



## IASLT Position Statement on the Role of the Speech and Language Therapist in Autism Spectrum Disorders

<b>Date of approval by IASLT Council</b>	<b>Policy Operational Date</b>	<b>Policy Review Date</b>
21 <sup>st</sup> March 2018	2 <sup>nd</sup> April 2018	April 2021

# Position Statement

## **The IASLT hold the position that:**

Speech and Language Therapists (SLTs) hold the necessary clinical competencies in the screening, diagnosing and treatment of Autism Spectrum Disorders (ASD) as members of inter-professional clinical teams.

The unique contributions of SLTs are fundamental to effective and comprehensive ASD diagnostic assessments and subsequent interventions. SLTs are experts in speech, language, social communication and social interaction. The expert knowledge held by SLTs plays a critical role in the differential diagnosis and treatment of ASD.

## Executive Summary

This statement has been written by the Irish Association of Speech and Language Therapists (IASLT) to educate Speech and Language Therapists (SLTs), all relevant stakeholders and the public regarding IASLTs position with respect to the role of the SLT in Autism Spectrum Disorders.

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**A position statement represents the direction IASLT has taken on a particular topic or provides guidelines for particular areas of practice. These positions are time-bound, representing the thinking at a particular point in time.**

# Committee Members

A call to IASLT members was undertaken in January 2018. IASLT members working with people with Autism Spectrum Disorders across different services were selected with representation from each of the 9 CHO areas. One face-to-face meeting took place in Portlaoise on February 2<sup>nd</sup>, 2018; additional work was completed via email. Committee Members included the following IASLT Full Members:

Vickie Kirkpatrick MIASLT, Senior SLT (Committee Chair)  
*CORU Registration: SL019365*

Maria Gleeson MIASLT, Senior SLT  
*CORU Registration: SL015619*

Anna McLeod MIASLT, Senior SLT  
*CORU Registration: SL018152*

James Degabriele MIASLT, Senior SLT  
*CORU Registration: SL012891*

Mary McMahan MIASLT, Senior SLT  
*CORU Registration: SL019786*

Nicky Dyson MIASLT, Senior SLT  
*CORU Registration: SL015110*

Patricia Hall MIASLT, SLT Manager  
*CORU Registration: SL019145*

Tracy Power Coburn MIASLT, Senior SLT  
*CORU Registration: SL015416*

Suzanne Kirwan MIASLT, Senior SLT  
*CORU Registration: SL018403*

# 1.0 Background

The IASLT is the recognised professional body for Speech and Language Therapists (SLTs) in the Republic of Ireland. One of the key functions of the IASLT is to represent the views of its members, to inform the general public and to compile position statements in relation to the provision of SLT services for the best interests of service users. Working groups are routinely convened to develop position papers in response to events relevant to SLTs, both within and outside the SLT profession. This working group was established in February 2018.

In 2012, the *National Review of Autism Services Past, Present and Way Forward*, examined a number of issues relating to ASD services across the lifespan from diagnosis to service provision. Gaps in service provision were identified as well as the need for a consistent clear pathway for individuals to access services in the least restrictive way. It highlighted how the individual and their family should be the focus and the centre of the service provision. The review recommends a multidisciplinary approach and names SLT as a member of the multidisciplinary team.

## 1.1 Current Situation

In August 2017 Minister for Health and Children, Simon Harris tasked the Health Service Executive (HSE) to undertake a review of ASD services under the ASD Bill which was passed by Seanad Éireann in July 2017. The Bill entitled an Act to provide for the development and implementation of a cross-departmental, multi-agency Autism Spectrum Disorder Strategy and to provide for related matters.

The Autism Spectrum Disorder Strategy “shall set out how the needs of persons with autism spectrum disorder are to be addressed throughout their lives.” as well as establishing “a clear system of accountability and scrutiny relating to the provision of services to persons with autism spectrum disorder.” (Autism Spectrum Disorder Bill: 4). The Bill clearly provides for the role of SLTs in the diagnosis and treatment of Autism Spectrum Disorders. The HSE Clinical Reference Group was established and terms of reference for the ASD review may be found at:

<https://www.hse.ie/eng/services/list/4/disability/autism-review/>

Current diagnostic practices for ASD vary widely within and across services and regions in Ireland. On 19/01/2018 the HSE circulated its second draft of an ASD Diagnostic Protocol as part of the Development of a National Operations Protocol in respect of Assessment of Autism Spectrum Disorder. The IASLT ASD Working Group submitted written feedback on 15/02/2018.

