shared set of values or an articulated statement of our vision and how we were going to achieve it.

Subsequently, we created the following mission statement:

*“To prepare speech and language therapists in training to become competent clinicians by providing an environment which allows them to explore theory and practice related to communication and swallowing disorders, with an emphasis on lived experiences and life-long learning.”*

Byng, Cairns and Duchan (2002) argue that a values-based framework allows for an ongoing process of checking and rechecking decisions at all levels of activity against an agreed-upon set of values, providing a framework to examine how fundamental practice decisions are being approached.

Our mission statement provided an important reference point for all of our work including planning, recruitment of new staff, teaching, research, and evaluation.

Reviewing the learning each year of the programme, in a facilitated session, was also very useful in that it allowed us to stand back from our busy schedules, reflect on what we were doing well, what we needed to change, and to develop a detailed action plan for each year.

In addition, we forged strong links with other departments in the university who provide teaching to our students.

We were aware this new programme would place additional demands on departments, which were already overstretched.

Student evaluations provided valuable data to inform changes to the developing curriculum.

### Integration of internal and external stakeholders

Partnership with external stakeholders – eg health service providers, professional bodies, SLTs, clients, and SLTs in training – was essential in the design and implementation of

the programme.

We were aware of the contribution individual stakeholders could make to the programme, but in order to ensure a whole-systems approach we designed structures and processes which would facilitate internal and external partners to work together as closely as possible.

To meet the challenge of this integration, four new committees were designed and established in the first year – the programme, clinical placement, strategic planning group and staff-student committees.

Each committee was made up of core staff, internal stakeholders including SLTs in training and external stakeholders.

### Summary of learning

The value of partnership. We found there is real value in involving others in all aspects of the programme.

Although maintaining partnerships with a wide variety of stakeholders can be time-consuming and challenging, we believe the benefits far outweigh the disadvantages.

We are now in the fourth year of the programme and clinicians continue to be actively engaged in both committees and clinical education.

**The need for continuous evaluation.** Feedback from staff, therapists, and SLTs in training has resulted in continuous modification and improvement to the programme.

**The importance of teamwork.** Many staff in the Department of Speech and Language Therapy are new to the academic world and are on a steep learning curve.

We were anxious to ‘get it right’ and needed to adopt a ‘learning’ rather than a ‘performing’ approach.

This has given us the courage and freedom to ask for help when we need it, to make mistakes and learn from them, and to tolerate some discomfort and conflict.

We have learned that it is important to make time for team building. It has been very useful to have an outside facilitator with a background in OD to facilitate team building as it brought an external perspective to our team dynamics.

Having a shared mission statement provided us with an identity, a focus point, and a mechanism for auditing and evaluating the programme.

**The need to make time for planning and**

**coordination.** It has been necessary to allocate considerable amounts of time to planning to ensure smooth coordination of all aspects of the programme.

There have been many deadlines to meet and we have had to prioritise tasks, develop a detailed project plan, and allocate responsibility for completion of tasks.

This OD approach allowed us to ‘unlearn’ our old ways of doing things and ‘relearn’ new ways.

In doing so we developed the ability to solve our own problems through the process of taking action and creating knowledge to bring about continuous improvements.

The journey to date has challenged us to bring our values to life as we continue to reflect on our own lived experience and promote lifelong learning.

We are looking forward to the next steps in this exciting journey.

**Rena Lyons** – Department of Speech and Language Therapy, National University of Ireland, Galway, Ireland

**Libby Kinneen** – Department of Organisational Development, Health Service Executive Western Region, Merlin Park Hospital, Galway

#### References:

- Beckhard R, Harris R. *Organisational transitions: managing complex change*. Wokingham, England: Addison-Wesley, 1987.
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- Coghlan D, Brannick T. *Doing action research in your organisation*. London: Sage Publications, 2001.
- McAllister L. Issues and innovations in clinical education. *Advances in Speech-Language Pathology* 2005; 3:7, 138-148.

#### Notes:

We refer to students as speech and language therapists in training thanks to the influence of Anne Parker, University College London. ‘Sharing the learning’ comes from McAllister 2005.

# Any Questions?



Want some information? Why not ask your colleagues?

Email your brief query to [anyquestions@rcslt.org](mailto:anyquestions@rcslt.org). The RCSLT also holds a database of clinical advisers who may be able to help. Contact the information department, **tel: 0207 378 3012**. You can also use the RCSLT's website forum to post your questions or reply to other queries, **visit: [www.rcslt.org/forum](http://www.rcslt.org/forum)**



## Stammering and Down syndrome

Any experience of stammering therapy in adults with Down syndrome? The client is also trilingual.

**Emma Shah**

EMAIL: [amoi@iconnect.co.ke](mailto:amoi@iconnect.co.ke)



## Students with ASD

Do you have contact information or recommendations for OTs working with students with ASD? We want to develop training/advice on sensory integration strategies for school staff in a special needs school for primary and secondary pupils.

**Fionnuala O'Driscoll**

EMAIL: [fionnuala.o'driscoll@wf-pct.nhs.uk](mailto:fionnuala.o'driscoll@wf-pct.nhs.uk)



## Wedding vows

Do you know of pictorial or simplified versions of the above for adults with learning disability?

**Dr Daphne Banat**

TEL: **0118 946 9918**

EMAIL: [Daphne.Banat@berkshire.nhs.uk](mailto:Daphne.Banat@berkshire.nhs.uk)



## SLTs and teachers of the Deaf

Information wanted on positive approaches to developing good working relationships between SLTs and teachers of the Deaf who use primarily an aural/oral approach. Especially with regard to 0 to five-year-olds with profound hearing loss and little functional communication.

**Ann Matthews**

TEL: **01722 345571 Ext 3571**

EMAIL: [matthewssa@salisbury.nhs.uk](mailto:matthewssa@salisbury.nhs.uk)



## Hanen *It takes two to talk*

Has anyone created a shortened version and had it certified by the Hanen Organisation? Would you be willing to share it and feedback as to its effectiveness in comparison to the full-length course?

**Juliette Bicknell**

TEL: **01223 883638**

EMAIL: [juliette.bicknell@cambridgeshirepct.nhs.uk](mailto:juliette.bicknell@cambridgeshirepct.nhs.uk)



## Bilingual children

Would like to share ideas about how to best assess language skills in bilingual children.

**Anna Carlson**

EMAIL: [Anna.CARLSON@gloucestershire.gov.uk](mailto:Anna.CARLSON@gloucestershire.gov.uk)



## IEP targets

We are setting up an audit looking at, "Assessing the knowledge and ability of staff and families working with children with special educational needs to carry out IEP targets." Has anyone sent questionnaires to staff and parents? What format did you use? What were your findings?

**Sarah Williams**

TEL: **0776 9681 993**

EMAIL: [swilliams6@suttonlea.org](mailto:swilliams6@suttonlea.org)



## Paget Gorman

Our mainstream schools service (and language unit) for statemented pupils would value information on your experiences of using/trialling Paget Gorman.

**Karen Sobey**

EMAIL: [Karen.Sobey@hillingdon.nhs.uk](mailto:Karen.Sobey@hillingdon.nhs.uk)



## Communication following tumour removal

Do you have experience of working with children who have undergone surgery for the removal of a posterior fossa region brain tumour? Particularly interested in potential long-term effects on communication skills

**Denice Hyde**

TEL: **01785 811471 ext 160**

EMAIL: [denice.hyde@ssh-tr.nhs.uk](mailto:denice.hyde@ssh-tr.nhs.uk)



## Melodic intonation therapy

I understand the basic premise of this approach, but wonder if you know of any structured, published/unpublished therapy materials that will give me an idea of how to carry out the therapy?

