

bulletin

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

September 2018 | www.rcslt.org

THE RCSLT IMPACT REPORT 2017 - 2018

2017–2018 RCSLT Impact Report: the activities and
achievements of your professional body



Heard any good jokes lately?

Voice Box is a UK-wide joke competition for mainstream and special primary schools.

Run by the RCSLT, the competition is aimed at building confidence, supporting children's communication skills and raising awareness that some children need additional specialist help to speak or understand what is being said to them.

The competition, now in its fifth year in England and Scotland, is also being launched in Wales for the first time.



The Voice Box competition in England and Scotland runs
1 October-30 November 2018.
If you would like to get your local primary schools involved, visit: www.givingvoiceuk.org/voice-box/voice-box-england-scotland/



The Voice Box competition in Wales runs
5 September-21 December 2018.
If you would like to get your local primary schools involved, visit:
www.givingvoiceuk.org/voice-box/voice-box-wales/
Supported by the National Association of Head Teachers Cymru (NAHT Cymru) and Parentkind.



Contents

ISSUE 797



12



11



37



22



25



CONTACTS

4 **Letters**

5 **News**

11 **Opinion:** Choosing a specialism

12 **Pamela Kyriakides and Sue Martin:** Improving standards in dysphagia management

16 **Libby Hill:** Animal-assisted therapy

18 **Dr Joanne Fillingham:** Profile of the NHSI's clinical director for AHPs

20 **Member Survey**

22 **Research and Development Forum**

25 **In the Journals**

26 **Obituary:** Judith Chaloner

28 **Clinical Excellence Networks**

31 **Your speech and language therapy job adverts**

33 **My working life:** Aparecido Soares

ROYAL COLLEGE OF SPEECH AND LANGUAGE THERAPISTS
 2 White Hart Yard, London SE1 1NX
 Tel: 020 7378 1200
 Email: bulletin@rcslt.org
 Website: www.rcslt.org
 ISSN: 1466-173X



COVER ILLUSTRATION
 Owen Gildersleeve

President: Sir George Cox
Honorary vice president: John Bercow
Chair: Morag Dorward
Deputy chair: Dr Della Money
Honorary treasurer: Lorna Bailey
Professional director: Kamini Gadhok MBE



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

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

ADVERTISING
Sales manager: Joanne Rose
 Tel: 020 7880 6231
 Email: joanne.rose@redactive.co.uk
Recruitment sales: Christian Plucknett
 Tel: 020 7324 2755
 Email: christian.plucknett@redactive.co.uk
Display sales: Gemma Davies
 Tel: 020 7880 7668
 Email: gemma.davies@redactive.co.uk

PUBLISHER
 Joanna Marsh
PRODUCTION
 Aysha Miah-Edwards
PRINTING
 Buxton Press

DISCLAIMER
 ©2018 Bulletin is the monthly magazine of the Royal College of Speech and Language Therapists. The views expressed in the Bulletin are not necessarily the views of the RCSLT. Publication does not imply endorsement. Publication of advertisements in the Bulletin is not an endorsement of the advertiser or of the products and services. The publisher reserves the right to alter or withdraw any advertisement without consultation.



Victoria Briggs

EDITORIAL



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



New beginnings

I am delighted to be joining the RCSLT as *Bulletin's* new editor. From everything I've seen in my first few weeks of being here, it seems like an exciting time to come on board. Most striking, perhaps—and a project you will be hearing much more about in future issues—is the development of the new website. From previous *Bulletin* updates, you will no doubt be aware of the steady progress being made behind the scenes to create a first-rate, digital platform complete with improved functionality, enhanced features and personalised content that's relevant to you. Expect to see a new online community area and new clinical web pages coming your way soon.

I'm pleased to report that, subject to successful testing, the website has a scheduled go-live date in November. In the run up to then, our digital team will be putting the new website through its final technical checks to ensure that when we do launch, the transition will be as seamless as possible. Our monthly e-newsletter and social media channels will keep you posted on digital developments.

While we finalise the new platform, we would like to thank the website user panel who have guided us through this process by sharing their feedback. Further user testing is due to take place in October. If you would like to take part, email laura.kelly@rcslt.org to register your interest.

As a membership community, your involvement and participation is the lifeblood of the organisation—a point made by Morag Dorward and Della Money on p20-21, as they bring you the results of this year's member survey. With this year's Impact Report (centre pull-out) setting out the RCSLT's activities, aims and achievements across the year, September's *Bulletin* is a packed issue, and one we hope you enjoy.

As members, I also welcome your views and ideas—it is your magazine, after all, and I look forward to being in touch with you in the months that lie ahead.

Victoria Briggs

Bulletin editor

 bulletin@rcslt.org

 @rcslt_bulletin



Is your CEN ready for the new communities area of the website?

Part of the RCSLT Digital Transformation will include a new section of the website devoted to RCSLT communities and networks. If you have not yet re-registered your CEN, or if you think a CEN needs to be set up in your area or clinical setting, email info@rcslt.org

Sensory ataxia and speech

I have a patient who currently has a working diagnosis of sensory ataxia. The research I've done so far mentions only an impairment of proprioception. I am working with her on difficulties with speech, namely dysarthria and dysfluency, and would be interested to hear from any therapists that have come across sensory ataxia.

Could speech difficulties be caused by this condition and, if so, what was your approach to therapy? Please feel free to get in touch.

Faye Walkinshaw, developing speech and language therapist, Medway, Kent. Email: faye.walkinshaw@nhs.net

Dysphagia screening assessments

I am currently part of a team developing the speech and language therapy service in a local mental health unit, particularly with service users who have a dementia diagnosis.

The team would be interested in hearing from anyone about any communication and/or dysphagia screening assessments that SLTs could recommend (see contact details below).

Claire Peters, specialist community speech and language therapist, Adult Speech & Language Service, Lancashire Care NHS Foundation Trust. Email: claire.peters@lancashirecare.nhs.uk

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

VISIT: WWW.RCSLT.ORG AND FOLLOW THE LINKS



Your RCSLT

ANDRENA WILSON



I started working as personal assistant to Kim Hartley Kean, head of the RCSLT's Scotland office, in January this year and came with experience from across sectors that included finance, media, hospitality, and a stint working for the Queen's kiltmaker, Kinloch Anderson!

Previously, my knowledge of speech and language therapy was limited to a perception of helping children with stammers. Little did I know the breadth

and depth of the service, and the huge impact it has on people's lives. I am so thankful for the opportunity to be working for the RCSLT and playing my small part.

My role in the Scotland office includes organising meetings for AHPFS and Hub Forum Scotland, as well as my PA role and dealing with members' enquiries. If Scottish members need anything at all, feel free to get in touch or drop by the office in St Andrew Square, Edinburgh.

Andrena Wilson, PA to head of Scotland office, RCSLT. Email: andrena.wilson@rcslt.org

Bercow: Ten Years On – parliamentary update

As *Bulletin* readers will know, following the publication of *Bercow: Ten Years On* in March, Gillian Rudd tabled a petition on the UK Parliament website calling on the government to implement the report's recommendations. Since then, RCSLT members, external partners and members of the public (our #Bercow10champions) have shown exceptional commitment in promoting the report and petition. Thanks to their incredible efforts, the petition secured more than 10,000 signatures within three months, triggering a government response that was published on 3 July. Perhaps not entirely coincidentally, on the following day, Rebecca Pow, the MP for Taunton Deane, held a 90-minute Westminster Hall debate on speech, language and communication support for children.

The RCSLT's policy and public affairs team in London has been working with Ms Pow since March on promoting *Bercow: Ten Years On*, and has supported her debate with a number of briefings. Taking part in the debate were MPs from

all parties, who expressed support for the *Bercow* recommendations and pressed the government to implement them. Minister for Children and Families Nadhim Zahawi repeated the government's welcome of the report, promising a response in due course. He also made a number of useful pledges around the role of SLTs in relation to the government's plans for children's mental health.

The RCSLT is grateful to our parliamentary #Bercow10champions for their ongoing support and we look forward to continued work with them in the months to come. Once again, we were delighted and impressed by members' activism in contacting their MPs about the debate and sharing information with them. This has also resulted in a number of fruitful contacts for our future influencing work.

The RCSLT and I CAN statement on the petition and debate is available via bit.ly/2vt7OAc. Gillian Rudd's petition (open until 26 September) and the government response is at [petition](http://petition.parliament.uk/petitions/215643).



parliament.uk/petitions/215643.
Rebecca Pow's debate can be read here bit.ly/2MKPGsy and watched here bit.ly/2vw3PCG.

Webinar – register now!

The RCSLT is hosting a webinar in partnership with the Association of Youth Offending Team Managers on 17 September, aimed at professionals working in the justice sector and RCSLT members with an interest in this area. Entitled *Supporting people with speech, language and*

communication needs in the justice system, the webinar will run from 1–1.45pm.

To attend, please register at bit.ly/2rmbY55 and share this information with colleagues who might be interested.

NEWS IN BRIEF

Stronger together

A day of appreciation for AHPs has been launched by colleagues SLT Carrie Biddle and dietitian Rachael Brandreth. On 15 October, AHPs are encouraged to celebrate each other's skills in whatever way they choose. Share your AHPs' day on Twitter using the hashtags #StrongerTogether, #allied4reason, and #AHPsDay. @RCSLT will be tweeting in support.

NICE webinars

NICE is running a series of webinars for AHPs. The first, designed to help AHPs understand, engage with and get involved with NICE's work in developing evidence-based guidelines, takes place on 10 September at 12.30pm.

📍 Register and find more details via tinyurl.com/y8rctnwg

Minor grants

The deadline for the next RCSLT minor grant applications is on 17 October. If you're looking to attend a conference, complete a short course, or otherwise support your CPD with up to £500 of RCSLT funding, visit bit.ly/2jOek1S for more details.

📍 Email grants@rcslt.org with any questions.

Coming soon

Have you seen the new RCSLT newsletter? The monthly communication features bite-sized updates on pieces of work, new guidance, resources and upcoming events and webinars. If you haven't seen it yet, please contact the membership team to ensure we have your correct email address.

📍 Email: membership@rcslt.org



@NewOptionsLtd

Amazing to see the hard work of the #BercowChampions @RCSLT @ican @GillianRudd is paying off and @DamienHinds acknowledging and promoting the importance of speech and language input

@GivingVoice_UCL

Every month I look forward to receiving the @rcslt_bulletin. It's a great way to learn about what's going on across the profession and really useful as an #SLT2b to read about what's going on in #SLT in such an accessible way

Members' expertise informs consultations

The RCSLT's policy and public affairs team in London has had a busy spring and summer responding to consultations issued by the UK Department for Education and House of Commons Select Committee enquiries. These include responses to a review of exclusions being chaired by Edward Timpson, the former Children and Families Minister, where we emphasised the links between speech, language and communication needs, behaviour and exclusions. Case studies provided by members also helped highlight what can be achieved with appropriate input from SLTs (find our response at bit.ly/2vqDt53).

A consultation on 'children in need of help and protection' gave us another opportunity to highlight the high prevalence of communication needs in young people who are supported by children's social care, and the role of SLTs in promoting better outcomes for them. We illustrated our points with Child F's story, a case study provided by a member (see our response here: bit.ly/2AsVS74).



For the Education Select Committee's enquiry into life chances, we highlighted how communication is a fundamental life skill, which impacts children's academic achievement, wellbeing and quality of life. We also made a series of recommendations, based on those in *Bercow: Ten Years On*, about how children and young people with speech, language and communication needs can be better supported to achieve their potential (see bit.ly/2IYeACB).

Thanks to Judy Clegg, Melanie Cross, Jemma De Vincenzo, Hannah Dyson, Anne Elliott, Claire Johnston, Alex Lazell, Lizzie Scott, Nina Soloff and Fiona Taylor for helping with these submissions.

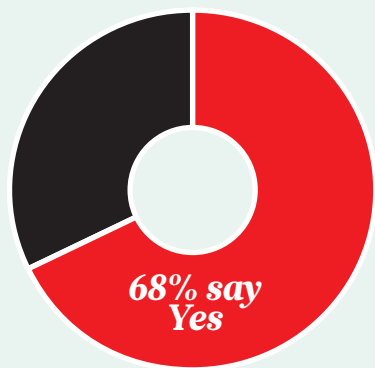
If you are interested in helping the RCSLT with future policy work in these areas, please email caroline.wright@rcslt.org to register your details.

Caroline Wright, RCSLT Policy Adviser

RCSLT Web Poll
Have your say...



Are you a member
of a CEN?



VISIT: WWW.RCSLT.ORG

Lords debate mental capacity

In July the UK government introduced the Mental Capacity (Amendment) Bill in the House of Lords. Designed to update the Mental Capacity Act 2005, under which a person may be deprived of their liberty where they lack capacity to consent, it follows a review of the act by the Law Commission. The RCSLT sent a briefing to peers taking part in the second reading debate on 16 July, highlighting that people may be at risk of being deemed to lack capacity if they have unidentified and/or unsupported communication needs. The briefing argued that SLTs play a crucial role in helping people demonstrate whether they have capacity or not.

The government is also proposing to replace Best Interests Assessors with a new role of Approved Mental Capacity Professional (AMCP). The RCSLT is pushing for AMCPs to receive training in awareness of communication needs and for SLTs to

have the opportunity to train to be an AMCP, if they wish. The current legal position, and one we disagree with, is that SLTs cannot train to be Best Interests Assessors.

During the debate, peers from all sides of the House, including Baroness Browning, Baroness Finlay of Llandaff, Baroness Greengross, Baroness Hollins, and Baroness Thornton, quoted from the RCSLT's briefing (more information at bit.ly/2vv9wkq and bit.ly/2OB0o6H).

Work has begun on developing amendments to be debated at the next stage of the bill's passage, starting in September. The RCSLT's briefing is available here bit.ly/2uwl6eD and the team is grateful to Anna Volkmer, Mark Jayes and Hannah Luff for supporting the ongoing work in this area.

Peter Just, RCSLT Public Affairs Adviser
Claire Moser, RCSLT Policy Adviser

@JenThomsonSLT

Good to hear @bbcnickrobinson highlighting funding of #SLT services on @BBC4today as part of the problem in supporting early years education/development when speaking with education secretary @RCSLT

@BethanjsB

Enjoying my final summer off with my little ladies before I head back to @dmuleicester for my 4th and final year, I'm so nearly there. I'm so excited for my future as an SLT! @RCSLT #itsnevertoolateforacareerchange #rclsit #slt



MORAG DORWARD & KAMINI GADHOK

Mental health provision: update

The Departments for Education and Health and Social Care have published their response to the consultation on Transforming Children and Young People's Mental Health Provision, in which the importance of identifying speech, language and communication needs is recognised, as is the role of SLTs (see bit.ly/2OCVqGI).

As reported in April's issue of *Bulletin*, the aim of the government's proposal is on improving access to mental health services, with a focus on earlier intervention and prevention in schools and colleges.

A key theme in consultation responses was that groups with particular barriers to accessing services, or with a higher prevalence of mental health problems, should be able to benefit from proposals. The RCSLT highlighted that one such group should include children and young people with SLCN (see bit.ly/2F1SAtu).

In parliamentary debates, and in responses to a number of written questions, the government has said that:

- designated senior leads for mental health will be expected to liaise with SLTs to ensure that children with SLCN receive the help they need;
- mental health support teams



will consider how they can work with SLTs to provide more comprehensive support for children and young people's full range of needs; and

- trailblazer areas will test how they can link work with SLTs to enhance support for vulnerable children.

The RCSLT issued a statement welcoming the government's response, which can be read in full at bit.ly/2LQJUp7.

