



SUMMARY

NetQues Project Report Speech and Language Therapy Education in Europe United in Diversity

Network for Tuning Standards and Quality of Education
Programmes in Speech and Language Therapy/Logopaedics
across Europe (NetQues): a multilateral academic and
professional network

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Executive Summary

- I The project Network for Tuning Standards and Quality of Education Programmes in Speech and Language Therapy/Logopaedics across Europe (NetQues) is the work of a multilateral academic and professional network of 65 partners from 31 European countries. It is led by the Comité Permanent de Liaison des Orthophonistes / Logopèdes de l'Union Européenne (CPLOL), the Standing Liaison Committee of Speech and Language Therapists and Logopaedists.
- II Speech and language therapy (SLT) is globally recognised as an autonomous profession with legal regulation at national level in many countries. As the European Union (EU) has developed and increased in its membership, so also has the accompanying legislation to encourage cross border mobility and recognition of qualifications across member states. This has led to a need to be able to assess and analyse education programmes within the EU and beyond. This project sets out to establish agreements on areas of commonality in SLT education and also look at its differences. It delineates the agreed common core competences which are both essential and desirable for a newly qualified SLT to be able to practise the profession safely and effectively. The NetQues project has embraced the EU Tuning principles in looking for points of reference, convergence and common understanding, to serve as “a platform for developing reference points at subject area level”¹.
- III Speech, language and communication disorders have been documented for many thousands of years. By the end of the nineteenth century there was, across Europe and beyond, a body of knowledge and a small number of practitioners who were involved in the study and remediation of disorders of speech. Since those early days, the speciality has developed into an independent academic scientific field. This is supported by the EU wide organisation, CPLOL.
- IV The discipline of SLT is concerned with human communication and swallowing, their processes, development and disorders and in particular the description, assessment and treatment of voice, speech, language and swallowing disorders. The SLT is the professional fully competent in the prevention, assessment, treatment and scientific study of human communication and related disorders.
- V SLT practice has changed over time as a result of changes in society and in thinking and advances in the related academic fields of medicine, psychology, linguistics, sociology and education. Demographics, diagnostics, technological advances, communications technology and sociological changes have influenced SLTs' scope of practice. This scope of practice has gradually extended, with changing priorities and focus within the differing EU countries.
- VI The NetQues project aims:
 - to define academic and professional profiles of SLT across the EU

¹ González, J. and Wagenaar, R. (2003). *Tuning educational structures in Europe*. Bilbao: University of Deusto. Retrieved 15-06-2013 http://www.relint.deusto.es/TUNINGProject/documentos/Tuning_phase1/introduction page 1

- to describe the objectives of the pre-qualifying educational programme as well as the learning outcomes (in terms of knowledge, understanding and skills) that have to be met
 - to identify the generic and subject specific competences which should be obtained in the programme.
- VII A total of 65 partners were recruited from all 27 EU countries, plus Liechtenstein, Norway and the EU-candidate countries of Iceland and Turkey. Partners were mainly from academic institutions but also included some professional associations. Project coordination was undertaken by the lead partner, CPLOL, which comprises expert clinicians and academics representing each European country. Partners were allocated to one of six work package (WP) teams, reflecting a range of expertise and geographical spread within each team. Targets which aligned with the Tuning process lines were then assigned to each of the WP teams. Each WP team took responsibility for one or more elements of the work, shared across the partners. An ethnographic research approach was adopted using the broad range of expert participants as key informants. In order to provide as complete an overview as possible of this diversity and map the current state of the art of SLT education, two Europe wide surveys were conducted. The surveys explored the diversity of the qualifications in SLT. Results gave profiling information and benchmarks for competences required by a new entrant to the SLT profession.
- VIII Profiles: Summary profiles encompassing data from both surveys show that all but two countries have at least one educational programme (and many have considerably more than one) leading to a professional qualification in SLT. SLT programmes in Europe are typically within universities, mainly state funded and predominantly organised in faculties with other health related programmes.
- IX Typically, the level of qualification that enables an SLT to practise is at least a bachelors degree, awarded after at least three years of initial education. A masters degree (European qualifications framework level 7) may be accomplished after a total of five years of higher education (three years bachelors and two years masters). Doctoral programmes on average take an additional three years. A progression from bachelors via masters to doctorate degree is possible in almost every EU country. Where used, normally 60 European Credit Transfer System (ECTS) credits are awarded per academic year.
- X Most established programmes are regulated by the state or the government. France reported the highest number of student SLTs. Belgium and the Netherlands have unexpectedly high numbers, possibly partly explained by their catchment area extending into Germany to meet the needs of neighbouring German students seeking to study a bachelors degree in SLT. However it should be noted that some of the figures given were estimates as many countries do not keep national statistics of students by subject of study.

- XI Programmes include a wide range of assessment types including written examinations, practical examination of skills and viva voce examinations. Reflective account of experience, portfolio of competences, clinical practice exams, video analysis and student self-assessment are also used. In addition to academic study, all programmes include supervised/mentored clinical practicum as a key component of the route to qualification and professional competence. Clinical competence is mainly evaluated by clinical supervisors. Methods for assessment of clinical competence may differ widely and include written assessment, viva voce assessment, observation and evaluation form, portfolio or case examples. Research projects carried out by students as part of the programme are required in almost two thirds of programmes studied.
- XII Competences: The education of SLTs demands achieving and being able to demonstrate competences which are a complex interaction of theory and practice together with a range of interaction skills necessary for effective evidence-based practice. A most striking feature of the overall results comparing the importance of the subject specific and generic competences needed in order to start to practise SLT was the extent of agreement between academics, graduates and employers.
- XIII With regard to subject specific competences, these are all related to effective assessment, diagnosis, treatment, prevention and counselling of clients and their significant others in the area of communication disorders and swallowing difficulties. Subject-specific competences most often cited as essential are related to six areas identified, namely Scope of practice, Assessment and identification of communication disorders and swallowing difficulties, Planning and implementation of intervention, Planning, maintaining and evaluating services, Prevention and Professional development, continuing education and specific ethical responsibilities.
- XIV With regard to generic competences, inter- and intra-personal competences were perceived as most crucial.
- XV Benchmarks: The set of competences essential for a newly qualified SLT which were most often cited across all key stakeholder groups are listed in Annex I. This document can be regarded as the EU-wide agreed common standards which every SLT must meet in order to practise the profession. These also provide benchmarks for SLT initial education and should be addressed in all European SLT education programmes. The expected competences which have been shown to be essential reflect a range of levels, the vast majority of which have been judged to culminate at levels 6 and 7 of the European Qualifications Framework².