**Karen Shuttleworth**

TEL: **0191 387 6322**

EMAIL: [karen.shuttleworth@cddah.nhs.uk](mailto:karen.shuttleworth@cddah.nhs.uk)



## Pictorial menus

Have you been involved in the provision of picture menus in a hospital setting? Keen to hear about successes, problems and solutions.

**Alison Trafford**

TEL: **0116 258 4075**

EMAIL: [Alison.Trafford@lcrpct.nhs.uk](mailto:Alison.Trafford@lcrpct.nhs.uk)

**Do you work with deaf children or adults?**

Cued Speech – complete spoken language through vision – gives real-time access to the phonemes of spoken language. Find out more from registered charity Cued Speech Association UK. Visit: [www.cuedspeech.co.uk](http://www.cuedspeech.co.uk), email: [info@cuedspeech.co.uk](mailto:info@cuedspeech.co.uk) tel: 011803 832784

**Newly Qualified SLTs**

'Developing therapy strategies and practical skills for working with children who have speech, language or communication difficulties' One-Day Workshop 27th April 2007. At Christopher Place, London NW1 1JF Cost: £80 (inc. sandwich lunch) [www.info@speech-lang.org.uk](http://www.info@speech-lang.org.uk) or call: 020 7383 3834

**Asperger meets adolescence**

27 April, Northampton; 18 May, Cardiff; 25 May, Slough; 15 June, Leeds; 22 June, Brighton. Understanding and managing the social and learning behaviours of young people with Asperger syndrome. Practical strategies for professionals working in secondary/FE settings. Contact Makesense tel: 0115 8497170 email: [glenn.major@ntlworld.co.uk](mailto:glenn.major@ntlworld.co.uk) visit: [www.makesensetraining.co.uk](http://www.makesensetraining.co.uk)

**April and June**

**Speech and Language Difficulties: the missing piece in the puzzle**

26 April, Northampton; 7 June, St Albans; 14 June Leeds  
Exploring the language difficulties in a range of SEN: ADHD, ASD, Dyslexia, SEBD. Practical strategies for professionals working in secondary/FE. Contact Makesense tel: 0115 8497170 email: [glenn.major@ntlworld.co.uk](mailto:glenn.major@ntlworld.co.uk) More dates at [www.makesensetraining.co.uk](http://www.makesensetraining.co.uk)

**Behind the Behaviour: communication difficulties and behaviour problems**

17 May Cardiff, 24 May Slough. Understanding and managing communication and behaviour in pupils with BESD and SLCD. A practical course for professionals working in primary/secondary/FE settings. Contact Makesense, tel: 020 7829 8692. [info@ichevents.com](mailto:info@ichevents.com), visit: [www.ichevents.com](http://www.ichevents.com)

**14-15 May**

**Paediatric tracheostomy for SLTs**  
For clinicians working with children with tracheostomies in hospital or community settings. Presentations and hands-on workshops. Vicky Thorpe and Lizzie Nash, GOSH, London. Cost: £245. Email: [info@ichevents.com](mailto:info@ichevents.com), tel: 020 7829 8692. Programme and registration: [www.ichevents.com](http://www.ichevents.com)

**22-23rd May; 22-23 November**

**Elklan total training package for 11-16s**  
Enables SLTs to provide practical accredited training to staff working in secondary school settings. Training material supplied. RCSLT, London. Therapist £395; teacher £295. Contact Elklan, tel: 01208 841450, email: [henrietta@elklan.co.uk](mailto:henrietta@elklan.co.uk) or visit: [www.elklan.co.uk](http://www.elklan.co.uk)

**22-23rd May; 22-23 November**

**Elklan total training package for school age children**  
Enables SLTs to provide accredited practical training for education staff. Training material supplied. Teacher-therapist teams welcome. RCSLT, London. Therapist £395; teacher £295. Contact Elklan tel: 01208 841450, email: [henrietta@elklan.co.uk](mailto:henrietta@elklan.co.uk), visit: [www.elklan.co.uk](http://www.elklan.co.uk)

23 May, 9am - 4pm (registration 9 - 9:30am)

**Cervical auscultation**

Dr Alison Stroud - cervical auscultation course for health professionals. County Hall, Cwmbran, near Newport, South Wales, NP44 2XH, easily accessible via Newport Railway Station. £90 including lunch. Contact Emma-Jayne Lewis/Jean Nutt, tel: 01633 623740, email: [emmajayne.lewis@gwent.wales.nhs.uk](mailto:emmajayne.lewis@gwent.wales.nhs.uk) or [jean.nutt@gwent.wales.nhs.uk](mailto:jean.nutt@gwent.wales.nhs.uk)

**24-25 May; 19-20 November**

**Elklan total training package for under-fives**  
Enables SLTs to provide accredited training to staff working in under-fives settings. Teacher-therapist teams welcome. RCSLT, London. Therapist £395; teacher £295. Contact Elklan tel: 01208 841450, email: [henrietta@elklan.co.uk](mailto:henrietta@elklan.co.uk) visit: [www.elklan.co.uk](http://www.elklan.co.uk)

**24-25 May; 19-20 November**

**Elklan total training package for verbal children with ASD**  
Enables SLTs to provide accredited practical training for education staff. Training materials supplied. Teacher-therapist teams welcome. RCSLT, London. Therapist £395; teacher £295. Contact Elklan tel: 01208 841450, email: [henrietta@elklan.co.uk](mailto:henrietta@elklan.co.uk) visit: [www.elklan.co.uk](http://www.elklan.co.uk)

**25 May**

**Cued articulation workshop**  
Learn the logic, signs and colour coding to augment your therapy with clients of all ages. Venue Hampton in Arden, Solihull - excellent transport connections. £85 (includes manuals and refreshments). Contact Diana Thomas, tel: 01675 442239; email: [diana.thomas@btinternet.com](mailto:diana.thomas@btinternet.com)

**6-8 June + follow-up day**

**Assessing British Sign Language development: production test (narrative skills)**  
Training course plus assessment pack. Minimum stage 2 BSL required. Contact Language and Communication Science, City University, London. Tel: 020 7040 8288, email: [compasscentre@city.ac.uk](mailto:compasscentre@city.ac.uk)

**11-15 June (10 am to 4.30 pm) + follow-up day 4 January 2008**

**Effective counselling skills for SLTs**  
Designed for SLTs working with any client group; based on Carl Rogers' person-centred approach; practical and experiential. Topics: developing therapeutic relationship, boundaries, and ways of responding, confronting, immediacy, self-disclosure and loss. Held at City Lit, central London. Cost £365. Contact Rachel Everard, email: [rachel.everard@citylit.ac.uk](mailto:rachel.everard@citylit.ac.uk), 020 7492 2579

**18-20 June**

**Introductory Bobath course for SLTs**  
A three-day course designed specifically for SLTs on the Bobath approach to assessment and treatment of children (and babies) with cerebral palsy. Will be of greater benefit to SLTs working with a paediatric cerebral palsy client group. The Bobath Centre, 250 East End Road, London N2 8AU. Fee £310. Contact Abby Stopler, tel: 020 8442 2262 or 020 8444 3355, email: [abby@bobathlondon.co.uk](mailto:abby@bobathlondon.co.uk)

**18-21 June**

**RCSLT-accredited paediatric ALD dysphagia course**  
Course can be offered as single days training or as a complete course. Quest Training, Birmingham. For further information, email: [jfrost@ukgateway.net](mailto:jfrost@ukgateway.net), visit: [www.quest-training.com](http://www.quest-training.com), tel: 0121 628 2813