Peter Just, RCSLT Public Affairs Adviser
Caroline Wright, RCSLT Policy Adviser

Parkinson's UK: development opportunities

Parkinson's UK has announced a new learning pathway for SLTs, occupational therapists and physiotherapists. Containing details of RCSLT factsheets and resources, the new pathway has been developed to make it as easy as possible to identify and access relevant resources about Parkinson's, whatever your work setting or career

stage (see bit.ly/2KfdVc0). Parkinson's UK has also put out a call for health and social care professionals to join their expert review group. The reviewers will play a big part in creating and updating Parkinson's resources to ensure they are accurate and relevant. Apply to join the review group at bit.ly/2OAEvmv.

MOBILISING THE PROFESSION

As highlighted in the article on pages 20-21, the Board of Trustees and RCSLT staff have been discussing the findings of the member survey and the use of the 'engagement wish' to help us to identify how to build a closer relationship with you as members.

For example, we have recently worked with you in the development of resources and guidance by using crowdsourcing (a means of having an online conversation collectively, as a profession). As a result of this, we have updated curriculum guidance on the website and developed the RCSLT speech and language therapy children's services strategy. In addition, the CQ3 professional guidance has also been updated, called Communicating Quality (CQ) Live, the resource allows us to better meet the needs of the profession and to support all members in delivering high-quality services.

In recent months, we have also seen a gear change in how members are making use of social media to make an impact at all levels, including the campaign arising from the *Bercow*:

Ten Years On review. These are all examples of mobilisation as outlined in *New Power: How It's Changing The 21st Century - And Why You Need To Know*, a book by Jeremy Heimans and Henry Timms. It's an interesting concept that you may want to read about.

"We have seen a gear change in how members are making use of social media"

Building on this, we would be interested to hear your feedback on how we can develop these and other approaches with the aim of further mobilising the SLT profession as a community to effect change, and to respond to some of the challenges highlighted in the member survey.

Meanwhile, the new website, expected in November, will provide us with the opportunity to increase engagement and grow an online community of practice. We also hope we will meet with some of you at the upcoming RCSLT hub events and the Study Day in Cardiff on 4 October.

Please do contact us on info@rclsit.org if you have any other ideas—we would love to hear from you! ■

Morag Dorward, RCSLT Chair; and Kamini Gadhok, MBE, RCSLT Chief Executive.
Email: kamini.gadhok@rclsit.org



81%
of children with emotional and behavioural disorders have significant language deficits

840
babies with significant deafness are born annually in the UK

Technology on show at Senedd NHS event

The Welsh NHS Confederation held a lunchtime event to mark the 70th birthday of the NHS at the Senedd (the Welsh parliament building), early in July.

The theme of the event was ‘the NHS of the future’, with organisations asked to put forward applications highlighting how their exhibition stand would display innovation and the use of new technologies.

Out of a high number of applicants, the RCSLT was chosen to be one of the nine exhibitors on the day, thanks to an excellent application from member Belinda Done, entitled *Speech and Language Therapy: making futures happen*.

The stand, staffed by Belinda (head of adult services at Aneurin Bevan University Health Board) and Amanda Evans (highly specialist SLT at Aneurin Bevan University Health Board), showcased a range of technological developments.

Using hologram presentations, delegates were invited to witness cutting-edge

practices in speech and language therapy, including transcranial magnetic stimulation, bioengineering for swallowing disorders, augmentative and alternative communication devices, and ‘seeing speech’ by using ultrasound and MRI to visualise the tongue in action.

The SLTs used virtual reality equipment to walk delegates through dementia, autism, future therapy scenarios, and future simulated learning environments.

Belinda and Amanda also talked to delegates about the current technologies shaping speech and language therapy interventions, including apps, FEES and teleswallowing (which allows an SLT to assess swallowing ability remotely, via video).

A number of high-profile guests visited the stand, including the Deputy Director for Healthcare Innovation at the Welsh Government, the Chief Therapies Advisor, the Chair of the Health, Social Care and Sport Committee and the Cabinet Secretary



for Health and Social Services (pictured above, who tweeted about the stand in his highlights of this special day).

A huge thank you to Belinda and Amanda for showcasing the work of the profession so effectively.

Caroline Walters
RCSLT Policy Adviser, Wales

RCSLT online resource of the month



On the RCSLT website you can find the latest guidance and resources on implementing the International Dysphagia Diet Standardisation Initiative (IDDSI) framework. Our staff and advisers have been working hard to make sure the materials are comprehensive and up-to-date. They include posters, leaflets, slideshow presentations, implementation guides, videos and more. bit.ly/2KmkCOI

Global advocacy

The first ever Global Disability Summit was held on 24 July in London at the Queen Elizabeth Olympic Park.

Co-hosted by the UK Government, the International Disability Alliance and the Government of Kenya, the summit attracted more than 800 high level attendees, including heads of governments from across the world, representatives of various international disabled persons organisations (DPOs), CEOs of corporations as well as representatives from the United Nations.

The RCSLT was represented by CEO Kamini Gadhok MBE (pictured) who used the opportunity to advocate for communication disability and further the



RCSLT’s strategic aim for the recognition of communication as a fundamental human right.

AHP case studies sought

Public Health England is looking for case studies to showcase projects about how allied health professions help to improve population health, reduce health inequalities and improve wellbeing.

Details can be found at bit.ly/2iKo2O7 or email Berenice.Napier@rcslt.org. We would love to see lots of SLT projects highlighted in the final report, so if you send one in please tell us, too!

7.58%

of children start school with developmental language disorder

11,143

signatures on the *Bercow: Ten Years On* petition



Derek Munn

COLUMN

SOCIALLY MOBILE

At the end of July, Secretary of State for Education Damian Hinds gave a speech on social mobility. We had an interest in the content, naturally – but the speech was also useful in illustrating how influencing and media work.

First, the content of the speech, where our view is that it is good so far as it goes. We welcomed the recognition that communication is crucial to social mobility, and the pledge to halve the number of children starting school without the early speaking skills they need by 2028. But more needs to be done, and we pointed to the recommendations of the *Bercow: Ten Years On* report for the way ahead.

But this is politics, and the subtext matters. The recognition of early language began with a speech by previous Secretary of State Justine Greening at the Conservative Conference last October, and it was significant that Damian Hinds praised her and said this was a continuation – albeit one we had hoped for, as he was a founder member of the All-Party Parliamentary Group on social mobility.

As for the process, we were alerted to the speech at the end of the previous week with an invitation to attend and a request for advice, and some of the facts and statistics

we provided in haste late on a Friday afternoon made their way into the speech. The afternoon before the speech we were briefed on the content by an adviser to the Minister and a Department for Education official. This round of calls the day before an announcement is normal practice, but it is also an indicator that the RCSLT is seen as a key player to have on side.

Journalists were given the speech ‘under embargo’, meaning they couldn’t post their stories until midnight of the night before. We were ready with a policy response and media statement soon after the speech, and were name-checked in the BBC online story, with the *Bercow: Ten Years On* report referenced on BBC Radio 4’s *Today* programme.

You can find RCSLT’s response to Damian Hinds’ speech here: bit.ly/2OvSVG0. Our influencing with the Department for Education goes on! ■

“The RCSLT is seen as a key player to have on side”

Derek Munn, RCSLT Director of Policy and Public Affairs.
Email: derek.munn@rcslt.org

Youth justice and prison reform



The RCSLT has been making solid progress in its work to raise awareness of the speech, language and communication needs (SLCN) of young people who offend or who are at risk of offending.

In May we provided written evidence to the Joint Committee on Human Rights’ enquiry into solitary confinement and restraint, arguing that in cases where SLCN goes unrecognised and unsupported, young people are at risk of physical interventions that might have been avoided if appropriate verbal differentiation and de-escalation had been used instead.

This information has also been shared with the Ministry of Justice (MoJ), which is carrying out a 12-month review into the use of physical restraint techniques across custodial settings for children (see bit.ly/2ODwiPV).

We also provided written evidence to the Health and Social Care Committee’s enquiry into prison health and social care. In our submission we argued that an ageing prison population is more likely to experience communication and swallowing difficulties—a need that will result in increased demand for speech and language therapy to support these individuals (see bit.ly/2LLyZ48).

As a result of our submission, the committee invited the RCSLT to attend a roundtable discussion at the House of Commons, along with other stakeholders. Representing the RCSLT was Jacqui Learoyd, clinical lead at HMP Berwyn, who highlighted the links between speech and language therapy and wider considerations around mental and physical health, social care and the physical environment. The committee’s final report is due out later in the year.

The RCSLT has also been working with the MoJ to shape the development of Secure Schools, which are to replace young offender institutions. Our formal response includes specific concerns about who will commission speech and language therapy, the assessment tools that will be used, and how programmes will be tailored and personalised.

We are also in discussion with the Youth Justice Board about monitoring the ongoing effectiveness of the screening tool for SLCN that we successfully added to AssetPlus. Advising NHS England on its audit of the Comprehensive Health Assessment Tool (CHAT) is also underway.

Claire Moser, RCSLT Policy Adviser

ISTOCK

RCSLT joins BBC advisory group



The RCSLT has been invited to join the BBC's new language advisory group, aimed at supporting language and literacy development in the UK's under-fives.

By the time they start school, the most disadvantaged children in the UK can be a full 19 months behind their more affluent peers in terms of vocabulary development (Sutton Trust, 2012).

The advisory group comprises a range of early years language and communication experts who will work in partnership with the BBC.

RCSLT CEO Kamini Gadhok said, "I am delighted that the RCSLT is working in such close partnership with the BBC. In recognising the importance of communication as a core life skill, the BBC's initiative represents a significant opportunity to

improve the outcomes for many disadvantaged children. In bolstering pre-schoolers' language and communication skills, the group's aim is to help break the intergenerational cycle of poverty by supporting educational attainment and encouraging greater social mobility."

The RCSLT has established a network of expert SLTs from across the UK to support and inform the BBC's work. We would like to extend our thanks to all SLTs involved, and to Michelle Morris in particular, who will sit on the advisory group, along with colleagues from I CAN and The Communication Trust, and will be acting as the BBC's point of contact on behalf of the RCSLT.

To read more about the initiative, visit: bbc.in/2uXjWco.

Best practice for brain injury

A best practice study day for SLTs working with adults with acquired brain injury has been held in Preston, Lancashire.

Co-organised by SLTs Naomi Saul, Catherine Sanderson, Rowan Cooper and Lindsay King, the event's key note speakers included Dr Jane Mortley, who presented her aphasia therapy software programme, and Jan McIntosh from the Brain Injury

Rehabilitation Trust.

The challenges of living with a post-traumatic cognitive communication disorder were also on the agenda for discussion, as were current issues and live case studies relating to the Mental Capacity Act 2005.

Following a good attendance and positive feedback, plans are underway to repeat the event.

Apprenticeship makes progress

The trailblazer group working on the speech and language therapy apprenticeship has been busy drafting a degree level apprenticeship standard. The RCSLT is delighted to be working on the project with 13 employers and four universities, as well as Skills for Health. The group's focus has been on ensuring the standard is compatible with the newly developed RCSLT curriculum guidelines, and we expect there to be a six-week consultation in the autumn.

🕒 **Details of when the consultation opens will be posted on the RCSLT's website, newsletter and social media channels (see bit.ly/2qQtipZ).**

Stroke Awards shortlist

Congratulations to SLT Dr Celia Woolf, who has been shortlisted in the Professional Excellence category of the Stroke Association's Life After Stroke Awards. Dr Woolf, who has worked in aphasia rehabilitation, research and education for nearly 30 years, is director of the CommuniCATE Aphasia Clinic at City, University of London, and is a senior lecturer at St Bartholomew's Hospital and the London School of Medicine, where she trains medics in how to communicate with people with aphasia. The Professional Excellence Award can be awarded to GPs, care workers, nurses and physiotherapists, as well as SLTs.

🕒 **The 2018 award winner will be decided by public vote (see bit.ly/2OWjMv1).**

Computers in therapy

The Computers in Therapy CEN recently held a study day where, of the 10 delegates who attended via livestreaming: 100% agreed it was good value; 100% agreed livestreaming was an acceptable delivery method; no delegates experienced technical difficulties; and feedback was very positive.

🕒 **More information at [@citcen](http://citcentoolkit.wordpress.com).**

Peer reviewers wanted

Development of the leadership and local influencing learning journey has begun and the RCSLT is looking for peer reviewers.

🕒 **For more information please visit the learning journey page: bit.ly/2KKwGJq. The peer review will take place in November 2018.**

New Basecamp group

A new Basecamp group on public health and wellbeing has been set up. If you are interested, please join to start sharing your projects, resources and ideas: bit.ly/2LNq3v8.



**Kirsty
Bui**

Opinion

Not every graduate starts out knowing what career path they want to take. **Kirsty Bui** shares her thoughts on finding the role that's right for you

Choosing a specialism



ILLUSTRATION Sara Gelfgren

With a new wave of graduates about to enter the profession, I wanted to share my experience of finding my place in the world of speech and language therapy, along with some tips and tricks I've learnt along the way.

On graduating, it can feel as if a pressure exists to pick a specialism immediately. In my own case, choosing a specialism

didn't come easily. While I had good feedback from my paediatric placements, I always thought I wanted to work with adults. This was compounded by the fact that I graduated in 2011: a chronically bad time for NHS recruitment freezes.

Because I couldn't initially find work in the NHS, I worked in a children's centre as a family support worker, as an intermediary in courts, and

finally as a private paediatric SLT, before securing my first post in the NHS.

That position was a community paediatric bank post, which was to have a silver lining for me, as I managed to work in a wide range of settings for almost three years before deciding that the role wasn't for me.

It was during a training course on the use of vibrato in choirs that I had my 'light bulb' moment and realised it was voice that I wanted to specialise in. After volunteering at a voice clinic for a year, alongside working in my NHS role, I managed to obtain my first adult post working on a stroke ward, and then on acute wards, before securing my first position specialising in voice.

By making continual efforts to improve my skills—attending training courses, setting up a local journal club, shadowing colleagues, and honing my clinical abilities—I managed to eventually get to where I wanted to be.

“When it comes to specialisms, stay flexible and open-minded”

My advice for new graduates:

- Don't panic if you don't yet have a clear focus or know what you want to specialise in. Try out a few different areas at band 5 level—sideways moves in the same band are a great idea. Volunteering, shadowing colleagues, attending courses, and being proactive will stand you in good stead while you make up your mind.
- Once you've found what you enjoy, don't worry if it feels far removed from the role you're currently in. Focus on

finding a 'next step' that helps bring you closer to your goal.

- It would be wonderful if more settings could introduce a greater quantity of band 5 posts that allow a mix of paediatric and adult work for new graduates, as used to be the case. My next post has a mixture of paediatric and adult patients—all that time spent in paediatrics continues to be worthwhile.
- Rotational positions are fantastic. Not only will they help you to decide on a specialism, they also help to develop well-rounded clinical skills.
- It's said that a person will change career an average of five to seven times throughout their life. Changes can apply within the same profession, too. When it comes to specialisms, stay flexible and open-minded.
- Rejections aren't easy for anyone. If you're not having any luck at job interviews because of a lack of direct experience, don't give up. By concentrating on enhancing your clinical skills—and boosting your CV at the same time—you'll eventually have success.
- A message for hiring managers: do consider candidates who may not have worked directly with your caseload but have strong transferrable skills. A proactive, independent-minded and holistically strong individual will, in all probability, be able to quickly pick up the clinical skills you require and make a great asset to your team.
- As a final word for graduates: make your own luck! Network with other therapists, create opportunities, and be proactive. ■

Kirsty Bui, specialist speech and language therapist

Twitter: @kirsty_bui

Raising awareness: dysphagia management in adults with a learning disability

Pamela Kyriakides and **Sue Martin** describe a joint initiative to improve dysphagia management at a learning disability day service

ILLUSTRATION BY **Cat Finnie**

Dysphagia is common in adults with a learning disability (ALD) and can lead to a variety of health problems, including asphyxiation, malnutrition, dehydration, respiratory illness and death (Ball, Panter, Redley, Proctor, Byrne, Clare & Holland, 2012).

