

Professional Profile of the Speech and Language Therapist

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I - Definition of the Speech and Language Therapist

The speech and language therapist is the professional responsible for the prevention, assessment, treatment and scientific study of human communication and related disorders. In this context human communication encompasses all those processes associated with the comprehension and production of oral and written language, as well as appropriate forms of non-verbal communication.

II - Description of disorders

Disorders relate to speech and language, which are two of the most complex and developed aspects of cerebral functioning, as well as auditory, visual, cognitive -including learning-, oral muscular, respiratory, swallowing and vocal functioning. Disorders may be simple or complex, when multiple communication disorders are involved.

III - Role and function of the Speech and Language therapist

The speech and language therapist/logopedist has the following roles:

1 - Prevention

The speech and language therapist acts at every stage to prevent the occurrence or development of communication disorders by:

- a) teaching
- b) information
- c) carrying out screening procedures designed for early détection of disorders in children or adults
- d) any other action appropriate for clients and their environment.

2 - Assessment and diagnosis

Assessment requires a comprehensive appraisal of functional and other aspects of communicative competence, and changes in these observed in clients (who may or may not consult the speech and language therapist on their own initiative). Account must be taken of the needs of clients and their individual social environment.

Assessment is a continuing process and will often involve collaboration with professionals from other disciplines. The speech and language therapist arrives at a diagnosis through objective testing and clinical observation, and formulates a hypothesis about the nature and duration of intervention.

3 - Intervention

In the case of human communication disorders, therapeutic intervention may be direct or indirect. It involves therapy, rehabilitation and reintegration into social and working life, as well as early intervention, and guidance and counselling. Therapeutic actions have technical, interpersonal and general social dimensions.

Speech and language therapy aims to bring clients to the highest possible level of functioning and communication which is appropriate to their social, educational and working environment, in order that they may achieve or maintain an independent lifestyle. Age is therefore not significant as disorders may appear at any stage in a person's life, and may be developmental or acquired.

An essential part of intervention is the evaluation of its efficacy.

Where there is a medical pathology, intervention by the speech and language therapist may complement medical treatment. Speech and language therapy also involves collaborating in therapy programmes within a multidisciplinary context.

4 - Professional conduct

Speech and language therapists must abide by the code of ethics drawn up by their professional body and/or the relevant national government.

They are accountable for their professional actions within the national legal framework currently in force.

5 - Scientific study and continuing education

Speech and language therapists-logopedists should :

- enhance their knowledge and personal skills through continuing education;
- contribute to the development of the profession by sharing their knowledge and skills through publications, participation in meetings and courses, and by teaching;
- become involved in tutoring students during their theoretical studies and in supervising their clinical practice;
- draw up proposals for and participate in research programmes.

IV. The competences and attitudes of speech and language therapists - logopedists

Speech and language therapists - logopedists should be both clinicians and researchers (i.e. "practising researchers"). At the outset of therapy, they should consider relevant theoretical models and assess the client's ⁽¹⁾ communication skills and disorders in order to plan a suitable programme of therapy. Speech and language therapists - logopedists should regularly evaluate therapy outcomes and make necessary adjustments to the therapy programme on the basis of the new information obtained.

The speech and language therapist is primarily concerned with human interaction. Speech and language therapists - logopedists should therefore demonstrate competences and develop attitudes which are appropriate for the most effective exercise of their profession.

The full range of competences is described below. This is based on a detailed analysis of the roles and functions of speech and language therapists - logopedists in their professional practice. Reference is also made to the Charter of Ethics adopted by CPLOL.

Phase 1: Referral interview

Speech and language therapists - logopedists must be able **to communicate in an appropriate way** with the client in order to obtain information and **to identify** the reason(s) why the client has presented him/herself.

They must therefore be able **to conduct an interview**, i.e. listen to the other person, demonstrate a sympathetic attitude to the client's mode of expression, understand the messages emanating from the client, ask questions to clarify issues for both parties, identify the reason for referral and understand the client's needs, and display good verbal and non-verbal means of expression.

¹ The term 'client' corresponds to the term 'patient' used in some countries.

Based on the information gained during this interview, speech and language therapists - logopedists must be able **to make a decision** about the course of action to be followed and to **inform the client** of this. Such information must be clearly presented and comprehensive, so that the client can understand the details and intended outcome, and he/she will be motivated to follow the proposed programme once it has been agreed.

Speech and language therapists – logopedists must therefore be able to draw conclusions from the information obtained, to determine the best course of action, to refer if necessary to another therapist and to explain the practical details of the therapy programme. In order to achieve this, speech and language therapists - logopedists must be familiar with different types of intervention, their specific objectives and their limitations. If appropriate, they must also be aware of different ways of funding therapy.

Phase 2: Assessment and diagnosis

Assessment involves establishing the **client's communicative competence** and **communication impairments**. Speech and language therapists - logopedists must therefore be able:

- to listen, actively observe and to use appropriately the chosen assessment tool/observation technique;
- to extract relevant information from their observations to complete a case history and to establish both qualitatively and quantitatively, the client's communication skills and deficits;
- to record and analyse data, to formulate and verify hypotheses, to carry out a differential diagnosis in as accurate and precise a way as possible;
- to write a detailed report;
- to communicate their findings to the client and his/her family (or carers) and to the other members of the therapy team (or to the referring medical practitioner);
- to plan an appropriate and clear therapy programme, which takes into account the needs of the client and his/her environment.

These skills presuppose a good knowledge of human behaviour and functioning, and their development, as well as **disorders** which may affect this functioning, and **different ways of investigating and identifying** disorders.

Phase 3: Intervention

When assessment has been completed, speech and language therapists - logopedists must be able to use their conclusions **to draw up therapy aims** and **a therapy programme**. Interventions may be both direct and indirect.

Speech and language therapists - logopedists must therefore be familiar with interventions which are appropriate for the skills and disorders in question, be aware **of the techniques and methods of therapy and rehabilitation available**, including counselling and early intervention. However, therapy interventions should never be seen as a technical application of learned procedures: therapy is rather a problem-solving activity because, in order to be effective, speech and language therapists - logopedists must be able to carry out ongoing assessment of the efficacy of the intervention so that changes or corrections can be made. Speech and language therapists - logopedists must therefore be creative and must be aware how to access the additional information required for efficient therapy.

Throughout therapy, speech and language therapists - logopedists must show respect for the clients and their families/carers; they must be able **to collaborate** with other professionals, and they must **abide by the code of ethics** and other regulations in force in that country.

Speech and language therapists - logopedists must regularly extend and update their knowledge and personal skills through continuing professional development and access **to research and other appropriate information** (through lectures, seminars and scientific conferences). They

must be aware of the importance of new scientific research and must be familiar with different research methodologies.

Conclusion

Speech and language therapists combine scientific knowledge and clinical skills to achieve the best possible management of their clients.

Speech and language therapy is a developing profession at the crossroads of pure and applied science. These guidelines may therefore be subject to revision and modification as the profession continues to develop.