**25-29 June**

PCP Association five-day foundation

**course in personal construct psychology**

Covers basic theory and a wide range of techniques. Leading to PCP Practitioner's Certificate. Contact Peggy Dalton, tel: 020 8994 7959, email: [daltonpcp@aol.com](mailto:daltonpcp@aol.com)

**29 June**

**Semantics, vocabulary and word finding**  
With Sadie Lewis. The underlying causes will be explored and therapy presented within a psycholinguistic framework. Practical ideas for hands on therapy and classrooms strategies. Discussion, case studies and resources. Worcester. Cost £120 (ASLTIP £105). Contact Sadie Lewis, tel: 01905 340014 email: [sadie@speelang.co.uk](mailto:sadie@speelang.co.uk)

**2-3 July**

**Lidcombe programme workshop**  
An early intervention treatment for stuttering that children enjoy and which is extremely effective. Presented by Mary Kingston and Polly Mitchell at The Apple House Oxford. Cost £290. Contact Polly tel: 01865 246845, email: [polly.mitchell@nhs.net](mailto:polly.mitchell@nhs.net)

**2-3 July**

**Basal ganglia speech disorders and deep brain stimulation 1st International Symposium**  
With J. Duffy, C. Dromey, B. Murdoch, L. Ramig and others. Video presentations and discussion on: measuring dysarthria, speech outcome following DBS, treatment for speech disorders following DBS. Institute of Neurology Queen Square, London: £120 - £80 for one day. Contact Elina Tripoliti, tel: 0207 8373611 ext 4492, email: [e.tripoliti@ion.ucl.ac.uk](mailto:e.tripoliti@ion.ucl.ac.uk) or [j.reynolds@ion.ucl.ac.uk](mailto:j.reynolds@ion.ucl.ac.uk)

**6 July**

**Mealtime assistants' course**  
For mealtime assistants working with

children with cerebral palsy who have eating and drinking difficulties. The course has a practical focus. Basic safety issues will be addressed in relation to positioning and handling. Feeding techniques will be practiced. The Bobath Centre, 250 East End Road, London N2 8AU. Fee £160. Contact Abby Stopler, tel: 020 8442 2262 or 020 8444 3355, email: [abby@bobathlondon.co.uk](mailto:abby@bobathlondon.co.uk)

**16-18 July**

**Hanen certification workshop**  
For SLTs on It Takes Two to Talk, The Hanen Program for parents. Hosted by The Ear Foundation. Nottingham. For more information, contact Anne McDade Tel/fax: 0141 946 5433, email: [uk\\_ireland@hanen.org](mailto:uk_ireland@hanen.org) or visit: [www.hanen.org](http://www.hanen.org)

**19-20 July**


**Hanen advanced workshop**  
For Hanen-certified SLTs on Target Word, The Hanen Program for parents of children who are late talkers. Hosted by The Ear Foundation. Nottingham. For more information, contact Anne McDade Tel/fax: 0141 946 5433, email: [uk\\_ireland@hanen.org](mailto:uk_ireland@hanen.org) or visit: [www.hanen.org](http://www.hanen.org)

**13-14 August**

**Maggie-Lee Huckabee Course**  
Dysphagia, diagnosis and rehabilitation. Aberdeen. Cost £180. Contact: [nan.mcbeath@arh.grampian.scot.nhs.uk](mailto:nan.mcbeath@arh.grampian.scot.nhs.uk)

**29-31 October**

**FEES course and advanced study day**  
Liverpool. FEES course 29-30 October. Cost £250. Advanced FEES study day 31 October. Cost £125 Tutor Dr Susan Langmore. San Francisco USA. Email: [susan.stringer@aintree.nhs.uk](mailto:susan.stringer@aintree.nhs.uk), tel: 0151 529 4986. Fax: 0151 529 4989



## Connect training for 2007

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<p><b>1st May 2007</b> <b>The good goal setting guide</b> Learn how to make choices and goals in stroke care more patient-centred, by gaining new techniques for listening and delivering what patients really want to achieve. Great for teams.</p>	<p><b>20th June 2007</b> <b>Groups Work</b> Increase your confidence in planning, running and evaluating group interventions for people with aphasia. Gain insights into the benefits and effectiveness of group therapy. Learn how to sell group based interventions to others.</p>
<p><b>13th June 2007</b> <b>Develop your communication skills and make a difference</b> For non-SLT colleagues, assistants and newly-qualified SLTs. Gain practical skills and techniques for improving interactions, involvement and really getting to know the person behind the aphasia.</p>	<p><b>5th July 2007</b> <b>Meeting the challenges of severe aphasia</b> Gain encouragement and inspiration to work creatively and positively with this client group. Obtain an insight into the everyday life and experience of people with aphasia. Explore a practical framework for goal setting.</p>

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Maria McDonnell, Connect, 16-18 Marshalsea Road, London  
Tel. 020 7367 0866  
email: [mariamcdonnell@ukconnect.org](mailto:mariamcdonnell@ukconnect.org)

## Acute Rehabilitation Lead Clinician Speech and Language Therapist

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We are looking for an innovative and dynamic therapist to co-ordinate the Trust's service to Acute Rehabilitation patients supervising a team of Speech and Language Therapists within the specialisms of Elderly Medicine, Acute General Medicine and Neurosciences and will be responsible for ensuring best clinical evidence based practice within this field.

You will join a Department of 11 speech and language therapists and support the SLT service to deliver a tertiary level service in the field of Elderly Medicine, Acute General medicine and Neurosciences.

You will have a minimum of 8 years experience of working with adults with acquired communication, voice and swallowing disorders in the field of Acute Rehabilitation. You will have specific competencies in all areas of Tracheostomy and Management of complex Dysphagia in this population. You will have extensive experience in use of FEES, FOTT and VDFS in the field. You will be committed to the specialism through evidence of continuing professional development and reflective practice. You will have a portfolio of experience in supervision, teaching/training, clinical audit and research. You will support the Head of Service and other Lead Clinicians to work towards the Therapy Services Strategy and yearly business plan.

For further information please contact Liz Williamson  
Head of SLT on 020 8383 3076.

For an application form call our Recruitment Line on  
0870 770 2393 quoting reference number T/386

## SPEECH AND LANGUAGE THERAPIST Acute Rehabilitation Service

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You will have a minimum of 5 years experience of working with adults with acquired communication and swallowing disorders. You will have experience in videofluoroscopy and will be able to participate in the rotation of this clinic across service. You will have skills in delivering interprofessional teaching and supporting junior colleagues.

Your continuing professional development will be supported through internal and external training. You will receive regular support and supervision from the Head of Speech and Language Therapy. You will have the opportunity to attend and contribute to the service's internal teaching programmes such as in-services and journal clubs, as well as, to Trust Clinical governance activities.

The department has excellent secretarial support, access to the Internet & email and to the Imperial College Library.

For further information please contact Liz Williamson  
Head of SLT on 020 8383 3076.

For an application form call our Recruitment Line on  
0870 770 2393 quoting reference number T/387

Closing date for applications: Friday 13th of April 2007

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## Peamount – Delivering Health and Social Care

Peamount offers a wide range of services for adults in Continuing Care and Rehabilitation within the following specialities: Age- related care, Neurological Disability, Intellectual Disability and Respiratory Medicine. We are currently seeking applicants for the following vacancies. Candidates must have excellent communication skills and be willing to work as part of an interdisciplinary team. Professional support is provided and continuing professional development is encouraged and facilitated.