As SLTs can implement strategies to manage dysphagia, the manager of a local ALD day service and the learning disabilities SLT at Whittington Health Trust agreed to embark on a joint project aimed at improving the implementation of dysphagia recommendations.

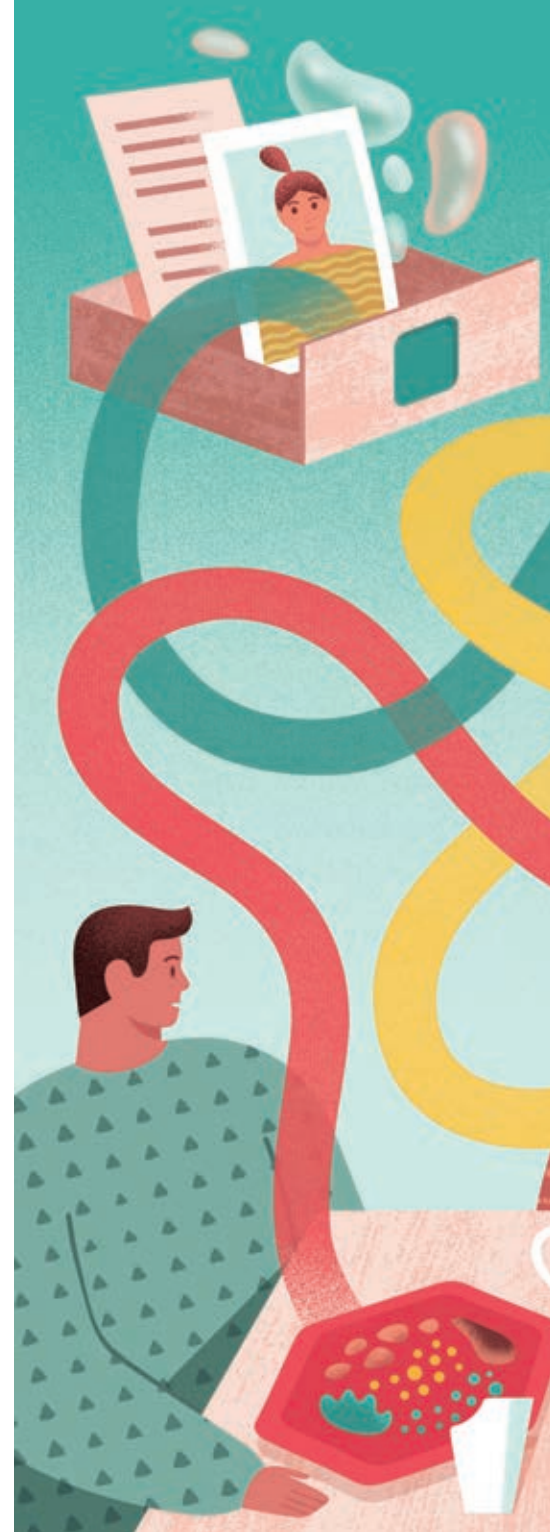
The day service had been experiencing ongoing issues with compliance around dysphagia management and wanted guidance to implement strategies aimed at averting risk and raising staff awareness of the issues involved.

Service users were aged 19–65 years old and had mild to profound learning disabilities. A total of 16 had dysphagia, and/or were at increased risk of choking, with eating and drinking (E&D) guidelines in place. As the project began, the SLT team observed regular non-compliance. Day service staff demonstrated limited insights into the risks of dysphagia, offering 'high risk' foods to service users and referring to out-of-date guidelines. Where up-to-date guidelines were in use, directions were implemented inconsistently.

Barriers and challenges

The SLTs began by implementing a number of strategies aimed at addressing these issues. They included:

- dysphagia training sessions for kitchen and support staff;
- printing E&D guidelines presented as 'mealtime mats', using a bright yellow background and black font to make them more eye-catching;
- changing terminology from 'guidelines'



to 'instructions'; and

- issuing signature sheets to confirm staff had read and understood E&D instructions.

Despite these strategies, compliance did not improve. During review assessments, there appeared to be limited awareness of service users' wellbeing in relation to following speech and language therapy instructions, and of the fact that dysphagia management was a joint responsibility.

A way forward

The SLTs, together with the day service management team, agreed that a different approach was needed in order to overcome these issues.

The SLTs facilitated a meeting with day service managers using a Solution Focused



“The day service was experiencing issues with compliance around dysphagia management and wanted SLT guidance”

Brief Therapy approach (de Shazer et al, 2007), which allowed the team to compare current support to how the “perfect service provision” would look. The ideas generated from this discussion led to the development of the Dysphagia Action Plan (DAP), which outlined actions needed to improve support for ALD with dysphagia. A member of the management team also agreed to be the ‘dysphagia champion’, acting as the key link between SLTs and day service staff to drive the DAP forward.

The DAP actions included:

■ **Consistent availability of relevant equipment and utensils**

The dysphagia champion purchased portable storage drawers and assigned each drawer to a service user with dysphagia. These contained the service user’s equipment along with a photo as a way of identifying which utensils belonged to a particular client (as recommended by Crawford et al, 2007) along with up-to-date SLT instructions and signature sheets.

■ **Consistent use of instructions**

An information-sharing protocol was developed that outlined the responsibilities of SLTs and day service staff in ensuring E&D instructions were received electronically, then printed and placed in the appropriate service user’s drawer, while old instructions were destroyed. If the receipt of new instructions was not confirmed within 24 hours, for example, then it was the SLT’s responsibility to contact the day service to check if they had been received.

■ **All staff completed dysphagia training**

Training in dysphagia and recognising the importance of speech and language therapy recommendations has been found to improve compliance (Chadwick 2002, Crawford 2007). A comprehensive dysphagia training day for support workers, kitchen staff and managers was run by a team comprising SLTs, occupational therapists and physiotherapists.

Staff were asked to complete a questionnaire pre- and post-training, which included a rating scale of 0-10 to measure their confidence in supporting service users with dysphagia (with 0 being not confident and 10 being completely confident). Dysphagia training for new staff members was also made available throughout the year.



Establishing a robust system of good communication

Speech and language therapy instructions became a standing item in team meetings, management meetings and during supervision. Core groups for each service user were established to create a group of experienced carers

who had good knowledge of the service user's needs, and which encouraged staff to support their less confident colleagues.

Outcomes

The speech and language therapy dysphagia lead met regularly with the day service

dysphagia champion, as well as carrying out 'drop-ins' over a six-month period to informally monitor compliance of E&D instructions. Table 1 shows some of the improvements observed.

Project findings indicated that the introduction of the DAP improved the quality of mealtime support at the day service, and with it, the hopes of bolstering safety for service users. The accompanying improvement in staff knowledge and confidence backed up this assertion.

The SLTs recognised that some barriers to compliance remain difficult to overcome, such as a lack of time and resources. On reflection, a limitation of the project was that a formal baseline measure for compliance did not exist, nor did an audit tool to measure improvements to compliance over time.

Future plans

Next steps in the project will be to develop an audit tool to measure compliance on a more formal basis, and SLTs will continue to work in partnership with the day service to maintain and develop the DAP. The team will also consider applying the DAP to other local services within the borough, where the need applies. ■

Pamela Kyriakides and Sue Martin,
Islington Learning Disabilities Partnership,
Whittington Health NHS Trust. Email:
Pamela.Kyriakides@islington.gov.uk and
Sue.Martin@islington.gov.uk

Before the DAP	Risk	After the DAP
1. Equipment and utensils unavailable, misplaced or incorrectly used.	Inappropriate and inconsistent support.	<ul style="list-style-type: none"> ■ Centralised location for equipment established (drawers). ■ Easily accessible and appropriate equipment made available. ■ Duty manager carried out daily audit using a checklist to ensure all equipment was present, thereby promoting independence and safety.
2. Out-of-date instructions in use and held in disorganised, unlabelled folders leading to safeguarding alerts.	Reduced independence and quality of support.	<ul style="list-style-type: none"> ■ Current E&D instructions stored in allocated service user's drawer. ■ Dysphagia champion conducted weekly audit to ensure current E&D instructions were in use, thereby promoting independence and safety, and reducing the risks of aspiration, choking, and safeguarding alerts.
3. Inconsistent level of knowledge about dysphagia and risks of non-compliance, leading to increased need for SLT support.	Non-compliance leading to increased risk of aspiration and choking.	<ul style="list-style-type: none"> ■ Dysphagia training provided increasing staff recognition of the importance of compliance with E&D instructions, and confidence in supporting ALD with dysphagia to eat and drink (Figure 1 below shows a sample of participants who reported a 94% increase in confidence and knowledge).



References

Ball, S. L., Panter, S. G., Redley, M., Proctor, C.-A., Byrne, K., Clare, I. C. H. & Holland, A. J. (2012) 'The Extent and Nature of Need for Mealtime Support Among Adults with Intellectual Disabilities'. *Journal of Intellectual Disability Research*, 56 (4), 382-401.

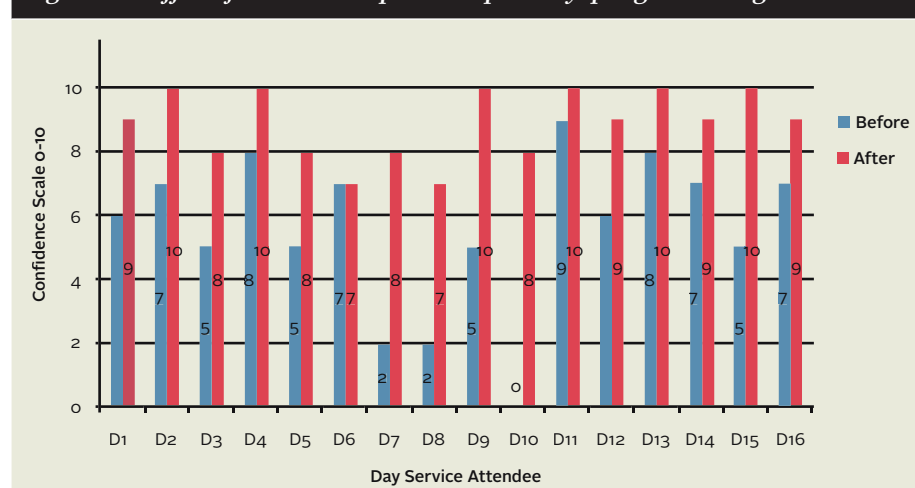
Chadwick D. D., Jolliffe, J. & Goldbart, J. (2003) 'Adherence to Eating and Drinking Guidelines for Adults with Intellectual Disabilities and Dysphagia'. *American Journal on Mental Retardation*, 108 (3), 202-211.

Crawford, H., Leslie, P. & Drinnan, M. J. (2007) 'Compliance with Dysphagia Recommendations by Carers of Adults with Intellectual Impairment'. *Dysphagia*, 22, 326-334.

de Shazer, S. & Dolan, Y.M., Korman, H., Trepper, T.S.; McCollum, E.E. & Berg, I.K., (2006) *More than Miracles: the State of the Art of Solution Focused Brief Therapy*. New York: Haworth Press.

Samuels, R. & Chadwick, D. D. (2006) 'Predictors of Asphyxiation Risk in Adults with Intellectual Disabilities and Dysphagia'. *Journal of Intellectual Disability Research*, 50 (5), 362-370.

Figure 1. Staff confidence levels pre- and post- dysphagia training



NUTRICIA Nutilus Clear

Are you ready
for IDDSI?

We are!

IDDSI aligned Nutilus Clear
now includes a new scoop and
updated mixing instructions in
line with IDDSI guidelines.

For more information visit
our IDDSI learning hub on
nutriciahcp.com/adult/studies
and click the dedicated IDDSI tab.

This information is intended for healthcare professionals only.
Nutilus Clear is a Food for Special Medical Purposes and must
be used under medical supervision.



**SUPPORTING YOU TO
SUPPORT YOUR PATIENTS**

Animal magic

Libby Hill explores the beneficial role that dogs can play in speech and language therapy

ILLUSTRATION BY **Lauren Rebbeck**

Studies by the late psychologist Boris Levinson were the first to formally identify that pets “help to form a strong connection between client and therapist”. (Chandler, 2005).

Levinson was referring to counselling, but other studies have also shown that the presence of companion animals can influence an environment, making it happier, more enjoyable and less forbidding. Chandler (2005), for example, states that “pet practitioners can be especially helpful when working with populations who might be discouraged, unmotivated, resistant or defiant, or who have poor self-insight, deficits in social skills, or barriers to developing relationships”.

This is particularly relevant when considering the inclusion of a therapy dog in counselling, but what about other therapies? Why not speech and language therapy?

Animal-assisted therapy

I saw first-hand the power of animals while I was filming for the Channel 4 *Born Naughty* series. In it, 9-year-old Honey (who had undiagnosed ASD) had recently trashed a children’s centre. Not only that, but she shouted at the TV crew and let us know, in no uncertain terms, that she was not going to oblige us with any degree of co-operation.

Honey lashed out physically and verbally, to the extent that the Channel 4 producer felt it would be inappropriate to include her in the programme. But I was keen we should try, particularly as Honey’s mother had already explored several avenues in an attempt to have her daughter’s behaviour understood.

As one of Honey’s interests is animals, we decided to take her to therapy centre Sunshine Barn, where the resident counsellor uses various animal-assisted therapies (AAT).

At the centre, Honey was a different child: happy, relaxed, compliant and appeared to be in her element, making it easy for me to assess her language skills.

I decided I needed to understand why this had been the case: what was the evidence base around using animals? If it was as good as it seemed to be, then I wanted my own ‘miracle’ to facilitate assessment and therapy, as my caseload comprises many Honeys.

Compelling evidence

I began by studying with HumAnima—a community interest company (CIC), based in the Midlands, which runs a three-day course in AAT.

On the course, I learned alongside teachers, social workers and counsellors who were looking to use all sort of creatures in their work, including snakes, giant centipedes, rabbits, spiders and donkeys. We even met a skunk called Lola, who was a regular visitor in nursing homes, and a tortoise called Speedy who was able to elicit conversation from folk



who had long since given up talking under normal circumstances.

At HumAnima, I learned about the compelling evidence base for using animals as part of a general therapy process (eg Farnham, 2002; Odendaal, 2000; Van Fleet, 2008), as well as all the necessary policies, procedures and risk assessments I’d need to comply with, if I was to take this route.

And then I found Ralph, the naughtiest pup in the litter!

Ralph the labrador (pictured below) joined the practice in July 2015, aged eight weeks, and passed his Pets As Therapy (PAT) assessment less than a year later.

Working with a dog

Research and experience has demonstrated that the use of dogs as “co-therapists” may be of assistance to counsellors in counselling withdrawn and non-communicative counselees. The use of AAT and animal-assisted activity (AAA) may be another useful tool. I wanted to use Ralph as a co-therapist on most occasions, but as part of an animal-assisted activity on others.





“Having a dog in the session allows children to relax more”

■ Animal co-therapists

My caseload comprises children with ASD and complex communication difficulties, as well as children and young people with selective mutism (SM). The common theme throughout is anxiety, both diagnosed and apparent.