² http://ec.europa.eu/education/policies/educ/eqf/eqf08_en.pdf

XVI SLT education across Europe is diverse, vibrant and constantly evolving. The profession finds itself at differing stages of development in different countries. However there is a commonality of purpose and profound commitment of SLTs and SLT educators to ensuring they produce the best graduates to provide the best practice and service to people who are in need of SLT professional help. This has shone through the entire period of the NetQues project. With this level of commitment, and expertise, the future of the profession and its service to people who can benefit from SLT is bright.

**ANNEX I Benchmarks for Speech and Language Therapy Education in Europe
(Key subject specific and generic competencies which form common standards for
European SLT initial education)**

SUBJECT SPECIFIC COMPETENCES FOR THE NEWLY QUALIFIED SPEECH AND LANGUAGE THERAPIST	
	The newly qualified speech and language therapist must be able to:
Scope of practice	assess, diagnose and intervene in speech and language disorders
	assess, diagnose and intervene in eating, drinking and swallowing disorders
Assessment and identification of communication needs and swallowing problems	establish rapport and facilitate participation in the assessment and differential diagnosis process
	identify the influence of different situations, environments or contexts on client's problems
	analyse and interpret assessment results accurately and integrate information from case history and other relevant sources into findings
	provide appropriate feedback on interpretation of assessment results to the client and significant others, in a way they can understand easily
	produce oral and written reports of assessment results, including analysis and interpretation of assessment information
	identify gaps in information needed to understand the client's disorders and seek information to fill those gaps
	recognise the effect of the disorders on the psychosocial wellbeing, social and medical status of the client and significant others
	when necessary, refer client to other professionals in a timely appropriate manner
Planning and implementation of intervention	integrate assessment results with other relevant information to set goals
	understand the rationales and principles that underlie specific therapy methods
	discuss long-term outcomes and decide, in consultation with the client, whether speech and language therapy is appropriate or required by including key people in these discussions
	select and plan appropriate and effective therapy interventions involving key people in the client's environment
	understand the roles of other members of the inter-/trans-disciplinary team and produce intervention plans in consultation with them
	implement appropriate therapy techniques using the necessary materials and instrumental equipment
	make reasoned decisions to initiate, continue, modify or cease the use of chosen techniques, treatments or procedures and record the decisions and reasoning appropriately
	document response to intervention and any changes in intervention plan
	keep legible and accurate contemporaneous records in accordance with professional and legal requirements and use only accepted terminology
	collect information, including qualitative and quantitative data, to evaluate the effectiveness of therapy
	prepare a client for discharge from therapy appropriately, agreeing a point of closure with the client and significant others, and following relevant agency discharge procedures
	understand the concepts of efficacy and efficiency in relation to speech and language therapy intervention

Prevention	prevent communication and swallowing disorders from occurring or developing, including early intervention in disorders
Professional development, continuing education and specific ethical responsibilities	understand the professional roles and boundaries of a speech and language therapist
	observe the code of ethics of the national professional body and/or as prescribed by the employer and/or the national/state government
	develop personal growth as a speech and language therapist through insight into, and further development of, a range of interpersonal and communication skills

GENERIC COMPETENCES FOR THE NEWLY QUALIFIED SLT	
Interpersonal and intrapersonal competences	demonstrate behaviour which is honest, sincere and reliable
	demonstrate empathy with clients and colleagues
	extract information from informants efficiently and sympathetically
	provide accurate feedback in a comprehensible and sensitive manner
	demonstrate advanced social skills such as assertiveness, cooperation, negotiation
	appreciate diversity and multiculturalism
	show positive attitude and proactiveness
	be self-critical and reflect on their own performances
Systemic competences	demonstrate resilience in coping with the demand of the profession in a way which enables him/her to maintain self-esteem and manage stress
	take responsibility for developing his/her own knowledge and skills throughout his/her lifespan
	work independently and autonomously
	adapt his/her own behavior and approach to fit new situations
	formulate creative and original solutions for novel situations
Instrumental competences	conduct a search of the scientific literature to find the most relevant information to answer a question
	use appropriate, effective skills and materials in written, oral and visual communication of information and instruction
	gather data using various methods including literature review, interviewing, questionnaire and observation
	identify the important factor in a problem and suggest possible solutions
	express the preferred solution/decision in a comprehensible way and outline the concrete actions required
	identify the risks or pitfalls associated with each possible solution
	use this knowledge to select the most appropriate solution for the particular circumstances
	analyse information to draw appropriate conclusions and recognise the implications of these conclusions
	synthesise information from diverse sources to select an appropriate course of action or to answer a question
	apply legal and ethical principles in managing information and protect integrity, reliability and authenticity of records
	divide tasks into concrete steps and set time schedules with realistic aims, taking into account all other demands
	meet goals or deliver products of work on schedule