### SENIOR SPEECH & LANGUAGE THERAPIST

This wholtime equivalent permanent post may be allocated wholly to Respiratory Medicine Inpatient and Outpatient Services OR be split to comprise 0.5 wte post for the Respiratory Medicine Service and 0.5 wte for the Intellectual Disability Service.

Applicants with an interest in both Respiratory Medicine and Intellectual Disability OR either one may apply.

#### Essential Requirements:

- A recognised qualification in Speech and Language Therapy
- A minimum of three years post qualification experience
- Candidates must be validated by the Department of Health and Children to work as a Speech and Language Therapist in the Republic of Ireland.

### BASIC GRADE SPEECH & LANGUAGE THERAPIST

The successful applicant for this wholtime permanent position will be afforded the opportunity to rotate through the various specialities.

#### Essential Requirements:

- A recognised qualification in Speech and Language Therapy
- Candidates must be validated by the Department of Health and Children to work as a Speech and Language Therapist in the Republic of Ireland.

Interested candidates should forward a letter of application and three copies of Curriculum Vitae to the Human Resources Manager, Peamount, Newcastle, Co Dublin, by closing date 16 April 2007.

For further information please contact Ms Premi Naidoo,  
Speech & Language Therapy Manager on 01 6010300 ext 428.  
email: [pnaidoo@peamount.ie](mailto:pnaidoo@peamount.ie)

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[www.pulsestaffing.co.uk/allied-health](http://www.pulsestaffing.co.uk/allied-health)

PHONE SPEECH  
RECRUITMENT PEOPLE

## Royal College of Speech and Language Therapists



### Notice to all *Bulletin Supplement* Advertisers

Advertisements to be published in the Mid April issue should be received by **Midday 2nd April.**

This issue is to be distributed on **15th April**  
Advertisements to be published in the May issue should be received by **13th April.**

This issue is to be distributed on **30th April.**  
All enquiries relating to classified advertising should

be directed to: **Katy Eggleton**

*at Ten Alps Publishing, 9 Savoy Street,  
London, WC2E 7HR*

Tel: 020 7878 2344 Fax: 020 7379 7155

Email: [tenalpspublishing.com](http://tenalpspublishing.com)

# CALLING ALL SPEECH THERAPISTS

NHS PASA approved agency for Allied Health Professionals

**OUR SPECIALIST AREAS ARE-**

**ADULTS, CHILDREN AND LEARNING DIFFICULTIES**

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## Careers in Healthcare

### ALLIED HEALTH & SOCIAL CARE

#### Senior Speech & Language Therapist

Mayo General Hospital, Castlebar, Co. Mayo Ref: RCSLT/2007899W

For further information and job descriptions or to apply online:

Freephone 0800 056 9710

[www.careersinhealthcare.ie](http://www.careersinhealthcare.ie)

We are an equal opportunities employer. Shortlisting may apply and panels may be formed from which future vacancies may be filled.

### The Sheiling School near Ringwood in Hampshire

currently has a SALT band 6/7 job share position open for 4 sessions per week. **Flexible working practice and experience with SLD/MLD or complex needs children are requirements.** The majority of input will be during school term times (38 weeks), with a further 12 sessions required per year for multi-disciplinary training, parent liaison and project work. The Sheiling School is a independent residential school catering for 40+ children in a semi-rural 'intentional community' setting near the New Forest and is a member of the Association of Camphill communities. We operate a communication policy which is comprehensive and based on a "Total Communication Approach".

For more information or an application pack contact **Jim Hornby on 01425 482450 or e-mail [jim.hornby@sheilingschool.co.uk](mailto:jim.hornby@sheilingschool.co.uk)**



[www.capability-scotland.org.uk](http://www.capability-scotland.org.uk)

Capability Scotland is the country's leading disability organisation working for a just Scotland.



**Therapy Services,  
3 days at New Trinity Service Edinburgh  
& 2 days at Upper Springland Perth**

### Speech and Language Therapist

**£30,183.15 – £32,644.70, 33 hours per week, 5 days per week**

We require an experienced Speech and Language Therapist to work in this exciting post across two Capability Scotland Services in Edinburgh and Perth.

You will be responsible for delivering a clinical service to adults with a variety of communication needs and will be required to provide assessment, treatment and advice to staff, family and carers on appropriate management. Eating and drinking skills will be assessed and monitored for those who present with development Dysphagia issues, this will incorporate the development and review of individualised meal time assistance programmes. Capability Scotland has a well established supervision annual review process and relevant training is encouraged. A degree or diploma from a recognised University or College leading to registration as a Licentiate of the Royal College of Speech and Language Therapists is essential. You must also have a Post Graduate qualification in developmental dysphagia and Registration with HPC. You will have an ability to work as a member of an interdisciplinary team, experience of delivering training and have excellent communication and interpersonal skills. You must have an ability to travel and work on your own initiative, and experience of independent working.

For further information about the post please contact Maggie Nicol on 0773 919 5638.

For further information, an application pack or to apply on-line please visit [www.capability-scotland.org.uk/recruitment](http://www.capability-scotland.org.uk/recruitment). Alternatively please telephone 0131 313 3818 (24 hour answering machine), email [recruitment@capability-scotland.org.uk](mailto:recruitment@capability-scotland.org.uk) or textphone 0131 346 2529 quoting Ref: TS02/07.

Closing date: 23 April 2007

Successful candidates will require an Enhanced Disclosure check.

We want to employ a diverse workforce.



THE DEPARTMENT OF HUMAN COMMUNICATION SCIENCE



The UCL Department of Human Communication Science is offering two new programmes for speech and language therapists with an interest in research. Students will be part of an excellent, research active department rated at 5 in the last RAE. Project supervisors come from one of five specialist research centres within or associated with the department: Applied Interaction Research, Developmental Language Disorders and Cognitive Neuroscience, Human Communication, Language and Health and the ESRC funded Centre for Deafness, Cognition and Language. For further information on research in the department, go to <http://www.ucl.ac.uk/HCS/research/centres/>

#### Doctorate in Speech and Language Therapy (DSL T)

Are you

- An experienced SLT with a strong interest in research?
- Keen to carry out a research project in your work environment?

Starting in October 2007, this new professional doctorate will

- Be the first of its kind in the UK
- Provide research training for those aspiring to allied health professional consultant status or research-led posts

This is a four year part-time programme, with up to two days per week attendance in the first two years. By the end of the second year you will have completed a detailed project proposal, obtained ethics approval and written a literature review. The final two years focus entirely on your own project. For further information about the programme, go to <http://www.ucl.ac.uk/HCS/DSL T/>

#### MSc in Neuroscience, Language and Communication

This is a multi-disciplinary programme that combines expertise in linguistics, neuroscience and psychology with clinical applications. Completing the programme requires one year full time with two days a week attendance or two years part time with one day a week attendance. It consists of core modules (research methods, linguistics, imaging the brain) and option modules (eg, developmental disorders of cognition, speech and language, rehabilitation of acquired communication difficulties, deafness and sign language, conversation analysis), and a research project. For further information about the programme, go to <http://www.ucl.ac.uk/HCS/admission/mschr.php>

For information on:

Admissions, please contact Natalie Wilkins [n.wilkins@ucl.ac.uk](mailto:n.wilkins@ucl.ac.uk)  
DSL T, please contact Professor Jane Maxim [j.maxim@ucl.ac.uk](mailto:j.maxim@ucl.ac.uk) or Dr Wendy Best [w.best@ucl.ac.uk](mailto:w.best@ucl.ac.uk)  
MSc, please contact Dr Judit Druks [j.druks@ucl.ac.uk](mailto:j.druks@ucl.ac.uk)

At the leading edge of modern healthcare, HCA are responsible for six private hospitals plus HCA Laboratories in the heart of London. We're committed to providing world-class patient care - not just meeting the financial standards, but setting them.