Having a dog in the session allows the child to relax more. To be greeted by a wagging tail and a wet nose (Ralph, not me!) detracts and distracts from the fact that children are coming to a therapy centre.

Ralph sits by the children as they talk to me with his head on their knee and, where necessary, will offer a neck to cry on.

■ Animal-assisted activity

Working with children with SM is always a challenge and no two cases have been the same, in my experience.

I started to work with Millie, a 9-year-old girl with SM, who had been making good progress at school, to the extent that she was able to read aloud with a teaching assistant in

a quiet room (a process that had taken about four weeks).

Millie wanted to be able to speak to her three uncles, whom she was very close to in the absence of a father figure. Her uncles often took her to lovely places, bought her beautiful presents and loved her to bits, but they had never heard her voice.

I set up an obedience training session with Millie and Ralph, where Millie practised getting the dog to follow a series of simple commands, such as “sit” and “wait”.

At first, Millie’s voice was very quiet, almost a whisper, but after just a few minutes, her voice became stronger, louder, and her commands more assertive.

I asked Millie if it would be ok to bring one of her uncles into the kitchen so he could see what a good dog trainer she was, and she agreed.

I had already explained to her uncles that they must not react to hearing Millie speak, as would be their instinct, as this would be

counter-productive.

On hearing Millie give Ralph his orders, her uncle casually said, “What a good trainer, Millie,” and left the room. Although he had appeared very calm, as soon he was on the other side of the door, he did a huge, celebratory fist pump!

The same process was repeated with Millie’s other two uncles, and then with all three of them together. At all times, Millie’s voice was clear and calm.

Her mother contacted me a few days later to say that Millie had progressed to the point that she could talk to her uncles, as long as they didn’t ask her questions with a high language load (ie she could answer yes/no, forced alternatives and simple questions). What’s more, Millie got her own dog shortly afterwards.

Conclusions

There will be cases where I can’t use AAT, such as when there’s a possibility that a child might hurt the dog, or if the child dislikes dogs. I always ask the child or young person if they want to have Ralph in the session. Having the dog there is not an automatic choice for me.

“The value of pet ‘therapy’ is widely accepted as a powerful aid to stimulation, motivation and communication,” said Levinson (1997), who believed that his co-therapist dog, Jingles, was able to develop solid relationships with children and establish an atmosphere of trust.

Likewise, my work has shown that animals can be a great asset in speech and language therapy for children and young people with ASD and more complex communication difficulties, as well as those that have SM.

Libby Hill, consultant SLT at Small Talk Speech & Language Therapy.

Email: office@smaltalk-ltd.co.uk

@smaltalkers



References & resources

- Levinson, B.M., Mallon, G.P., 1997. *Pet-oriented child psychotherapy*. Charles C. Thomas, Springfield, Ill., U.S.A.
- Chandler, C.K., 2005. *Animal assisted therapy in counselling*. Routledge, New York.
- Johnson, M and Wintgens, A 2016. *The Selective Mutism Resource manual 2* Routledge.
- Martin, F, Farnum, J., 2002. *Animal-assisted therapy for children with pervasive developmental disorders*. Western Journal of Nursing Research 24, 657–670.
- Odendaal, J.S.J., 2000. *Animal-assisted therapy—magic or medicine?* Journal of psychosomatic research 49, 275–280.
- VanFleet, R., 2008. *Play therapy with kids & canines: benefits for children’s developmental and psychosocial health*. Professional Resource Press, Sarasota, Fla.

Leading from the front

Dr Joanne Fillingham talks with Amelia Dale about leadership, learning and building a successful career

The career path of a speech and language therapist can take many forms. As a newly qualified practitioner (NQP) there are so many possibilities that it can sometimes seem overwhelming, and the ‘right’ career path for you, not always possible to predict. This was certainly the case for Dr Joanne Fillingham, who, keen to embark on a job helping others, began studying speech and language therapy as an undergraduate in 1994. She has recently been appointed the first Clinical Director for Allied Health Professions (AHPs) at NHS Improvement and is Deputy Chief AHP Officer.

Career journey

“When you speak about speech and language therapy to the lay person, they automatically think about treating children,” Jo says. “I naïvely went into the profession thinking that children would be the people that I’d be working with, and, of course, a large percentage of SLTs do. My older brother needing speech and language therapy as a child is what brought me to the profession in the first place. But, during my undergraduate course, I started to get really interested in acquired neurological impairment and the consequences of brain injury on a person’s speech and language.”

“As a student, I met a lady who’d had a stroke in her 20s, and that changed my view completely. She was young and the stroke had caused a massive change in her life. Her new-found challenges appealed to my instincts and values of wanting to help and support; not just in terms of speech and language, but I was thinking: as a health professional, what was

my responsibility in terms of this lady’s needs in life?”

Jo worked as a practising therapist for several years, with the idea that her career trajectory would eventually lead to a role as a speech and language therapy manager. But, following the inception of the Health and Social Care Act, she realised there was a different path where her clinical skills and leadership aspirations could be applied more widely.

“I suddenly started to realise that becoming a speech and language therapy manager was probably never going to happen because, in my case, I wasn’t sure if those roles were necessarily going to exist. So I started to think, if those roles aren’t going to exist, then where will I sit? Will I just continue to be a very highly-skilled experienced clinician? Or did I want to try something else?”

Jo began to look elsewhere for management opportunities, working in operational management across multidisciplinary teams. “It started to widen my view about other professions, about integrated care, about management and leadership in an organisation, and governance structures.”

When Jo took time off to have her son, thoughts about her career path came into sharp focus once again. Born with a congenital heart defect, he required open-heart surgery at one week old. It was this first-hand experience of patient care that shaped Jo’s next professional move.

“I just had this real feeling that I needed to be in the system somewhere else where I could influence in a different way for good patient care. The NHS saved my son’s life, without a doubt, and we received compassionate care throughout his journey and continue to do so.

“When I came back from maternity leave, I



started to look for other opportunities. I think when I qualified as an SLT I didn’t see myself as an AHP, I don’t think I knew that term. But, at some point in my career, I started to recognise that there was this wider group of professions who were vital to care delivery. And, if we collectivised our efforts we would have a stronger voice to demonstrate the transformative potential for better patient outcomes.”

Following a number of secondments with Health Education England and NHS England, Jo was appointed to the first Clinical Fellow post and led the development and implementation of AHPs into Action: using AHPs to transform health, care and wellbeing, on behalf of the Chief Allied Health Professions Officer, Suzanne Rastrick. Following this fellowship, Jo was appointed to the newly created role of Clinical Director for Allied Health Professions at NHS Improvement in 2016.

Her latest leadership role

NHS Improvement is responsible for overseeing NHS trusts and providers across the UK, supporting them to deliver the best care they possibly can. “Essentially, NHS Improvement is about ‘How do we share the good stuff, so that the good stuff is consistently applied?’” Jo says.

As the AHP lead within the organisation, Jo ensures that AHPs have a voice in relevant National NHS Improvement programmes, and that AHPs in the field are getting the support they need to deliver great care.

“I ensure that AHPs, including SLTs, have a voice within the national organisation and



“If we collectivised our efforts we would have a stronger voice”

are recognised in terms of their skillset and potential,” Jo says, citing campaigns such as the National Falls Programme, ‘Stop the Pressure’ (to prevent pressure ulcers), and the infection prevention and control initiative, where she’s played a key role in making sure that AHPs’ perspectives are included.

“Previously many of these programmes would have had largely medical and nursing leadership representation,” she says.

“AHPs offer diverse leadership that is vital to the delivery of high quality care. We have emerging evidence that this is the case across NHS provider organisations in England, which can be found in the current publication *Leadership of AHPs in trusts: what exists and what matters.*” (See bit.ly/2lmwxRV for more details).

Advice for students and NQPs

Jo says that the opportunities available for SLTs today, particularly as a student or those just starting out in their careers, are incredible. One example of this is the student leadership programme run by the Council of Deans of

Health and the Burdett Trust for Nursing: #150leaders. She also says it’s never too early for NQPs to start looking ahead and that embracing support networks can make a world of difference.

“Network and get as much support as possible as you take that journey to being a confident and competent SLT,” Jo says. “And don’t just network within your comfort zone. Go and seek out networks or other areas that you might not have thought would be of interest to you, because you just never know.”

“Once you start being a confident SLT, don’t get ‘siloed’. Yes, soak up that profession, but look up and out at the skills of other professions—how they lead and practise. You might be able to take some lessons from that”.

Social networks

Jo has been one of the most vocal supporters of SLTs using social media as a professional tool. She runs the Twitter account @WeAHPs with two physiotherapist colleagues and two AHP students who are part of #150leaders. She was also one of the founding members of the

@ReSNetSLT Twitter journal club.

Jo says that when she first discovered Twitter, she immediately recognised that it was a great untapped resource. “Social media gives you instant access to information to help you to learn, reflect, build networks and connect,” she explains. “When I worked in Staffordshire, the CEO of the organisation at started using Twitter. I was really fascinated with how he capitalised on using it as a tool to communicate.”

For those who want to network and connect with colleagues, but who may not be able to do this in a face-to-face environment, social media offers some amazing opportunities. “On Twitter I’ve built relationships with people I’ve never even met,” Jo says. “When I see them in person I never know whether to shake their hand or give them a hug! In the first two years of running @WeAHPs, the team of three had actually only been in the same room together three times. We’d built a virtual community of networked health and social care professionals, learning and sharing to improve care, working virtually by ourselves. It shows the potential it has to offer!”

When approaching a platform like Twitter as a professional tool, Jo’s advice is to observe before you jump in and start posting. “Ask yourself: why am I using this as a tool; for what purpose? Thinking about that before you go on social media is a very useful thing to do, because then you can be clear and confident about why you’re using it and what you want to gain from it.”

Expect the unexpected

“Did I plan my career? Possibly not! However, I do like to plan. So, on reflection, I think I have made career steps with some guiding principles, which are at the core of why I became an SLT in the first place: that I wanted to help and support people to be happy, well and live fulfilling lives. Along that journey my personal and professional experiences have shaped who I am, what I believe and therefore how I behave and act. I have been open and permeable to new experiences and have therefore been able to influence, and be influenced. Doing the same might take you on a different journey, too.” ■

.....
Dr Joanne Fillingham

Email: jo.fillingham@nhs.net

Twitter: [@jkfillingham](https://twitter.com/jkfillingham)



References

www.england.nhs.uk/ahp/ahps-into-action-improvement.nhs.uk/resources/leadership-allied-health-professions-trusts-what-exists-and-what-matters/
councilofdeans.org.uk/studentleadership/

Members first

The RCSLT's 2018 member survey gives a snapshot of the profession today. **Morag Dorward and Della Money** highlight some of its findings

Thanks to everyone who responded to the RCSLT membership survey. We had 2,700 participants complete the survey who were representative of the member database in terms of categories of members (practicing, student, retired, and so on) and also geographic spread. Our survey snapshot told us:

- Three in 10 participants were from London and the south east
- 4% were located in each of the north east of England, Wales and Northern Ireland
- 10% were from Scotland
- 3% are employed by universities
- Two in five have been to a CEN meeting in the last year
- Participants mean age was 42.

Who employs SLTs?

This year's member survey is full of further fascinating facts about the profession, one of the most interesting being who SLTs work for. For those with just one employer, the figures are as follows:

- One third of all survey respondents have portfolio careers, with more than

Employer	%
NHS	73%
Independent practice	11%
School	3%
Local authority	3%
University	3%
Other	7%

- one employer (which may include self-employment).
- Of those with portfolio careers, one in two included the NHS as an employer, and one in two included independent practice.
- A last point on employment is that only 55% of respondents worked full-time, while 45% were part-time.

What do members value?

Membership organisations often use a measure called the Net Promoter Score (NPS) to determine overall member satisfaction. It's done by subtracting those who give the lowest ratings from those who give the highest ratings, leaving out those in the middle. It's the same method you'll see used to say whether a politician has a positive or negative image with the public.

The last member survey in 2014 gave RCSLT an NPS of +18, so it is pleasing to report that the NPS for 2018 is +24. Alongside this, most members are highly likely to renew their membership.

Other 'mosts' included:

- The most used member benefits are *Bulletin* and the CPD diary.
- The most important element of membership is access to up-to-date knowledge and information.
- The most important feeling about being a member is that the profession has a collective voice.
- The RCSLT is rated most effective at shaping the future of the profession.

Member challenges

The survey gave a sobering precis of the challenges of being an SLT today. The challenges most often mentioned were:

- workload—volume and pressure;
 - providing an effective, quality service that meets patient needs;
 - staffing levels, turnover and recruitment;
 - cuts and financial constraints;
 - having the resources to deliver;
 - time constraints—finding the time to do everything;
 - maintaining CPD; and
 - respect and recognition for the profession where roles are being downgraded.
- Sharing these challenges helps to inform the work we do with decision-makers on your behalf and the resources we develop to support you.

Making things better

There is one area above all where members wish to see improvement: the website. Readers will know the priority being given to a digital transformation and developments in this area are expected soon. The other areas that are priorities for you are communication about the RCSLT's activities and the benefits of membership, as well as the variety of resources available and the ease of access to them.

Improving access to speech and language therapy services and outcomes for people with communication and swallowing needs was another area where you would like to see effectiveness increased.

Making use of the survey

The member survey links to the RCSLT's strategic plan through key performance indicators around member satisfaction, but also member engagement ie working collaboratively to make things better.

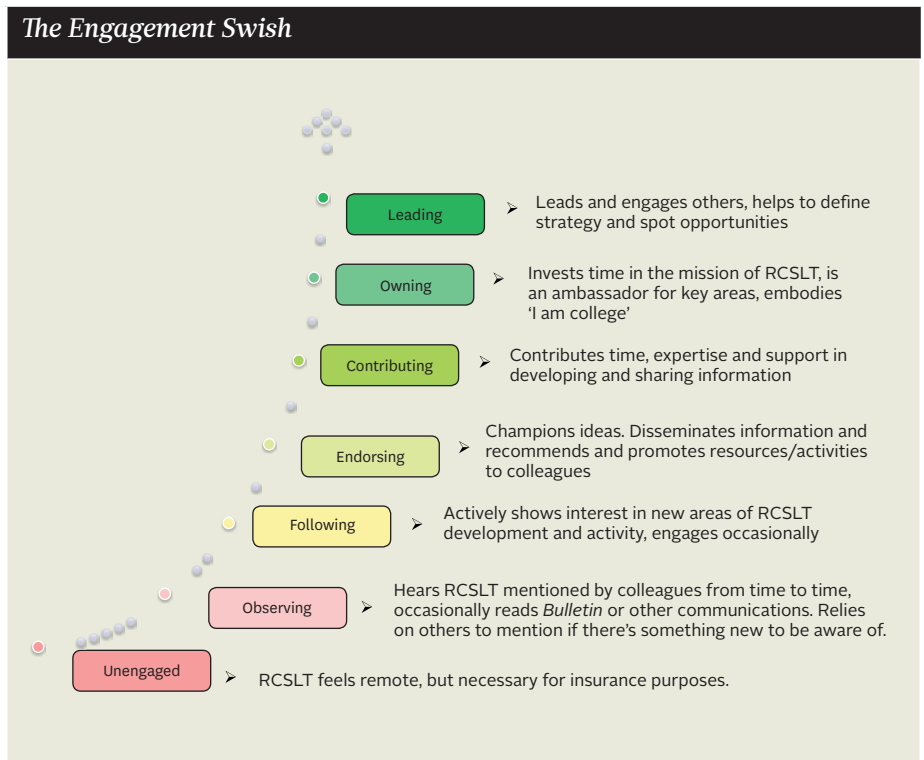
“It will inform the work we do with decision-makers and the resources we develop to support you”

The model we use for this is based on Gideon Rosenblatt's 'engagement pyramid'. We call our adaptation the engagement swish (see graphic): it runs from a category called 'unengaged' at the bottom, to one called 'leading' at the top.

Different people will want to be engaged to different degrees and at different times—not everyone wants to be a leader, and members will have more time to offer at some points than at others. The Board of Trustees of the RCSLT hopes that most members would be endorsers. We also want those members who would like to move up to contributing, owning and leading to find the door open and the route clear.

A snapshot survey of members in the West Midlands saw most people rate themselves as observing or following, but with an aspiration to be endorsing or contributing. Over the next three years the goal is to make this a reality. ■

Morag Dorward, RCSLT Chair;
Della Money, RCSLT Deputy Chair



Royal College of Speech and Language Therapists

Notice of 2018 Annual General Meeting

Notice is hereby given that the Annual General Meeting of the Royal College of Speech and Language Therapists will be held on **Thursday 4 October 2018, at 12.25 p.m. in the Mercure Holland House Hotel, 24-26 Newport Road, Cardiff, CF24 ODD.**

All members are welcome to attend the AGM

The AGM agenda, minutes of the 2017 meeting, background notes, booking form and proxy voting form are **now available to be downloaded from: www.rcslt.org**

Please note that:

- only Full Members are entitled to vote at the AGM.
- under Section 324 of the Companies Act 2006, a member of a company is entitled to appoint another person as their proxy to exercise all or any of their rights to attend and to speak and vote at a meeting of the company. The RCSLT Articles require that any proxy appointed must be a member of the RCSLT.

If you wish to send in a proxy form, it must be addressed to the Company Secretary and received at the RCSLT **no later than 5pm on Tuesday 2 October 2018.** Proxies received after that time will not be counted.

Papers for those members who have requested formal notices to be sent to them in hard copy will be posted out by first class post on Monday 3 September. Please contact the Company Secretary at RCSLT if you do not receive them within a reasonable time. If you would like your AGM papers sent in hard copy, and have not previously notified us, please write to the Company Secretary at RCSLT. Likewise, if you no longer require papers to be sent to you in hard copy, it would be helpful if you could inform us, so that we can save on postage costs.

By order of the Board

Brian Gopsill ACIS, Company Secretary





Katie Chadd

Katie Chadd reports on the RCSLT 2018 Research Champion Workshop

Harnessing the power of diversity

In July we welcomed almost 80 RCSLT research champions to London for a day of celebrations, reconnecting and learning. The 2018 Research Champion Workshop was a first for many: not only for some delegates, but also for the research and development team. Building on our predecessors' successful efforts co-ordinating the Research Champion Workshop in 2016, we were delighted to welcome a number of returning members, as well as a host of new colleagues whose presence demonstrated the recent growth of the network.

The workshop's aim was to reunite and reinvigorate this diverse network, which remains key in promoting our profession as evidence-based and research active. Planning of the day was overseen by Research and Development Trustee Dr Rebecca Palmer who, although unable to join us physically on the day, shared her passion for research with us via Twitter! We were pleased Dr Hazel Roddam joined us as co-compère on the day,

alongside RCSLT research and development manager Amit Kulkarni, who chaired event proceedings.

Following an update on research and development at the RCSLT, we reflected on the remarkable diversity of the research champions' network in multiple dimensions, including clinical expertise, research engagement, employment settings and level of training.

The power of diversity was harnessed in the first activity of the day, with research champions exchanging ideas for research-related activities they could incorporate into their everyday roles. In response to previous feedback from the network, we have collated these ideas to produce a practical resource. Called the *Research Champions' Activity Menu*, this working document provides suggestions for activities and is available at tinyurl.com/zjhcb42.

Top talks

For the remainder of the day, the focus was on learning from success stories.

Our panel comprised Dr Richard Francis, head of research awards at the Stroke Association, and Dr Mal Palin from the National Institute for Health Research, who gave advice on clinical-academic fellowships and tips on applications (see tinyurl.com/yc897mbe and tinyurl.com/ycd94ddj).

Other speakers included independent therapist Sarah Buckley, who has done tremendous work in boosting her company's research culture, while Dr Heidi Siddle, consultant podiatrist, presented on Leeds Teaching Hospitals' NHS Trust's successful strategy for providing clinical-academic career opportunities. Having research champions see how research can be achieved while working within independent practice and the NHS provided a motivating start to the day.

One of the most engaging talks came from Dr Claire Mitchell and Annette Dancer, whose recovery following a stroke has informed Claire's research. In their joint presentation, the power of patient voice in shaping research and clinical intervention was echoed by Annette's invaluable repeated advice, which was, "don't assume". Not making assumptions about patients may be the pivotal step in achieving a holistic evidence-based approach in directing research and delivering care. You can read more about this dynamic double-act on their *Evidently Cochrane* blog: tinyurl.com/y9exrsqb.

Lightning talks from research champions provided an opportunity to give credit to an overly humble group of therapists. Fantastic examples of championing research came from Sam Burr, Anna Sowerbutts, Dr Sally Archer and Dr Avril Nicoll, who have all found innovative ways to engage colleagues, teams and whole trusts in research and evidence-based practice (EBP).



Ideas included setting up an EBP newsletter and offering prize incentives for research activity.

While embedding a research and evidence-based culture is not without its challenges, our champions confirmed that solutions do exist; the use of Normalisation Process Theory to support a practitioner's change in behaviour being one example given (see tinyurl.com/y8hemn3g).

An excellent series of talks on being a clinical academic was given by Anna Volkmer (representing ClinAcSLT) alongside Dr Sally Boa and Hazel Warren.

The diversity observed in the day's presentations and posters reinforced the notion that every SLT is capable of understanding and doing EBP and research, and it is time to debunk any suggestion to the contrary. Many

Research and Development Forum



ILLUSTRATION BY Daria Skrybchenko

“The focus was on learning from success stories”

of the presentations and posters from the day are available to members on the RCSLT website: tinyurl.com/y77jpe47

Practical parallels

Drawing on research champions' feedback from previous workshops, and during the planning stage of this year's event, delegates were given the chance to vote on 'hot topics' they wanted covered in

skill-based workshops, which our guest experts helped to co-ordinate.

Some particularly lucky research champions worked with Professor Julian Pine, deputy director of LuCiD, on activities designed to improve their grant writing skills. SLT PhD candidates Katherine Broomfield, Jacqui Benfield and Lisa Everton led sessions on PPI in practice and research, early

career research funding and research design. Karen Sage, professor for Allied Health Professions (research) at Sheffield Hallam University, presented options for 'Life after PhD'.

The RCSLT team organised activities based on EBP and shared tips on writing for *Bulletin*. Each session required research champions to identify tangible goals or key resources to facilitate implementation.

Useful resources included:

- Research funding toolkit (www.researchfundingtoolkit.org)
- FINER (Feasible, Interesting, Novel, Ethical, Relevant) and PICO (Patient, Intervention, Comparison, Outcome) tools for developing research questions
- INVOLVE Briefing notes for researchers (tinyurl.com/y7odfewa)
- Research under the Spotlight elearning (www.rcsltcpd.org.uk)

Take-home messages

Each component of the day served to highlight valuable advice. One particularly empowering tool emphasised is one we're well-rehearsed in using: communication. Voice your aspirations, talk to your supervisors, discuss with your patients, and convince your managers. As well as: don't assume, resist reservations and initiate interactions.

From workshops we learnt that being an evidence-based practitioner relies on communicating your thoughts, concerns, expertise and opinions, listening to your patients, and heeding the advice of others. The lightning talks showed us that instigating research activities in your team is dependent on getting colleagues on board, demonstrating its importance to seniors and articulating your passion. Presentations, surgeries and workshops highlighted that talking with mentors, creating networks, and seeking support

are essential to fellowship applications. Learning from others and building on colleagues' experiences can help secure research funding, or get a paper published.

It is reassuring that the outlook for our profession's competency and capacity to embed and carry out research in practice is looking bright. There will always be barriers to overcome, but if we use our communication strengths to unlock some of them, and are open to learning, then SLTs will be better placed to succeed in providing evidence-based, effective, high-quality care to our patients.

Leading the charge

RCSLT research champions can be at the forefront of the movement to define our profession as evidence-based and research active.

In order to facilitate this, we will be asking for feedback from our research champions on a semi-regular basis about how they are fulfilling their role. This is to ensure continued momentum in our overarching aim, and to help the RCSLT to build a solid foundation to support the profession long into the future.

We encourage our research champions to be generous with their expertise and share their knowledge. An evidence-based and research culture in SLT services is within the realms of possibility but the key to attaining this will be communicating with and learning from others. We are grateful to have such committed research champions acting as trailblazers and look forward to seeing the network and profession develop further. ■

To find out more about becoming a research champion, visit tinyurl.com/zjhcb42 or contact **Katie Chadd**, RCSLT research support officer, by emailing katie.chadd@rcslt.org

RCSLT Study Day and AGM 2018

***Speech and language therapy:
Showing your worth through
value-based healthcare***

Thursday 4 October 2018

**Mercure Holland House Hotel
24-26 Newport Rd, Cardiff, CF24 ODD**

Join us at this year's national RCSLT Study Day, which aims to develop attendees' understanding and use of a value-based approach to delivering speech and language therapy services.

Learning objectives:

By attending this event, delegates will:

- Be aware of the strategic context for improvement
- Understand value-based healthcare as an improvement approach
- Gain a better understanding of the policy drivers from across the UK
- Have the opportunity to hear from colleagues and experts in the field
- Be aware of where additional information and resources can be found
- Have the opportunity to develop a personal plan for implementing learning



**BOOK
YOUR
PLACE**

Places are limited
BOOK NOW
TO AVOID
DISAPPOINTMENT

- **RCSLT Member:**
£24 (£20+VAT)
- **Non-member:**
£48 (£40+VAT)
- **AGM only: free**

The delegate fee includes lunch, refreshments and materials. Please note that terms and conditions apply.

**To book your place, please visit:
www.rcslt.org**



Our monthly look at the latest in published research

In the journals

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

Evaluating aphasia education

Speech and language therapists provide aphasia education to people with aphasia and their families, however the effectiveness of this education is rarely evaluated. Aphasia education could be optimised by having greater access to aphasia-friendly materials and extending education to friends of people with aphasia (PWA).

The authors of this article surveyed 130 SLTs working with PWA in Australia, using a 30-item questionnaire. The study aimed to explore SLT perspectives regarding current and optimal approaches to aphasia education.

The education provided by SLTs included aphasia characteristics, recovery, communication strategies and coping strategies. The majority of SLTs (>95%) provided information in both a verbal and written format, however only 45% considered their written information to be aphasia-friendly. Other forms of education included online resources and connecting PWA via education groups.

Fewer than one in five SLTs (18%) evaluated the effectiveness of the education they provided, and 92% of SLTs considered the education they provided to be sub-optimal. SLTs reported that greater access to downloadable, aphasia-friendly resources and information for friends of PWA would help to optimise aphasia education. The authors suggest: "Increased tailoring of information and access to aphasia-friendly information would assist SLTs in meeting best practice recommendations for aphasia education".

Aislinn O'Reilly, speech and language therapist, Barking, Havering & Redbridge University Hospitals Trust



Tanya A. Rose, Anita Balse, Sarah Osmond, Angela Poon, Natasha Simons & Sarah J. Wallace (2018): Aphasia education: speech-language pathologists' perspectives regarding current and optimal practice, *Aphasiology*, 32:8,967-988

Storybook benefits

This study reports improved language and social communication scores from early storybook reading (ESR) intervention workshops for babies as young as three-months old. It found improved language and social communication skills were immediate and were maintained at two-years of age.

Participating in the study were 23 parent-child dyads (age of child: three-12 months) who were assigned into two intervention conditions: low and high intensity (LI vs HI). The HI group received additional intervention time and support. Outcome measures were assessed pre-intervention, post-intervention and when the child turned two, using *Preschool Language Scales - Fifth Edition (PLS-5)* and *Communication and Symbolic Behaviour Scales Developmental Profile (CSBS)*.

The results indicate that both groups demonstrated significant improvements in language, broader social communication and home reading practices scores. However, the high-intensity group showed statistically higher PLS scores compared to the lower-intensity group.

Although, "both groups demonstrated a significant improvement... findings do suggest that the additional three hours of intervention along with e-mail support provided to the high intensity group were valuable".

Hannah Lane, speech and language therapist, Doncaster and Bassetlaw Hospitals Trust



Brown, M.L., Westerveld, M.F; Trembath, D; Gillon, G, T (2017) Promoting language and social communication development in babies through an early storybook reading intervention. *International Journal of Speech-Language Pathology*.

Telepractice needs more research

This review article sought to confirm anecdotal evidence that telepractice is a feasible method of delivering early intervention services to children with hearing loss and their families. The authors found that, as yet, there is not sufficient research data to confirm this.

Twenty three studies were reviewed that discuss the use of telepractice with this client group. A range of benefits associated with using this method of service delivery were described. These included easier access to services and potentially more choice for families; greater flexibility of appointment timings; increased engagement by families; improved participant satisfaction; and potential cost-effectiveness. Challenges cited were technical difficulties, availability of funding streams and need for staff and participant training.

The studies varied considerably in their terminology, in the technology used for the telepractice and in the implementation models used (ie who was seen and whether telepractice was used exclusively or in conjunction with in-person appointments), with a wide variety of evaluation methods.

The authors advise, "More research is needed to validate the use of telepractice as a viable alternative, rather than a supplement, to traditional in-person services."

Amanda Odell, advanced specialist in communication, Nottingham Auditory Implant Programme



McCarthy M, Leigh G, Arthur-Kelly M. Telepractice delivery of family-centred early intervention for children who are deaf or hard of hearing: A scoping review. *Journal of Telemedicine and Telecare* 2018: 1-12, <https://doi:10.1177/1357633X18755883>

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



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

Obituary

Judith Chaloner

1932–2017



Judy Chaloner was a rare and exceptional human being. In her professional life, she excelled as a clinician, colleague, friend, supervisor and mentor. For SLTs and SLT students who had the privilege of knowing and working with her, she offered support, knowledge, warmth and inspiration.

Judy's various posts as a clinician included roles at West Middlesex Hospital (for more than 20 years) and Charing Cross Hospital. Over the course of her career, she worked in the fields of stroke, head injury, neurodegenerative disorders, cleft lip and palate, counselling, laryngectomy and voice. Her professional legacy remains in evidence today, from the skills she encouraged in other clinicians, to the services and support she set up for patients (not least West Middlesex Hospital's laryngectomy support group). Judy also created a set of relaxation tapes that were used by a succession of voice clinicians for many years.

Judy was a therapist's therapist: practical, honest, enthusiastic, holistic and client-focussed. She truly cared for her patients and other SLTs she worked with. Part of her work included setting up counselling courses for staff.

Judy was a pioneering SLT in the field of voice therapy for the trans community, running outpatient clinics and group sessions at West Middlesex Hospital and Charing Cross Hospital. Nowadays, voice services for the trans and gender diverse population have expanded and continue to develop, but in its formative years,

therapists were sorely lacking in the field. In the absence of clinical guidelines or training, it required a therapist with insight, empathy, compassion, sound voice skills, a true acceptance of the diverse nature of humanity, and the ability to work autonomously. Judy possessed these qualities in spades.