## Speech and Language Therapists

### Portland Hospital

Maternity cover - Part-time: 22.5 hours per week

You will work closely with other members of the cochlear implant team, as well as with ENT surgeons, Audiological Scientists and offsite teachers of the deaf and speech and language therapist. You will be responsible for ongoing rehabilitation and monitoring of paediatric case load and contributing to the assessment process to determine candidacy for implantation of children and adults. You will also provide advice and training to local services.

This post offers the opportunity to work within an exclusively private cochlear implant programming which provides services to both UK based and overseas patients.

As a Registered Speech and Language Therapist with paediatric speech and language skills, you should have experience in working with children who have cochlear implants and hearing impaired adults. The ability to use sign language at stage 1 or above is essential.

### Wellington Hospital

The successful candidate will provide a service to inpatients on the 45-bedded Neurorehabilitation Unit within the Wellington Hospital.

With experience of working with adults with acquired communication and swallowing difficulties, the successful candidate should have the ability to work independently with patients who have swallowing difficulties. Some experience in instrumental swallowing assessment is desirable.

The department is committed to interdisciplinary working and the successful candidate will be part of an established team of seven full-time Speech and Language Therapists. The department offers regular supervision support and there is an established annual appraisal system. Ongoing professional development is actively encouraged and there is also weekly uni and multi-disciplinary inservices.

There is secretarial support and a full time assistant to provide both clinical and administrative support.

For further information or to arrange an informal visit, please contact Danusia Bourdan, Outpatient Services Manager on 020 7390 8480.

Benefits include excellent salary and "Lifestyle" package, which comprises private medical insurance, critical illness cover and other optional benefits.

To apply for either post, please visit [www.HCARecruitment.com](http://www.HCARecruitment.com) or call 020 7390 8199, Human Resources Department for Portland Hospital for Wellington Hospital please call Human Resources Department on 020 7483 5302.

Closing date: 15th April 2007.

This post is subject to the Rehabilitation of Offenders Act (Exceptions Order) 1974 and the successful candidate will therefore be required to apply for a standard or enhanced disclosure"

HCA is committed to equal opportunities in employment.

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- London Bridge Hospital
- The Princess Grace Hospital



## SOUTHAMPTON CITY & SOUTH WEST HAMPSHIRE SCHOOLS

### Speech and Language Therapist

Job Ref: CC415

Salary: Band 8a £35,232 - £42,278 p.a.

Hours: f/t 37.5 p.w.

An opportunity has arisen for an experienced therapist to provide the clinical lead for the management of school aged children with specific language impairment in the Southampton and SW Hampshire area.

SCPCT has close working relationships with Hampshire and Southampton LAs and the clinical service is delivered to specified caseloads in mainstream schools in both.

The main clinical duties include the supervision and support of therapists working with this difficult and complex group; the provision of tutoring and modelling for assistants, carers and other professionals to enable them to fulfil their responsibilities; and participation in the monitoring of evidence based practice across this specialism.

There will also be the opportunity to develop expertise in the differentiation of ASD, as part of a tertiary level service in a multidisciplinary assessment team.

## SOUTHAMPTON CITY PRESCHOOL & MAINSTREAM SETTINGS

### Speech and Language Therapist

Job Ref: CC412

Salary: Band 6 £22,886 - £31,004 p.a. pro rata

Hours: p/t 22.5 p.w.

An opportunity has arisen for a suitably qualified and experienced therapist to contribute to exciting local developments in meeting the Every Child Matters agenda. This Service is pleased to work collaboratively with other agencies in promoting inclusion for children of all ages in the environment, where their communication needs are best addressed.

A vacancy has arisen which will allow you to experience:

- Joint initial assessments with another therapist in clinic
- The scope to work with children with identified special educational needs in preschool settings
- The support for a small caseload of children with specific language impairment in mainstream schools

Southampton enjoys the benefits of a sociable, thriving city, with easy access to the New Forest National Park and the Solent for a wide range of recreational activities.

The team comprises 16wte and enjoys comprehensive CPD, regular collaborative working and clinical supervision.

For more information on both posts and/or an informal visit, please contact Evelyn New on tel: 023 8090 2509.

Closing date for both posts: 15 April 2007

You can view posts and download an application form at [www.southamptonhealth.nhs.uk](http://www.southamptonhealth.nhs.uk) Alternatively, e-mail [recruitment@scpct.nhs.uk](mailto:recruitment@scpct.nhs.uk) or tel: 023 8047 5944 (24 hours) quoting the relevant Job Ref number.



We positively encourage applications from all sections of the community regardless of sex, racial origin or disability. This Trust is committed to equal opportunities, and operates a no smoking policy.

Southampton City **NHS**  
Primary Care Trust

[www.southamptonhealth.nhs.uk](http://www.southamptonhealth.nhs.uk)

To place ads call  
**Katy Eggleton on:**  
**020 7878 2344**

## THE RAINBOW SCHOOL

for children with autism

Requires a  
**Part Time Specialist Speech & Language Therapist**  
(Term Time Only)

Salary Band 6 (Pro Rata and Dependent on Experience)

The Rainbow School is an independent school for children with autism aged 4 to 11 years, providing one to one teaching for all pupils using the principles of Applied Behaviour Analysis, specifically the Verbal Behaviour model. We are located in Wandsworth, South West London.

We are seeking to recruit, on a part time basis, an experienced, confident therapist to provide therapy to 15 children with autism and to work collaboratively with the ABA Supervisor and the teaching staff and parents.

You will:

- Have a thorough understanding of autism
- Be experienced in working with children of primary school age
- Take a lead in staff and parent training
- Be experienced in using Makaton, Signalong & PECS
- Be able to assess complex communication needs

We will offer:

- A commitment to continued professional development
- A friendly welcoming environment
- Excellent support from committed and professional teaching staff.

For further details and an application pack, or to arrange an informal visit, please contact the Head Teacher, Mrs. Palmer on 020 8879 7700 or email: [admin@rainbowschool.org.uk](mailto:admin@rainbowschool.org.uk)

The successful applicant will be subject to an Enhanced Disclosure Check.



## AAC Product Specialist

Permanent – North (poss. Leeds area)

**PRI Liberator are world leaders in assistive technology and support for people with communication impairments and special educational needs.**

As one of our AAC Product Specialists you will:

- Promote our range of 'high tech' communication aids, by demonstrating products and supporting assessments and trials
- Present a persuasive 'language-based' argument to health and education professionals, and end-users
- Deliver customer training and 1st line support
- Represent us at exhibitions & conferences

This is a high profile sales role with a successful, growing company, which would suit someone with energy, commitment and self-determination, who enjoys a challenge and significant travel.

We offer a competitive salary, car and benefits package.

Please contact: David Weatherburn, Head of Sales & Operations, PRI Liberator Ltd., Minerva Business Park, Lynch Wood, Peterborough, PE2 6FT or e-mail [david@pri-liberator.com](mailto:david@pri-liberator.com) or call me direct on 01733 374987.

South Tyneside   
Primary Care Trust

SPEECH AND LANGUAGE THERAPY

### Specialist Clinician Neurology

Band 6, £22,886 - £31,004 pa, Full Time, Permanent  
(Part-time/Job Share considered) Ref: PCT7107

We are looking for an innovative Speech and Language Therapist to join our Speech and Language Therapy Service. Training opportunities are available/funded and there is SLT Assistant support.