For many of us, meeting Judy was a turning point in our lives. We felt a kindred spark. People bonded with Judy because she took a deeper interest in people than just the work. She was positive, generous, welcoming, fun and caring about each individual she encountered. We all remember her wonderful sense of style, bold accessories and her infectious sense of humour.

Judy was known for her matchmaking skills. Perhaps her interest in the happiness of her colleagues emanated from her own very happy and long-lasting marriage to her beloved husband Bill, whom she adored. Judy often shared her family news and stories. She was blessed with loving children and grandchildren, of whom she was extremely proud.

In her early married life, Judy lived in a number of places overseas, which added to her rich, cultural life experience. Although

not Jewish herself, she had a keen interest in the Jewish faith, which her daughter Sarah told us about at Judy's funeral service. The closing music chosen for the service was the joyous song *To Life* from the musical *Fiddler On The Roof*. For Judy, who celebrated life and spread so much joy to others, the song seemed exactly right.

All of us who remember Judy treasure our time with her. She enriched the lives of all her colleagues, as well as a large and diverse range of patients. It is fitting that for a clinician so well known for her skills in voice work, that her own voice, with its clear, rich, American tones, was so distinct and memorable.

Judy will be sorely missed, but never forgotten. One of her most skilful and endearing characteristics was her ability to put people at ease while simultaneously eliciting the best out of them. For many of us, she was a leading light in our field.

Judy Chaloner was a true star in our profession and that star will always shine bright.

.....
Christella Antoni, Shivini Bhuttacharji, Anne Breaks, Sonya Chevis, Lulu Housman, Sue Novell, Kim Zabihi (SLTs who worked with Judy)

“She offered support, knowledge, warmth and inspiration”

FROM HOSPITAL TO HOME

Proud
suppliers to
the NHS

apetito

Wiltshire Farm Foods is part of the
apetito family, providers of award winning
meals to hospitals. apetito.co.uk

Pictured: Purée Petite Turkey in Gravy

Because our expertly prepared Softer Foods range of texture modified meals is available in hospital and at home, patients who have difficulty swallowing can always rely on the same safe, nutritious meals.

For more information or to book a free tasting session, visit specialistnutrition.com or call 0800 066 3702



THE QUEEN'S AWARDS
FOR ENTERPRISE:
INNOVATION
2016

OVER 80 DELICIOUS DISHES IN TEXTURES C,D & E

NUTRITIONAL EXPERTISE

FREE FRIENDLY DELIVERY

WILTSHIRE

EST. **FARM** 1991

FOODS

SEPTEMBER CEN NOTICES

CLINICAL EXCELLENCE NETWORKS

Send your CEN notice by email to bulletin@rcslt.org by 6 September for the October issue, 6 October for November and 6 November for December. To find out more about RCSLT CENs, visit: tinyurl.com/rcsltcens

Children who have Social Emotional and Mental Health Needs CEN (SE)

7 September, 9.30am – 3.30pm

This is a participant-led day; please bring assessments/resources/interventions to share. We will be discussing: current projects, issues raised from practice, SLT boundaries, developing services, mental capacity and feedback from trainings. Venue: Universities at Medway. For more information and to book a place, email marian.mccormick@canterbury.ac.uk

London Adult Neurology CEN

10 September, 9am – 4.30pm

Study day: Motoring ahead with MDT management of Motor Neurone Disease. Includes MDT speakers from Kings College Hospital MND clinic, The National Hospital for Neurology and Neurosurgery and COMPASS, covering a wide range of topics, including: dysphagia and respiratory management; palliative care and advanced care planning; and voice banking and AAC. Venue: Bethnal Green PDC. Cost: £30; students, £10. For more information and tickets, visit www.londonadultneurocen.weebly.com

All Wales Neurodevelopmental CEN

19 September

Selective mutism/ASD differential diagnosis; positive behaviour management; PACT (Vicky Slonims); working with the third sector to support families and communities; developmental trauma. Venue: RCSLT Wales, Cardiff. Cost: free for existing members; non-members £15 (lunch included). All professionals welcome; members include SLTs, OTs, clin/ed psychs, paediatricians/psychiatrists and social care. Email: Kathryn.bowen2@wales.nhs.uk

CEN for SLTs with an interest in Applied Behaviour Analysis (ABA)

21 September, 9am – 4pm

Topics: Linzi Tropea and Kirsty Keyburn on establishing the Autism Support UK Saturday School in Bolton; and Natalie Savage, BCBA, presenting on the use of colour-coded feedback systems to measure engagement and quality of life in residential services for adults with autism and additional needs. Venue: The Inscape School, The Together Trust. Cost: £10 CEN members; £20 non-members. All are welcome. For more information, email bethan.mair@tiscali.co.uk

Midlands Stroke CEN

26 September, 9.30am – 4pm

AM: Workshop – a focus on aphasia and apraxia; an opportunity to discuss best practice and share resources. PM: Guest speaker Dr Carole Pound – Caring, kindness and conversation: How can humanising theory support practice? Venue: Royal Leamington Spa Rehabilitation Hospital (CERU), Warwickshire CV34 6SR. Cost: £15 (students/assistants £5). For booking and information, email Rebecca.Davis@swft.nhs.uk

Scotland Dysphagia CEN

26 September, 9.15am – 4.45pm

Rating Instrumental Assessments, presented by Kirsty McLaughlin, Kate Toft and Nadine Hare. Venue: St John's Hospital, Livingston. Cost: £10. Visit: ratinginstrumentalassessments.eventbrite.co.uk

West Midlands CEN for ASD

2 October, 12.30 – 4.30pm

Relaunch event. Network meeting followed by The Girl with the Curly Hair Project's Sam Ramsay presenting on issues related to managing anxiety and the spectrum. Venue: Parkview Clinic, 60 Queensbridge Road, Moseley, Birmingham B13 8QE. More information to follow via email for CEN members. If you wish to join, email cath.clayton@nhs.net

AAC London CEN

10 October, 9am – 4.30pm

Study Day. Theme: What's the latest? A day of updates, case studies and AAC users to keep you in the know. VENUE: The Forum@Greenwich. Refreshments provided. Cost: Annual membership £30. Visit tinyurl.com/y7s286zu or email aaclondoncen@gmail.com

East Midlands AAC CEN

11 October, 10am – 2pm

Venue: Bennerley Fields School, Stratford Street, Ilkeston DE7 8QZ. Cost: free. If you would like to attend please email Claire.Sayers@nottshc.nhs.uk

Specific Learning Difficulties CEN Conference

12 October, 8.45am – 4pm

Topic: Integrating SpLD into the Curriculum. Speakers: Douglas Silas – EHCPs, GDPR, Children and Families Act; Maggie Johnson (SLT) – active listening for active learning; Rosie Gibbons (OT) – sensory challenges and practical strategies; Elklan – Communication Friendly Programme. Venue: Caledonian Club, London SW1X 7DR. Cost: £110. The AGM will be held at 3.30pm. Contact spldsiglondon@gmail.com to book.

Communication Therapy International CEN

13 October, 11am – 5pm

Venue: Islington Outlook, Archway, London. A focus on the practical side of planning and delivering projects in low and middle income countries, including a session on appropriate paper-based technology. A unique opportunity to hear from SLTs who have been involved in a range of overseas projects and to take part in group discussions and networking. Cost: £16 waged; £9 unwaged. To book, visit www.communicationtherapyinternational.org/study-day-2018

Acquired Communication Disorders CEN

18 October, 9.30am – 4pm

Study Day: Dyspraxia. Venue: Leeds Beckett University. Cost: SLTs £10; students £5. Guest speakers: Rosemary Varley on dyspraxia; Heather Waldron on phonological aphasia; and Miranda Leach presenting a case study. Email your details to acquiredneurocen@gmail.com to join the CEN contact list.

Central Neuro-Rehab CEN

18 October, 9.30am – 4.30pm

Rehabilitation of reading comprehension and dysgraphia in adults with acquired neurological impairments. Venue: Birmingham Central Library, Birmingham. Cost: SLTs £30; students/SLTAs £15 (payable with booking by BACS). Limited places; to enquire or book email: centralneurorehabcen@gmail.com.

South West Speech CEN

19 October, 1.30 – 4.30pm

Study day hosted jointly with the Bristol Speech and Language Therapy Research Unit – assessing speech in children from multilingual backgrounds: current research and clinical applications. Speakers include Barbara May Bernhardt, Joe Stemberger, Jane Speake and Rhonwen Lewis, and the day will end with a panel discussion with audience questions. Venue: The Vassall Centre, Gill Avenue, Bristol BS16 2QQ. Cost: £15 + bf. Visit: tinyurl.com/yaz3uqbh

Trent Dysphagia CEN Study Day

31 October, 9am – 4.15pm

Topics to include: oral care, cough reflex testing, updates on IDDSI and more. Opportunities for clinical case and service discussion throughout the day. Venue: Chesterfield Royal Hospital, Education Centre, Chesterfield, Derbyshire S44 5BL. Cost: £10. To book your place, contact trentdysphagiacen@outlook.com

Dementia and Mental Health of Older Adults CEN (formerly Psychiatry of Old Age (Southern CEN))

6 November, 9.30am – 4.30pm

Study Day Programme: Dr Chris Hardy on the National Rare Dementia Support Group; Dr Vitor Zimmerer on formulaic language use in dementia and schizophrenia; Lindsey Collins on people with dementia and dysphagia in care homes; workshops on formal language assessment in dementia; AGM and more. Venue: RCSLT, London. Cost: £15 for members and students; £25 for non-members. For more information and to book, email dmhcen@gmail.com or visit www.dementiamentalhealthcen.com

South West Brain Injury CEN

15 November, 10am – 4pm

Theme: Social communication interventions for people with ABI. Guest speaker Dr Nicholas Behn, City University. Cost: £15 (to be paid on the day). Location: The Vassall Centre, Gill Avenue, Bristol BS16 2QQ. The agenda for the study day will be advertised on Basecamp. For more information and to reserve a place, contact Sarah Gibbin (email: sarah.gibbin@nbt.nhs.uk)

National CEN in Selective Mutism

15 November, 9.30am – 4pm

'A day on Practical Approaches in Selective Mutism Management', to include Maggie Johnson and others. Venue: The Church at Carrs Lane conference centre, Carrs Lane, Birmingham, B4 7SX. To book, visit: www.eventbrite.co.uk/e/managing-selective-mutism-a-day-of-practical-approaches-professionals-only-tickets-48279866380

Practical approaches to working with children who have social, emotional and mental health needs CEN

16 November, 9.30am – 4pm

Limited places left on this one-day workshop run by Ian Long, co-creator of The Blob Tree visual tools. Cost: current members free; new/unpaid members £20. Venue: Kaleidoscope Centre, 32 Rushey Green, Catford, SE6 4JF. For more information and to reserve your place, email donnahopesalt@gmail.com by 17 October.

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

Medico Legal CEN

16 November

Bond Solon Training: Experts are increasingly asked to write Joint Statements, so the CEN has arranged for Bond Solon to provide their half day to support this process training at a significantly reduced price. Half-day training (am or pm). Venue: London, E1 8QS. Cost: members £150; non-members £200. To attend email: jo.intospeech@gmail.com.

Computers in Therapy CEN

20 November, 9am – 4pm

Venue: Winter Gardens Weston Super Mare. Exploring the use of Virtual Assistants (Alexa/Siri/Ok Google) in therapy. Guest speakers and hands-on demonstrations. Looking at emerging evidence, and discussing their uses with a variety of client groups. Cost: £20 to be paid in advance (£10 for livestream attendance). Book on Eventbrite –search CITCEN.

South East CEN in Deafness

November (date TBC), 9.30 am – 4.30 pm

Focus on Solution Focused Brief Therapy (SFBT) with Kidge Burns. London (venue TBC). Refreshments provided. Cost: annual membership (from April) £15 (covers two meetings); non-members £10 per meeting; concessions £5. To book, email: m.curtin@nhs.net

Your essential RCSLT information

London HQ

2 White Hart Yard, London SE1 1NX
Tel: 020 7378 3000

Northern Ireland

Arthur House, 41 Arthur Street, Belfast BT1 4GB
Tel: 02890 446385

Scotland

49 North Castle Street, Edinburgh EH2 3BG
Tel: 0131 226 5250/4940

Wales

2nd Floor, Transport House, 1 Cathedral Road,
Cardiff CF11 9SB
Tel: 029 2039 7729

Enquiries (professional)

Tel: 020 7378 3012 Email: info@rcslt.org

Enquiries (membership)

To change your name, your address, your membership type and anything to do with member payments.

Tel: 020 7378 3008/3011 Email: membership@rcslt.org

Website: www.rcslt.org

RCSLT jobs website:
www.speech-language-therapy-jobs.org
Giving Voice: www.givingvoiceuk.org

RCSLT social media

Twitter: twitter.com/RCSLT
Facebook: www.facebook.com/RCSLTOfficial

RCSLT insurance

Read the policy and download your insurance certificate. Visit: www.rcslt.org/members/professional_roles/rcslt_insurance/intro

Research Centre

www.rcslt.org/members/research_centre/introduction

Member journal access

RCSLT members can access more than 1,700 journal titles for free in the RCSLT Journals Collection.

www.rcslt.org/members/research_centre/journals_collection

Clinical decision-making

Our interactive online tool provides a step-by-step guide to evidence-based clinical decision-making process.

www.rcslt.org/members/research_centre/e_learning/tools

Creating evidence

Visit the 'Doing research' and 'Clinical academic research careers' webpages to help you in all elements of carrying out research.

www.rcslt.org/members/research_centre/introduction

Get involved in research

Find out more about RCSLT research champions and how to join the network.

www.rcslt.org/members/research_centre/become_a_research_champion

RCSLT research publications

View our 'Research and Development Forums', 'Ask the Experts' series, research newsletters and 'In the Journals' summaries of recent research articles.

www.rcslt.org/members/research_centre/newsletters_articles_and_publications

International Journal of Language and Communication Disorders

Access the current issue and entire back catalogue. tinyurl.com/rcslt-pubs

RCSLT Bulletin

Online archive (2003 to present day)
www.rcslt.org/members/publications/bulletinonline

Email: bulletin@rcslt.org

Writing for the Bulletin: tinyurl.com/qcgkwld

Advertise jobs in the Bulletin and online

Tel: 020 7880 7668

Email: christian.plucknett@redactive.co.uk

Advertise courses in the Bulletin

Email: gemma.davies@redactive.co.uk

Advertise clinical excellence network meetings in the Bulletin

Email: bulletin@rcslt.org

Clinical Excellence Networks

www.rcslt.org/members/professional_networks/cen_introduction

RCSLT Hubs

www.rcslt.org/members/professional_networks/rcslt_hubs/introduction

Email: hubs@rcslt.org




AYMES®
New Product Series

Acusist Clear

A new gum-based thickener to help promote safe swallowing

Amylase resistant **AYMES® Acusist Clear** stabilises the consistency of drinks and meals. With **68% less sodium** than the next-lowest competitor, choose **AYMES® Acusist Clear** for all levels of dysphagia.

- **28% cheaper than the market leader***
- **IDDSI Compliant**



Custom Scoop Supplied IDDSI compliant directions for use clearly presented on the back of the pack

ORDER NOW

nourishment made simple

For more info log on to AYMES.com or call Customer Service on + 44 (0) 845 6805 496

Speech and Language Therapist

Salary: £25,000-£30,000 depending on experience

Sarah Buckley Therapies Ltd is an established speech and language therapy practice. We provide speech and language therapy to primary and secondary schools in five London Local Authorities.

SBT was a London finalist in the Federation of Small Business' Employer of the Year category 2018. We are looking for a newly or recently qualified speech and language therapist to join our team.