This post offers the opportunity to work within acute and community settings with a wide range of client groups. Significant experience in the clinical area on completion of pre-registration year is required. Working towards/gained an accredited dysphagia qualification. Videofluoroscopy experience is desirable.

The post is based at the SLT department at South Tyneside District Hospital with regular access to Expert Practitioners, Highly Specialist SLT Clinicians and SLT Assistants.

We also offer:

- Secretarial/clerical, assistant support.
- Peer review/peer support/clinical supervision/appraisal linked to KSF.
- CPD/CE opportunities with SIGs encouraged and funded.
- IT support, internet access.
- Up to date IT systems/equipment with access to own PC (currently piloting System-One information system).
- Range of communication aids and interactive software within the Department.
- Regular Departmental/Clinical meetings with staff briefings.
- A fun working environment with regular social activities and excellent team support.

For further information please contact, Sam Taylor, Adult Services Clinical Co-ordinator on 08448 113030 ext 3099 email: [sam.taylor@sthct.nhs.uk](mailto:sam.taylor@sthct.nhs.uk)

Application forms and Job Description available from Personnel Department, South Tyneside District Hospital, Harton Lane, South Shields NE34 0PL. Tel: (0191) 202 4071 (24 hour answerphone).

Closing date: 20th April 2007.

We are an equal opportunities employer operating flexible working policies. We welcome applications from all sections of the community.

For information on other vacancies please visit: [www.stpct.nhs.uk](http://www.stpct.nhs.uk) or [www.sector1.net](http://www.sector1.net)



Services for adults and children with additional and complex needs

## Eastbourne bound! Join our team!

Symbol



Symbol have an established special schools service working throughout the South East in partnership with local LEAs & PCTs. We are looking for a specialist or generalist full / part-time with an interest in developing their skills as part of our Eastbourne based team.

Serving three schools, the team has access to excellent specialist support. Whether you are newly qualified, more experienced, or want to use or develop your management skills, we may have the post for you!

We are a not for profit organisation with staff employed on terms and conditions broadly in line with the NHS. Our supervision, access to peer support and CPD opportunities are second to none and we offer family friendly working arrangements.

If you are interested in working in the area of special needs in the South East of England please call for an informal chat about other possible opportunities.

**For a further information job pack or to discuss opportunities informally, please email Jan Cribb [jancribb@symboluk.co.uk](mailto:jancribb@symboluk.co.uk) or call on 01795 844440.**

**Nottinghamshire County NHS**  
Teaching Primary Care Trust

**Specialist Speech & Language Therapist -  
Specific Language Impairment** Ref: 614/NCS/0703/059  
Band 6: £22,886 - £31,004 pa

Following service re-design, the service in Nottingham is expanding its team who work with children with specific language impairment. The SLI team provides specialist packages of care, working collaboratively with education staff in mainstream schools.

We provide speech and language therapy for children across the City of Nottingham and surrounding area, working closely with 2 LEA's, Sure Start programmes and Children's Centres.

Based at Linden House, you will have the opportunity to consolidate and develop skills in SLI with leadership and support from a Specialist Advisor and Specialists within the team. You will have excellent communication skills and experience of working effectively with education staff in a mainstream setting. You will advise and support less experienced therapists and contribute to the planning and delivery of training to other professionals.

For further information or informal discussion please contact Elaine Hirst, Specialist Advisor Speech and Language Therapist, on (0115) 9428631/2, email: elaine.hirst@nottinghamshirecounty-tpct.nhs.uk or Carolyn DesForges, Speech & Language Therapy Co-ordinator, on (0115) 9691777, email: Carolyn.desforges@nottinghamshirecounty-tpct.nhs.uk

**Speech & Language Therapist** Ref: 614/NCS/0703/057  
Band 5: £19,166 - £24,803 pa  
Temporary contract for 6 months

Already achieved RCSLT competencies, you will have experience of working in a mixed community caseload and will enjoy working in a variety of community settings.

You will be part of skill-mixed locality teams, and work alongside more experienced Therapists. There is a comprehensive programme of induction, training and development and professional support and supervision/mentorship available.

For further information or an informal discussion, please contact Jane Storer, Speech and Language Therapy Co-ordinator, or Rachael van Roekel, Speech and Language Therapy Community Specialist Team Leader, on (0115) 9428631/2.

**Speech & Language Therapist** Ref: 614/NCS/0703/056  
Band 5: £19,166 - £24,803 pa, pro rata for part time  
Part Time - 2 days, 15 hours per week

Based at Linden House, this is an ideal opportunity to develop your skills in working with children who have a range of learning difficulties and associated complex needs. You will be working alongside a Specialist Therapist and the Team Leader in two special schools at an exciting time, as the schools change and develop. This post is suitable for a newly qualified therapist.

For further information or informal discussion please contact Kate Sutton, Specialist Advisor Speech and Language Therapist, on (0115) 942 8631/2.

For an application pack for any of the above posts please contact Secretaries, Speech and Language Therapy Department, Linden House, 261 Beechdale Road, Aspley, Nottingham, NG8 3EY. Tel. (0115) 942 8631/2 or e-mail: vivien.oliver@nottinghamshirecounty-tpct.nhs.uk quoting the appropriate reference number.

Closing Date: 20 April 2007  
Interview Date: W/C 30 April 2007

Successful candidates will be required to apply for a Criminal Records Bureau check.

The PCT is a completely smoke free organisation

We are committed to equality of opportunity and diversity in employment. Applications are welcomed from all sectors of the community and we aim to recruit a diverse workforce that reflects the people we serve.



**North Highland Community Health Partnership**



**Caithness  
Post 1: Generalist Speech & Language  
Therapist – Band 1, 18-20**

\*£17,371 - £18,784 Ref: 050/06.07ES2

**Caithness General Hospital, Wick  
Post 2: Advanced Speech & Language  
Therapist (Paediatric) – Band 2, 32-34**

\*£30,074 - £32,531 Ref: 051/06.07ES2

We are looking for enthusiastic Speech Therapists to join our friendly and dedicated team in Caithness. A current driving licence is essential. New graduates are welcome to apply for Post 1, however applicants for Post 2 should be suitably experienced.

We offer:

- Good support networks and readily available specialist advice.
- Regular staff development and training with opportunities for continuing education and professional development.
- Support from assistants.
- Commitment to collaborative working practices with education, parents and carers, and voluntary groups.
- Flexibility and new ideas are actively encouraged to accommodate special interest.
- Access to work car for business use.
- Accommodation can be arranged.

A generous relocation package is also available. These are full-time posts working 37.5 hours per week, however job-share applicants will be considered.

Caithness is an area steeped in history with unspoiled natural beauty. The main towns in the area have a lively social scene and there are opportunities for all outdoor pursuits and good links to Inverness, Orkney and the Highlands.

Informal enquiries to Pauline Crow, Assistant General Manager, Caithness General Hospital – Tel: 01955 880349 or Penne Martin, Speech & Language Therapist – Tel: 01847 893442.

Application forms and full information packs are available from the Personnel Department, Caithness General Hospital, Wick KW1 5NS – Tel: 01955 880403 or by emailing Anne.Hughes@haht.scot.nhs.uk quoting the relevant reference number.

Closing date for completed applications: Friday 20 April 2007.

\*Subject to "Agenda for Change" review.



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to make Highland  
the healthy place to be.