- We offer robust clinical supervision for all our therapists
- We have experience in supporting new graduates to complete their competencies in the first year of working
- There are opportunities for additional training and support as part of continuing professional development
- We support clinical research and evidence-based practice
- Posts are permanent. All flexible working requests will be considered

Please see our website for further information about our practice and contact us to find out about the range of employee benefits that we offer:
www.sarahbuckleytherapies.co.uk

Closing date: 1st October 2018

t. 020 8313 1939

e. jobs@sarahbuckleytherapies.co.uk



Speech & Language Therapist required for Outstanding Special School Band 6

Contract: 37 hrs/week, Term Time + 1 week inset
Location: New Ash Green, Kent | Start: December 2018
Specialist Areas: Education, Special Schools

What are we looking for?

- RCSLT recognised degree/diploma and a registered member of RCSLT
- Membership of the Health Professionals Council
- Experience of assessment and management of complex communication needs
- Experience of alternative and augmentative communication systems
- A commitment to multi-disciplinary/agency working
- Experience of working in a school setting

We can offer:

- Clinical supervision
- Excellent CPD opportunities
- Dysphagia training (if required)
- The chance to join an Outstanding Special School

For further information, please call Olivia Couzins (Talent Manager) on 01634 412 240
Search 'vacancies' on www.milestoneacademy.org.uk
to view the full advert, job description and to submit your application.

Closing Date: Monday 1st October 2018



Specialist Paediatric Speech and Language Therapist Vacancies (2 roles)

Brainwave South East Centre, Witham, Essex

For both roles, HCPC and RCSLT registration is essential.

Role 1:

Up to £30,000 dependent on experience
Permanent Full Time 37.5 hours per week.
May involve working on Saturdays in our London Satellite Clinics 4 times a year.

Role 2:

Up to £30,000 dependent on experience, pro rata
Permanent Part Time 22.5 hours per week (3 consecutive days each week). May involve working on Saturdays in our London Satellite Clinics 4 times a year.

Brainwave is a long-established national charity providing therapy to children predominantly aged between 6 months to 12 years. The children we work with have a range of conditions and diagnoses including cerebral palsy, developmental delay, autism, brain injury and Down's syndrome, along with other genetic conditions and children with no formal diagnosis.

We are seeking 2 Paediatric Speech and Language Therapists with experience of using a range of interventions and strategies to support complex communication needs of children with learning disabilities and profound and multiple learning disabilities. Formal training or relevant experience of using Parent Child Interaction approaches, Augmentative Alternative Communication (AAC) methods (Switches, PECS, Eye Gaze, Makaton signing etc) and knowledge of Dysphagia assessment and treatment and Sensory Integration approach is desirable.

The therapist will be joining an expanding multidisciplinary team of the current Speech and Language Therapist, Physiotherapists and Occupational Therapist to deliver joint assessments and treatment programmes.

Closing date: Sunday 30 September 2018

Please see www.brainwave.org.uk/careers for full details and job description.

Or for an informal discussion please contact:

South East Centre: Sri Murugesan, Centre Manager

Email: srimurugesan@brainwave.org.uk or Telephone: 01376 505290.

Brainwave South East Centre, Beechen House, Rear of 16 Newland Street, Witham, Essex SM8 2AQ





Discover what it really means to effectively involve parents

Attend an **It Takes Two to Talk®** Certification Workshop and gain a parent coaching framework from The Hanen Centre, an international leader in parent-implemented early language intervention.

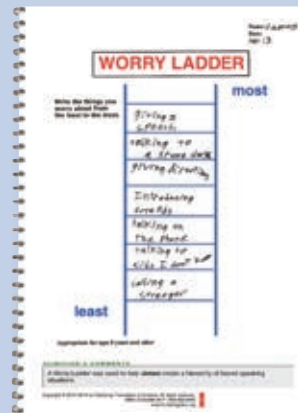
You'll learn how to effectively engage parents through explicit teaching, coaching and scaffolding and help them become effective language facilitators for their child.

Space is limited! Register today for this upcoming workshop:

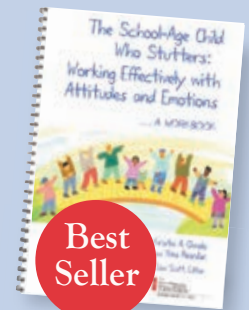
London, England, Oct 31-Nov 2, 2018

Wirral (Liverpool), England, Sept 17-19, 2018

www.hanen.org/ITTTworkshop



Large 8½ x 11"

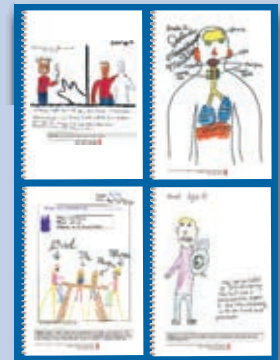


Best Seller

192 spiral-bound, reproducible pages

This workbook offers a powerful tool for stuttering diagnostics and therapy, focusing exclusively on assessing and treating feelings and beliefs in school-age children.

Workbook No. 0005



www.StutteringHelp.org/Store



THE STUTTERING FOUNDATION® 901-761-0343
A Nonprofit Organization Since 1947 — Helping Those Who Stutter

city lit Award-winning training

Effective counselling skills for SLTs
17-19 October 2018 £369
5-7 June 2019 £369

Counselling skills are central to speech and language therapy. This course (relevant to work with any client group/carers) will develop confidence in understanding and using these skills.

Motivational interviewing for SLTs
NEW
23 October & 20 November 2018 £199

Motivational interviewing skills focus on exploring and resolving ambivalence while supporting change in a manner congruent with the person's own values and concerns. You'll learn a range of practical skills, with the opportunity to practise them in a safe environment.

Follow-up day mindfulness skills
7 December 2018 £99

Learn ways to help clients develop emotional regulation skills and become more grounded. Explore how mindfulness can improve the relational quality of therapy and identify when mindfulness approaches may be contraindicated.

Advanced working with adults who stammer
28-29 January 2019 £199

For SLTs who wish to advance their adult stammering therapy skills, covering topics such as stammering modification work, cluttering, acquired stammering as well as case discussion.

Prioritisation and assertiveness for recently-qualified SLTs
18 February 2019 £79

Learn strategies for managing your time and balancing competing clinical and non-clinical priorities. Learn about assertive behaviour and practise key assertiveness skills that are highly relevant in a range of situations.

Working with adults who stammer
25-27 February 2019 +
follow-up day 7 October £459

Comprehensive training covering assessment, block modification, interiorised stammering, art therapy and acceptance and commitment therapy.

Counselling skills for recently-qualified SLTs
16 March 2019 £79

Develop and practise a range of essential core counselling skills to help you work with emotional issues you will encounter as an SLT.

Introduction to mindfulness for SLTs
9-10 May 2019 £199

Relevant to work with both paediatric and adult client groups, this introduction to mindfulness-based stress management and mindfulness-based cognitive therapy will provide valuable professional learning as well as personal strategies for stress management.

Facilitating aphasia communication groups
17 July 2019 £109

This interactive and experiential workshop will explore creative and effective ways to run conversation groups with people with aphasia.

Speech and language therapy as a career
Throughout the year £99

Receive lots of observation requests from potential SLT students? Tell them about this practical 2-day workshop where they learn about the profession and meet clients.

Plus tailor-made courses delivered locally.

Topics include adult stammering therapy, counselling skills, group work, assertiveness, process of change, supervision, stress management and mindfulness.

experience
outstanding
learning

Please contact: speechtherapy@citylit.ac.uk | 020 7492 2578
www.citylit.ac.uk/courses/specialist-learning/speech-therapy
City Lit, Speech Therapy, Keeley Street, London WC2B 4BA.

NEW

Stass
PUBLICATIONS
SLT resources, for SLTs by SLTs

Digital Supporting Acquired Communication Disorder

By Fiona Sugden-Best

Updated and available as a CD



Promotional
15% discount!

Usual price is £35
Price for Sept only is
£29.75

Promo code: SACD-CD

250 assessment and graded exercise sheets for oromotor skills, voice and breathing, articulation, communication skills and AAC for 11 years +.

All organized to be printed easily on demand. A manual with examples is included for instant reference.

01208 841450
www.stasspublications.co.uk



Aparecido Soares

OCCUPATION: SPEECH LANGUAGE PATHOLOGIST, PHD STUDENT AND CLINICAL TUTOR AT THE UNIVERSITY OF SÃO PAULO

“In the UK, I was introduced to a completely new perspective on speech and language therapy”



I was lucky enough to meet Professor Victoria Joffe, from City, University of London, when she visited Brazil, recently. As a clinical tutor and PhD student at the University of São Paulo (USP), I was fascinated to hear from Victoria about the UK’s approach to speech and language therapy. So much so that, with support from USP’s professors, I was able to arrange an exchange visit to City University so that I could learn about it in person.

The first difference to strike me was the different names we go by in the profession: in Brazil, we are known as speech language pathologists (SLPs) and our remit also extends into audiology.

Another big difference I found between the two countries is that Brazil’s therapeutic model is centred around one-to-one interventions. Whether carried out in private clinics, public institutions, or with medical patients on hospital wards, this approach predominates.

One-to-one intervention is considered so vital in Brazil that SLP undergraduate students must spend at least 20% of their total study time being supervised by a clinical tutor in a practice setting. At USP, where an undergraduate degree in SLP takes five years to complete, a student will have undergone around 1,845 hours of supervised practice upon graduation.

In Brazil, it is also rare to find SLPs who work in education. While UK SLTs regularly go into schools to assess pupils and train teachers and teaching assistants to deliver interventions, the same is not allowed to take place in Brazilian school settings.

In addition, developmental language disorder in Brazil is not designated as a special educational need (SEN), and special schools are the exception to the rule. On the whole, children with SEN in Brazil attend mainstream schools.

When Brazilian SLPs do go into schools, it is usually with the purpose of developing hearing screening programmes. Outside of school settings, we provide advice to teachers and families about communication disorders in general, teach strategies aimed at helping support children with SLCN, and advise teachers on appropriate curriculum adaptations.

While SLP researchers in Brazil are allowed to develop programmes to intervene more directly with either children or teachers, a big disadvantage of the Brazilian model is that only schools located near universities can benefit from that.

Children with SLCN in Brazil attend

one-to-one interventions with SLPs at least once a week. As Brazilian schools are not full-time, a child’s parents or grandparents will often accompany the child, requiring them to take time out of work. Because of this, in cities such as São Paulo, therapy often takes place within the child’s home, but only for those whose families can afford to pay for visits.

During my visit to the UK, I was introduced to a completely new perspective on speech and language therapy. I attended both mainstream and special schools and observed SLTs in different situations.

It was an absolute pleasure to learn about the UK’s approach to speech and language therapy first-hand.

Both approaches have their strengths and weaknesses. For example, I believe Brazilian SLPs should extend their provision into schools so that more children might benefit from therapy in a familiar environment that they already associate with learning.

On the other hand, I think British SLTs could do more to prioritise one-to-one interventions with those children who have severe or complex learning difficulties (from my observations, it seemed that children with delayed or more minor challenges were being supported effectively by the school team).

Whether based in the UK or Brazil, our profession benefits most when there are opportunities for reflection, revision and refinement of our practices. Not only do such opportunities strengthen us as SLTs/SLPs, they also allow us to provide better support to those with SLCN the world over. ■

.....
@CidoSoares4

QUICK LOOK DATES

2018-19 (ongoing)

Video Podcast Training for Neurological Impairments

This brand-new series of distilled training sessions (each episode is 20 minutes) will enable you to empower your patients to manage, and adjust to, their neurological problems, in a fun and practical way. Cost: £120 for all 12 episodes. Location: Home study – watch the episodes as often as you like (you own them). Email: enquiries@braintreetraining.co.uk; tel: 01276 472 369; visit: www.braintreetraining.co.uk/dlc_vpc.php

Various dates

Talking Mats Courses

Develop your use of Talking Mats at an advanced level. There are opportunities in the following: Dysphagia and Decision Making: 11 September; Train the Trainer: 11-12 October; Advance Care Planning, Stirling: 31 October (morning); Safeguarding, Stirling: 17 October (afternoon); Advance Care Planning, London: 31 October (morning); Safeguarding, London: 31 October (afternoon). Visit: www.talkingmats.com; email: info@talkingmats.com; tel: 01786 479511.

Various dates

Talking Mats Foundation Course

Be more effective in involving people in decision and attend a Talking Mats foundation course. Manchester: 4 October; Edinburgh: 24 October/21 November; Online: 30 October; London: 30 October; York: 15 November; Birmingham: 22 March 2019 (visit tinyurl.com/y8ggdser to book). Visit: www.talkingmats.com; email: info@talkingmats.com; tel: 01786 479511.

Various dates

Elklan Total Training Package (TTP) for pupils with SLD

10-11 October, Shelter, London; 14-15 May 2019, COSLA, Edinburgh. This course equips SLTs and teaching advisors to provide practical, accredited, evidence-informed training to develop communication in children and young people with severe learning difficulties in all settings including mainstream schools. Cost: £495. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

Various dates

ARCOS (Association for Rehabilitation of Communication & Oral Skills)

One-day courses, £130: FOTT Study Day, 15 October; Moves to Swallow, 19 November; Making the Most of Mealtimes, 10 December; Therapeutic Oral Hygiene, 17 September. Five-day two-part courses, £625: 3-5 September (part 1) and 5-6 November (part 2). Email: admin@arcos.org.uk; tel: 01684 576795.

Various dates

PECS Training Workshops

15-16 October: PECS Level 1 Training Workshop, Newcastle. 22-23 November: PECS Level 1 Training Workshop, Manchester. Visit: www.pecs-unitedkingdom.com; tel: 01276 609555.