[www.nhshighland.scot.nhs.uk](http://www.nhshighland.scot.nhs.uk)

**PA to RCSLT  
Northern Ireland Officer**

The RCSLT seeks a Personal Assistant for the Northern Ireland officer to work in its central Belfast office

You will be an experienced, highly motivated, well-organised self-starter with excellent communication skills

Interest in people with communication impairment is essential

**Conditions: Part time 0.4FTE (14 hours pw, flexible working hours). Fixed term until December 2008. Salary £17,500 pa pro rata**

**Please send or email letter of application and CV to:  
Jo Offen at RCSLT, 2 White Hart Yard, London SE1 1NX,  
tel: 020 7378 3007, email: jo.offen@rcslt.org**

Visit: [www.rcslt.org](http://www.rcslt.org) for more information and job description  
Closing date for applications is cop  
Friday 20 April 2007

Interviews will be held in Belfast on Friday 27 April 2007  
(Previous applicants need not apply)

Now here...  
**RCSLT** job adverts  
*online*  
[www.rcslt.org](http://www.rcslt.org)

Guy's and St Thomas'   
NHS Foundation Trust

## Advanced Specialist Speech & Language Therapist

ENT/ Head & Neck Oncology

Band 7, £33,146 - £42,054 inclusive of HCA

We are looking for an experienced and enthusiastic therapist to join our team of twelve Speech and Language Therapists to participate in the delivery of a tertiary level service in the field of ENT, Head & Neck Oncology and Surgical Voice Restoration.

You will be based at Guy's Hospital and be supported and supervised by the Principal Speech and Language Therapist (ENT/Head & Neck) in a team of three Therapists. You will have significant post graduate experience of working with adults with acquired communication, voice and swallowing disorders in the field of ENT/Head & Neck. You will have specific competences in areas of Surgical Voice Restoration, Tracheostomy and management of complex dysphagia in this population including significant experience in Videofluoroscopy.

The Speech and Language Therapy Service offers a supportive team of experienced colleagues and a wide range of opportunities for continuing professional development. You will be expected to contribute to both the SLT service and the Head & Neck Multi Disciplinary Team's teaching, audit and research initiatives. Secretarial support is available.

For further information/or a visit to the department, please contact Claire Twinn or Ann Whitehorn on 020 7188 6233 quoting reference C3458.

Closing date: 13 April 2007.

For an application pack, please contact our 24 Hour Recruitment line on 020 7188 8111 quoting reference C3458.

All our vacancies can be viewed on our website.

Our excellent benefits include final salary pension scheme. Please visit our website to find out more. Equality of opportunity is our Policy.



[www.guysandstthomas.nhs.uk](http://www.guysandstthomas.nhs.uk)

## Looking for a lifestyle change?

Head to New Zealand and seize this rare clinical and lifestyle opportunity!

Work in the area of adult rehabilitation whilst exploring the delights of beautiful Otago. Stunning beaches, wildlife, mountains are all within easy reach. We are seeking a **Senior Speech Language Therapist**. Your caseload would be predominantly under 65 person's rehabilitation (TBI, Neurosurgery, Neurology) based in our multi-disciplinary Rehabilitation Centre in **Dunedin**.

For more information please contact: Vanessa Jerome, SLT Professional Director, Tel: +64 34740999 ext 8536 or e-mail: [vanessa.jerome@healthotago.co.nz](mailto:vanessa.jerome@healthotago.co.nz)

Closing Date: 4th May 2007

ODHB website: [www.otagodhb.govt.nz](http://www.otagodhb.govt.nz)

City and Hackney   
Teaching Primary Care Trust

## Children's Therapy Manager and AHP Professional Lead

Band 8d, £58,488 - £78,919 pa inc. (pay award pending)

Children's therapies in Hackney and the City are thriving, with no significant waiting lists, good interagency working and therapists who are committed to a modernising approach to service delivery. We are a forward looking organisation that is and has proactively sought to restructure the commissioning and provider divisions.

The speech and language therapy service is a joint service with the Learning Trust (the education provider for Hackney) and this innovative service has been positively reviewed nationally. The occupational therapy service is integrated with social services and pathways have been developed around children and their families ensuring that health and social care needs can be met seamlessly.

You will deliver leadership and management for the children's physiotherapy, occupational therapy and speech and language therapy services. You will also oversee the work of the Disability Register and the Early Support pilot in Hackney.

As AHP lead, you will represent AHPs on the new Provider Executive Committee and have a strategic role within the organisation. You will need to be a state registered physiotherapist, occupational therapist or speech and language therapist with managerial experience and the ability to lead at a strategic level. You will have vision and drive to continue to develop the services in the new context of integrated children's services and be able to think beyond traditional 'health' boundaries.

For an informal discussion, please contact Marie Gascoigne, current post holder on 020 7683 4262 or Lena Cadasse, Associate Director Children & Families on 020 7683 4306.

For an application pack, please contact the HR Recruitment Team on 020 7683 4399 (24 hour answerphone) quoting reference KL897 number together with your full name, address and telephone number. Alternatively please email enquiries to [hr@chpct.nhs.uk](mailto:hr@chpct.nhs.uk) or visit [www.chpct.nhs.uk](http://www.chpct.nhs.uk) to download an online application form. A large print version of the application pack is available on request.

Closing date: 3 May 2007.

Interview date: w/c 14 May 2007.

To us diversity means valuing the contribution that all individuals make and we therefore welcome applications from everyone including all ethnic groups, those with disabilities and candidates of all ages. Flexible working is actively encouraged to meet service needs and promote a good work-life balance.



Royal College of  
Speech and Language Therapists



## Notice to all *Bulletin* Supplement Advertisers

Advertisements to be published in the Mid April issue should be received by

**Midday 2nd April.**

This issue is to be distributed on **15th April**

Advertisements to be published in the May issue should be received by **13th April.**

This issue is to be distributed on **30th April.**

All enquiries relating to classified advertising should be directed to: *Katy Eggleton*

at *Ten Alps Publishing*, 9 Savoy Street, London, WC2E 7HR

Tel: 020 7878 2344 Fax: 020 7379 7155

Email: [tenalpspublishing.com](mailto:tenalpspublishing.com)

**West Yorkshire Learning Disability SIG (N04)**

17 April, 9.30am - 4pm  
Multimedia profiling: Jill Eddlestone and Jane Higham from 'Clear for all'. Talking Mats: Sally Boa. York University. Members free; non-members £30. Contact Elaine Heard, tel: 01723 581 344 or email: anne.elliott@acute.sney.nhs.uk or elaine.heard@acute.sney.nhs.uk

**SIG Learning Disabilities (East) (E13)**

18 April, 9.30am - 4pm  
Sensory integration and joint working: Angela Wilson. OT sensory journeys a clinical perspective. AGM. The Bargroves, Cromwell Rd, St Neots. Members free; non-members £5. Contact Karin Taylor, tel: 01480 372378

**National SIG in Hearing Loss in People with Learning Disabilities (C29)**

25 April, 10am (reg 9.30am) - 3.30pm  
Functional hearing tests for people who cannot be conventionally tested. Includes SIG members' presentations. Concludes with consensus views about good practice. Leicester. Members £10; non-members £15; unemployed SLTs/students free. Tel: 01773 546 963, email: maureen.richardson@leicspart.nhs.uk or denny.fransman@derbysmhservices.nhs.uk

**SIG in Oncology Scotland (S14)**

26 April, 9.15am - 3.30pm  
Laryngectomy: an overview of current practice. St John's Hospital, Livingston. Contact Jan Stanier, tel: 0141 31 46117, email: jan.stanier@rah.scot.nhs.uk

**Tracheostomy SIG (L29) (Adult and Paediatric)**

27 April, 10am - 4pm  
Speaking valves, review of the evidence; spinal cord injury, effect on swallowing and impact of tracheostomies; management and weaning in low awareness patients; feeding management of children with tracheostomies. Addenbrooke's Hospital, Cambridge. Members £2.50; non-members £17.50; students £5. Contact Sarah Mclean, tel: 01223 216 200 or email: sarah.mclean@addenbrookes.nhs.uk

**SLTs Working in Mainstream Schools SIG (South East region) (L15)**

3 May, 10am - 4pm  
Technology: an effective tool for SLTs? Presentation from eLr (extra Language resources). Practitioner presentations. Discussion forum in the afternoon: developing IT resources. RCSLT, London. Price TBC. Email: mainstreamsig@yahoo.co.uk

**South East and London Stammering (SEAL) SIG L19**

4 May, 1pm - 5pm  
The use of outcome measurement in stammering therapy. Speaker Louise Wright, Specialist SLT and joint author of WASSP. RCSLT, London. Free for SIG members; non-members £10. Contact Jane Coley, tel: 0208 401 3103 or email: jane.coley@croydonpct.nhs.uk

**North West SIG Voice (N20)**

8 May, 9.30 - 4.30pm  
Psychogenic voice disorders: Liz Bradley, Collette Fielding and Gail Edgley, Pinewood Education Centre. Stepping Hill Hospital, Stockport. For information and to reserve a place, contact Sally Matthew, tel: 01928 753 424, email: sally.matthew@nhs.net

**Wessex LD SIG (WE3)**

9 May, 10am - 4pm  
Working with families - Dr Christine Jenkins, Portsmouth University. Short case studies from SIG members. The Country Cottage, St James Hospital, Portsmouth City (max 30 people). Non-members £10. Contact Naomi Carter, tel: 023 8087 4240 or email: naomi.carter@hantspt-sw.nhs.uk

**Voice SIG (London) (E4)**

10 May, 1.30pm - 4.45pm (registration 1pm)  
Running groups: effective treatment or a tool for reducing waiting times? Nutford House, Brown Street, London W1H 6AH. Members free; non-members £15. Contact Nicola Fulljames, tel: 0208 869 2410, or email: Nicola.fulljames@nhs.net

**Scottish SIG in Autism (S9)**

14 May, 9.30am - 3.30pm  
Early presentation in ASD: Colwyn Trevarthan. PECS. an Edinburgh model: Gail Morris, VTSS. Other speakers TBC. Venue: QMUC, Corstorphine Campus, Edinburgh. Fee £25. Day open to other interested professionals. Contact Laura Duncan, tel: 0131 665 0438 or email: laura.duncan@ipct.scot.nhs.uk

**South and West Wales Assistants' SIG WA11 (AGM) (amended meeting date)**

14 May, 10am - 3.30pm  
Alison Stroud: CPD. Lecture Theatre, Royal Glamorgan Hospital, Pontypridd & Rhondda NHS Trust, Llantrisant, South Wales. Members free (annual £5 fee due); non-members £3. Contact Christine Phillips, tel: 01443 404 317 or email: Christine-A.Phillips@Pr-Tr.Wales.nhs.uk

**Yorkshire Paediatric Dysphagia SIG (N16)**

14 May, 1.30pm  
Case study of child who has attended the Gratz University feeding clinic: Liz Ford. Feedback on most recent QUEST course. Discussion on use of cervical auscultation in paediatric population. Tadcaster Health Centre. Contact Angela Hunter, tel: 01924 483909 or Sue Haig, tel: 01924 395 461

**SIG Psychiatry of Old Age (E17)**

15 May, 9.30am - 4pm  
Presentations on Lewy Body Dementia, progressive aphasia, and dementia groups. Other speakers TBC. RCSLT. Members £10; non-members £20. Contact Helen Clarke, tel: 01279 827 620, mob: 07861 123 8567 or email: Helen.Clarke@WestEssexPct.nhs.uk. To book a place contact Julia Marjoribanks tel: 01732 368 928 or email: Julia.Marjoribanks@swkentpct.nhs.uk

**South West Thames SIG in Developmental Speech and Language Impairment (E15)**

16 May, 7.45 for 8pm start  
New assessments and approaches to teaching vocabulary. Brief AGM. The Meath School, Brox Rd, Ottershaw, Chertsey, Surrey. Non-members £5. Contact Christina Evans, tel: 020 8977 4674 (evenings only) or email: cevans@lampton.hounslow.sch.uk

**Hertfordshire SLI SIG (E37)**

22 May, 9.30am - 4pm  
Brain Gym study day. Develop your knowledge of this approach and learn useful techniques to support work with children with SLI: Niki Honore independent Brain Gym practitioner. Lister Hospital Postgraduate Centre, Stevenage. Members £25; non-members £35 (including SIG membership if required). Limited places available. Contact Lynne Scoresby, tel: 01462 421 846 or email: lynnescoresby@hotmail.co.uk

**National SIG SLT in Children's Centres (UKR116)**

4 June, 10am - 4pm  
Inaugural meeting of new SIG, offering you the opportunity to set the agenda for future meetings. Speakers: Marie Gascoigne, therapy management consultant and Kevin Woods, DfES. Facilitated workshop: 'Meeting the Challenge of Developing an SLT Service within an Integrated Children's Services Agenda'. RCSLT, London. Cost £25 (includes membership). Contact Anthea Williams, tel: 07900 163 227, email: anthea.williams@nhs.net

**National SIG Bilingualism (N01)**

6 June, 9.30am - 3.45pm  
Putting 'Good Practice Guidelines' into practice. Conference exploring theory of bilingualism, cultural competence, co-workers role, assessment and intervention. University of Birmingham. Assistants £30; members £45; SLT non-members £55 (includes lunch). Contact Louise McChrystal, tel: 01274 770 397 or email: louise.mcchrystal@bradford.nhs.uk

**SIG in AAC (Central Region) (C16)**

26 June, 9.30am - 3.30pm  
Oxford AAC assessment tools an opportunity to find out how regional communication aid centres assess for AAC, as well as more local teams working with both adults and children using AAC. Current assessment packages will be described as discussed, as well as a chance for clinicians/teachers to share their experience. Nuffield Orthopaedic Hospital, Headington. Cost: £10 (non-members); £5 (members) including lunch. Contact Sally Chan, tel: 0117 924 7527, or email: sallychan@blueyonder.co.uk.

Send your SIG notice by email to: [sig@rcslt.org](mailto:sig@rcslt.org) by 4 April for the May issue

# Is their medication ending up where it should be?

Dysphagia, or swallowing difficulty, is a much more widespread problem than you might think.<sup>1</sup> It leaves many people, especially the elderly, struggling to swallow their medicine and often leads to it being thrown away.

Such non-compliance has serious consequences in that it can lead to poor outcomes, hospitalisation or even patient death.<sup>2</sup> It also costs the NHS over a billion pounds a year in wasted medicines and the costs associated with adverse clinical outcomes.<sup>3</sup>

That's why it makes sense to give people who can't swallow solid medicines a more appropriate formulation such as a liquid - and the sooner this is done the greater the difference it can make in terms of improved compliance and patient welfare.

Rosemont specialise in liquid medicines offering solutions across a wide range of therapeutic areas.



#### References:

1. Strachan I, Greener M. Medication-related swallowing difficulties may be more common than we realise, *Pharmacy In Practice* December 2005. 2. Richard Griffith, Medication Management and the law 2 – Residents With Medication Related Dysphagia 2006. 3. Greener M. *JME* 2006; 9: 27-44.

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