Various dates

Elklan Total Training Package for Verbal Pupils with ASD

12-13 November, RCSLT, London; 14-15 May, COSLA, Edinburgh. This revised course equips SLTs and teaching advisors to provide practical, accredited, evidence-informed training to those supporting verbal pupils with ASD in all settings including mainstream schools. Covers a wealth of practical strategies and approaches

proven to be effective with these pupils. Cost: £495. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

Various dates

Elklan Total Training Package for 11-16s

13-14 November, RCSLT, London; 6-7 March 2019, Holiday Inn Media City, Salford, Manchester. This course equips SLTs and teaching advisors to provide practical, accredited, evidence-informed training to staff working in secondary school settings and SLTAs. Teacher/therapist teams welcome. Cost: £495. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

Various dates

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

14-15 November (3-5s) and 16 November (0-3s), RCSLT, London; 16-17 May (3-5s), COSLA, Edinburgh. This course equips SLTs and teaching advisors to provide practical, accredited, evidence-informed training to staff working in Early Years settings from 3-5 years. The additional day provides information for those working with 0-3s. Teacher/therapist teams welcome. Option to do one day 0-3s for Elklan Tutors who have trained on Total Training Packages for 3-5s or under 5s. Cost: £495 for 3-5s two days; £745 for all three days, 3-5s AND 0-3s; £250 for 0-3s one day. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

Various dates

Elklan Total Training Package for 5-11s

15-16 November, RCSLT, London; 4-5 March 2019, Holiday Inn Media City, Salford, Manchester; 16-17 May 2019, COSLA, Edinburgh. This course equips SLTs and teaching advisors to provide practical, accredited, evidence-informed training to education staff and SLTAs in all settings including mainstream schools. Innovative advice and strategies help children maximise their speech, language and communication potential and access the curriculum more effectively. Cost: £495. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

17-19 September, Wirral (Liverpool)

It Takes Two to Talk® Certification Workshop

Learn how to facilitate parents' involvement in their child's early language intervention through teaching, coaching and scaffolding so that they can effectively apply the learning to everyday interactions with their child. Visit: www.hanen.org/17-09-18-wirral.aspx

27-28 September, Harrow

Prolonged Disorders of Consciousness Training, Regional Hyper-acute Rehabilitation Unit

Day 1: Translating the PDOC guidance into practice; Day 2: Practical WHIM and CRS-R training. Venue: Northwick Park Hospital, Harrow. Cost: £75 per day. Email: elica.ming-brown@nhs.net; tel: 020 8869 2808

28 September, Birmingham

The current evidence base for school-aged children with developmental language disorder

An update on the current evidence base for intervention for school-aged children with DLD. Cost: £215. Student discounts available. Visit: tinyurl.com/y853ldsl; email: info@coursebeetle.co.uk

8-9 October, London

Elklan Total Training Package (TTP) for post-16s

This course equips SLTs and teaching advisors to provide practical, accredited, evidence-informed training to those working within all post-16 settings, including mainstream schools, and gives staff new approaches and strategies to help young people maximise their speech, language and communication potential and access the curriculum more effectively. Venue: Shelter, Garratt Street, London. Cost: £495. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

11 October, London

Mental Capacity Assessment: focus on acquired neuro case loads

A CTN workshop run with expert SLTs Mark Jayes and Anna Volkmer. Cost: £75. Visit: www.communitytherapy.org.uk

11 October, Nottingham

Rehabilitation Post Laryngectomy: how to teach oesophageal voice

Eryl Evans, author of Working with Laryngectomees, brings her wealth of experience and knowledge to teach this one-day course. Venue: Nottingham Post Graduate Medical Education Centre, Queens Medical Centre. Cost: £125. Email: Jackie.ellis@btopenworld.com; visit: www.svsassociates.co.uk

12 October, Birmingham

Autism: the current evidence base and implications for practice

Update on new and significant research findings with Dr Dougal Julian Hare, Reader in Clinical Psychology, Cardiff University. Cost: £215. Visit: tinyurl.com/yjdbobakq; email: info@coursebeetle.co.uk

17-19 October, Birmingham

Rehabilitation and Functional Outcomes Masterclass

Venue: University of Birmingham. The course aims to present and consider the ways in which multidisciplinary management of patients with head and neck cancer can improve functional outcomes. Leaders in the field of rehabilitation will describe novel and innovative approaches to improving speech, swallow and voice outcomes after surgical and non-surgical treatment of head and neck cancer. Cost: £250. Visit: www.tinyurl.com/RFOMasterclass2018; tel: 0114 225 9143.

19-20 October, London

Understanding and Dealing with Behaviour Problems Following Brain Injury: Workshop

This two-day interactive workshop is suitable for professionals working with adults who have emotional or behavioural problems following brain injury. Cost: £185. Venue: Gatwick Hilton Hotel. Email: enquiries@braintreetraining.co.uk; tel: 01276 472 369; visit: www.braintreetraining.co.uk/ceb_spf.php?id=77

29-31 October, RCSLT, London

PROMPT LEVEL 1: Introduction to Technique

This three-day intensive workshop focuses on teaching the technique of PROMPT (PROMPTS for Restructuring Oral Muscular Phonetic Targets). It teaches a system for assessing and treating language and speech disorders from a perspective of speech-motor control and learning, and trains SLTs to provide tactile-kinesthetic input to support the development of speech movement. Using a holistic framework, participants will learn how to embed



Our therapy materials are developed by world renowned experts:

Vivian Sisskin, M.S., CCC-SLP,
University of Maryland

www.StutteringHelp.org/Store

Helping Children Change Thoughts & Feelings About Communication

2 hours, 55 minutes DVD 6335

Avoidance Reduction Therapy in a Group Setting

2 hours DVD 6740

Autism Spectrum Disorders and Stuttering

2 hours DVD 6730

A Fresh Look at Stuttering

24 minutes DVD 4083



THE STUTTERING FOUNDATION® 901-761-0343

A Nonprofit Organization Since 1947 — Helping Those Who Stutter

speech goals within functional communication, thus developing social interaction and language. 9am – 4.30pm. Cost: \$775 (early bird \$725). Visit: www.promptinstitute.com/events

1-2 November, Nottingham
Fees Training Programme

Practical skills workshop series. Five-day training programme spread across a six-month period commencing November 2018. The structure of the programme is aimed at progressing you through RCSLT competencies to perform FEES safely and effectively. Cost: Full five-day skills workshop series £900 early bird rate, £950 full price; introductory-level two-day course, £400 early bird rate, £450 full price. Venue: Nottingham Clinical Skills Education Centre, Queens Medical Centre Campus. Email: Jackie.ellis@btpenworld.com; visit: www.svsassociates.co.uk

7 November, London

Social thinking and children with hearing loss – joining the dots

With Michelle Garcia Winner. The Social Thinking Methodology helps individuals with social learning challenges learn how to develop their social competencies to better connect with others. Cost: £150. Email: susanna@earfoundation.org.uk

12-14 November, Chorley

PROMPT LEVEL 1: Introduction to Technique

This three-day intensive workshop focuses on teaching the technique of PROMPT (PROMPTs for Restructuring Oral Muscular Phonetic Targets). It teaches a system for assessing and treating language and speech disorders from a perspective of speech-motor control and learning, and trains SLTs to provide tactile-kinesthetic input to support the development of speech movement. Using a holistic framework, participants will learn how to embed speech goals within functional communication, thus developing social interaction and language. Venue: Goodwins Bar and Restaurant, Chorley PR6 7AX. 9am – 4.30pm. Cost: \$745. Visit: www.promptinstitute.com/events

12-15 November, Birmingham

ADOS2 administration and coding course

ADOS2 is the latest revision of the Autism Diagnostic Observation Schedule and is the most widely used observational assessment in the diagnosis of autism. Visit: ados2training.co.uk

12-15 November, Cheltenham

Johansen Individualised Auditory Stimulation

How to use specific and customised music recordings to organise and enhance listening and auditory processing. Supports spoken and written language for all ages. Individual and group programmes. Cost: £500 (early bird £475). Email: camilla@johansenas.com; visit: www.johansenas.com

13 November, Derby

Multidisciplinary Management of Parkinson's Disease

This study day is aimed at all grades of allied health professionals who have contact with Patients with Parkinson's disease in a non-specialist setting. The day looks at a multidisciplinary approach to the management of patients. Each session will be led by a clinical specialist in the field of Parkinson's disease. Venue: Royal Derby Hospital, Derby. Cost: £130. Visit: www.ncore.org.uk; email: dhft.ncore@nhs.net

19 November, Derby

Recognising Post-Traumatic Stress Disorder

Lecturer: Dr Aftab Laher, Consultant Clinical Psychologist/Cognitive Behavioural Psychotherapist. The workshop aims to help health professionals understand more about the development, assessment and treatment of PTSD. The workshop combines both elements of didactic teaching and participative exercises. Venue: London Road Community Hospital, Derby. Cost: £130. Visit: www.ncore.org.uk; email: dhft.ncore@nhs.net

21 November, Leeds

Introduction to working with children and young people with SEMH needs and SLCN

Presented by Melanie Cross, lead author of the RCSLT clinical guidelines on SEMH. Cost: £215, student discounts available. Visit: tinyurl.com/y7rxk9co; email: info@coursebeetle.co.uk

22-23 November, RCSLT, London

smiLE Therapy Practitioner Training: Day 1 and Day 2

Day 1 and Day 2 training for SLTs and specialist teachers in this innovative 10-step therapy that teaches functional communication and social skills in real, everyday settings. Outcome measures integral to each module and generalisation of skills with parents part of the therapy. Suitable for children, young adults and adults with deafness, ASD, DLD, learning difficulties and physical disability, from age 7-25 and beyond. For information and bespoke training to your local team, email: info@smiletherapytraining.com; visit: www.smiletherapytraining.com

24 November, London

Music and SLT: benefits of using music and working with music therapists

Gain practical skills. No musical abilities required. Includes lunch/refreshments. Venue: Radisson Blu Edwardian Grafton Hotel, London. 9am – 4.30pm. Cost: £100 (£90 if paid before 12 October). Email: info@apexability.com; visit: www.apexability.com

26 November, RCSLT, London and 30 November, Showroom Workstation, Sheffield

Launch of Network for SLTs working with people with Rett Syndrome (RTT)

Open to all SLTs working with RTT in any setting, any age group, any level of experience, any region of the UK. Come to a kick-off event to learn about communication challenges in RTT and share experiences with colleagues. Supported by Rett UK. Cost: Free. To register, visit: <https://goo.gl/forms/KZdoSlawMLVtoIXP2>. Visit: www.rettuk.org/events/; email: gill.townend@rettuk.org

27 November, Nottingham

Social thinking in the early years

This course will be looking at a hands-on, practical approach for growing social competence and learning how to take other people's perspectives. Cost: £90 (bring a friend for £10). Email: susanna@earfoundation.org.uk

27 November, Birmingham

TOMs CONNECT 2018: making sense of the data

A one-day conference for users of the Therapy Outcome Measure plus those wishing to learn more about its use. Venue: Council House, Birmingham. Cost: early bird price of £135 available until 10 September; £185 afterwards. For more details, visit: www.communitytherapy.org.uk

27-28 November, London

Royal Brompton Upper Airway Course

For SLTs wishing to know more about the assessment and treatment of upper airway disorders (with live workshops). Only 15 places available. Cost: £350. Lecturers: Dr Julia Selby, Dr James Hull, Mr Guri Sandhu. Email: upperairway@rbht.nhs.uk

3 December, Manchester

Laryngeal Endoscopy in the Assessment and Management of Clinical Voice Disorders.

For more information and booking form please contact Dept. of Speech, Voice and Swallowing. 150 Wythenshawe Hospital, Manchester. Tel: 0161 291 2864 Email: SLTCourses@uhsm.nhs.uk

6-7 December, London

Two-day course: Introduction to Working with Children with Hearing Loss: for SLTs

Explore key issues of working with children with hearing loss. Understand the role of the SLT working with children with hearing loss and the importance of working collaboratively. Cost: £150. Email: susanna@earfoundation.org.uk

12-14 December, Derby

Working with Adults who Stammer

Course Tutor: Rachel Everard. Designed for SLTs, this three-day interactive workshop will cover assessment and selection, stammering modification, interiorised stammering and cluttering. Cost: £330. Visit: www.ncore.org.uk; email: dhft.ncore@nhs.net

9-11 January 2019, RCSLT, London

Communication Support for 0-25s Pupils with Complex Needs and Let's Talk with Special Children Tutor Pack Day

9-10 January: two-day intensive course for practitioners with accreditation, Communication Support for 0-25s Pupils with Complex Needs. 11 January: Let's Talk with Special Children Tutor Pack day. Cost: £380 (special offer: save 235 when you book this course). Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

18 January 2019, RCSLT, London

smiLE Therapy Practitioner Training: Day 3

Day 3 training for SLTs and specialist teachers in this innovative 10-step therapy that teaches functional communication and social skills in real, everyday settings. Outcome measures integral to each module and generalisation of skills with parents part of the therapy. Suitable for children, young adults and adults with deafness, ASD, DLD, learning difficulties and physical disability, from age 7-25 and beyond. For information and bespoke training to your local team, email: info@smiletherapytraining.com; visit: www.smiletherapytraining.com

6 March 2019, Manchester

Elklan Let's Talk with Under 5s Tutor Training Pack

Venue: Holiday Inn Media City, Salford, Manchester. This course is designed for SLTAs, EY practitioners and parents to equip them to provide accredited, practical, evidence-informed training to parents/carers of 2-5 year olds. Participants must have successfully completed the Elklan Level 3 award, Speech and Language Support for Under 5s/0-3s. Cost: £235. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

6-8 March 2019, Manchester

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

6-7 March 0-3s, 8 March 3-5s. Venue: Holiday Inn Media City, Salford, Manchester. This course equips SLTs and teaching advisors to provide practical, accredited, evidence-informed training to staff working in Early Years settings from 0-3 years. The additional day provides information for those working with 3-5s. Teacher/therapist teams welcome. Option to do one day 3-5s for Elklan Tutors who have trained on Total Training Packages for 0-3s or under 5s. Cost: £495 for two days; £745 for all three days; £250 one day. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

7 March 2019, Manchester

Elklan Let's Talk Together Tutor Training Pack

Venue: Holiday Inn Media City, Salford, Manchester. This course is designed for SLTAs, EY practitioners and parents to equip them to provide accredited, practical, evidence-informed training to parents/carers of verbal children with autism aged 4-13 years. Participants must have successfully completed the Elklan Level 3 award in Speech and Language Support for Verbal Children with ASD. Cost: £235. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

7 March 2019, Manchester

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

Venue: Holiday Inn Media City, Salford, Manchester. This course is designed for SLTAs, HLTAs, TAs, SENCOs, teachers and parents to equip them to provide accredited, practical, evidence-informed training to parents/carers of 5-11 year olds. Participants must have successfully completed the Elklan Level 3 award in Speech and Language Support for 5-11s. Cost: £235. Tel: 01208 841450; email: henrietta@elklan.co.uk; visit: www.elklan.co.uk

21-22 March 2019, Durham

LSVT LOUD - Training and Certification Workshop

Designed to train SLTs in a voice/speech treatment technique for adults and children with motor speech disorders, with a specialty in Parkinson's disease. Cost: Various rates available. Visit: www.ncore.org.uk; email: dhft.ncore@nhs.net

1-4 April 2019, Birmingham

Post Registration Paediatric and ALD Dysphagia Course

This four-day taught course plus work-based learning develops skills and competence in dysphagia assessment and management. Cost: £665. Email: info@thespeechtherapypractice.com; visit: www.thespeechtherapypractice.com/training

17 May 2019

smiLE Therapy Practitioner Training: Day 3

Day 3 training for SLTs and specialist teachers in this innovative 10-step therapy that teaches functional communication and social skills in real, everyday settings. Outcome measures integral to each module and generalisation of skills with parents part of the therapy. Suitable for children, young adults and adults with deafness, ASD, DLD, learning difficulties and physical disability, from age 7-25 and beyond. For information and bespoke training to your local team, email: info@smiletherapytraining.com; visit: www.smiletherapytraining.com



We know what you're made of

Are your patients drinking enough?

We all know that water is essential for life. Unfortunately, not everyone finds it easy to drink enough to stay hydrated.

Dysphagia sufferers, estimated at 8% of the population¹ often struggle to take in enough liquids, even developing a fear of swallowing.

It's time to take hydration seriously

Thick & Easy™ Clear



Thick & Easy Clear

Thick & Easy Clear is prescribed to modify the consistency of drinks, helping people with dysphagia to swallow safely.

Thick & Easy Clear:

- Encourages fluid intake, therefore reducing the risk of dehydration
- Is a gum-based thickener
- Doesn't alter the natural appearance, taste or texture of drinks²
- Retains a consistent thickness over time

Helping patients to stay hydrated



Fresenius Kabi are sponsors of Hydration Angels. Together we're helping to hydrate the nation.

To find out more, visit www.whatwemadefof.org

Find out more about dysphagia

For expert information, advice, case studies and the latest developments in clinical dysphagia research, visit www.dysphagia.org.uk - the online resource for HCPs, carers and patients with dysphagia.

Alternatively, call Fresenius Kabi on **01928 533 516** or email scientific.affairsUK@fresenius-kabi.com

References

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

Date of preparation: January 2018. Job code: EN1461. Thick & Easy is a trademark of Hormel Health Labs. Fresenius Kabi is an authorised user.



**FRESENIUS
KABI**

caring for life