On 1<sup>st</sup> March, 2018, the HSE National Disability Children & Families Team, Social Care Division emailed IASLT stating that the above draft HSE ASD Diagnostic Protocol had been ‘stood down’. They wrote: “... In light of **New Ways of Working**, which is about enhancing/embedding integrated & person-centred health & social care provision in each CHO; & the establishment of Community Services, senior management will be developing a Community Services for Children (service improvement) work stream, including reviewing ASD service provision. To avoid confusion or duplication of effort, we will be handing over our work to senior management (e.g., a draft of our ASD diagnostic protocol that will serve as a discussion paper, along with a high level summary of recent feedback). In this context, last month we stood down our ASD diagnostic protocol clinical reference group.”

At the time of publication of this IASLT position statement, neither further correspondence nor additional information had been received about the above announced initiative “**New Ways of Working**”.

## 2.0 Recommendations

SLTs who hold clinical competencies in ASD should be considered as core members of ASD diagnostic and intervention teams. The role of the SLT should be understood and respected by all members of the multidisciplinary team and management.

It is the duty of the Speech and Language Therapist to keep up to date with evidence-based clinical approaches, recent literature in their field, practices carried out by their peers, to work within the scope of practice and adhere to the IASLT Code of Professional Conduct and Ethics (IASLT, 2015). Under the Health and Social Care Professionals Act, 2005 all SLTs practicing in the Republic of Ireland must hold registration with the Health and Social Care Regulator: CORU.

## 2.1 Rationale

IASLT advocates that the unique contributions of SLTs are fundamental to effective and comprehensive ASD diagnostic assessments and subsequent interventions.

### **Clinical Guidelines**

The IASLT Scope of Practice (2016) highlights a key role of SLTs to be in the prevention, screening, assessment and diagnosis, consultation, intervention and management of communication and/or FEDS disorders. International clinical guidelines for the identification, assessment and diagnosis of ASD identify SLTs specifically as a core member of the assessment team (NICE 2017; SIGN, 2016). International clinical guidelines for the treatment and management of Autism Spectrum Disorders also recommend interventions such as social-communication interventions (NICE 2017; SIGN, 2016) and support for early communication skills (SIGN, 2016) for which SLTs hold the training and expertise to deliver.

### **Autism Spectrum Disorder Bill (2017)**

The recent Autism Spectrum Disorder Bill (2017) specifies that there should be an Autism Spectrum Disorder Strategy which makes provision for individual assessments of persons with autism spectrum disorder to be conducted by a team of medical professionals which includes a Speech and Language Therapist.

### **Knowledge and Expertise**

SLTs have a strong background in the neurodevelopmental basis of communication, language, feeding and other critical aspects of child development (particularly cognitive, social and emotional development) (Prizant, 2017).

They meet rigorous academic and clinical standards in these and other related areas (CORU, retrieved 2018). A core feature of a diagnosis of autism spectrum disorder must be that an individual presents with persistent difficulties with social communication and social interaction (DSM-5, ICD-10).

SLTs contribute specialised knowledge and expertise into social communication and social interaction, verbal and non-verbal communication, play, imagination as well as general speech and language development (SAC, 2018). Communication abilities are central to the diagnosis of ASD and SLTs' specialised knowledge is a vital part of both the assessment and intervention process (Farnsworth, 2003).

## **Early Indicators**

Due to the early language delays and atypical social communication often present in infants with ASD (ASHA, retrieved 2018), SLTs are often among the first health professionals to identify early ASD features. SLTs ensure functional, holistic and developmentally-appropriate communication assessment and intervention for people with ASD across the lifespan (Paul, 2008; Rubin, 2017 as cited in SAC, 2018). SLTs often provide early intervention before diagnosis. They support the development of joint attention and early social communication skills (Kasari et al., 2008; Murza et al., 2016; Paul, 2008 cited in SAC, 2018) and so are able to analyse and report on an individual's response to intervention.

## **Differential Diagnosis and Co-morbid Presentations**

SLTs have a unique role in identifying social communication characteristics which are of particular importance with regards to differential diagnosis of ASD. SLTs hold the knowledge and expertise to inform differential diagnosis of ASD from other related presentations (e.g. Developmental Language Disorder (DLD), Intellectual Impairment, Hearing Impairment, etc.). Their expertise is essential for helping to identify and understand ASD in the context of co-morbid presentations with associated communication impairments (e.g. Klinefelter Syndrome, Selective Mutism, Delayed Myelination) (Liu et al, 2018; Simms, M.D., 2016; Marrus and Hall, 2017, Simms and Ming Jin, 2015).

## **Continuing Professional Development (CPD) and Clinical Governance**

The IASLT acknowledges the complex nature of ASD and recognises that as with any area of clinical practice SLTs must engage in continuing professional development in line with identified learning needs. Speech and Language Therapists must also engage in professional supervision adhering to best practice protocols. Clear Clinical Governance is essential to ensure the highest quality service provision for people with ASD and their families.

CPD is an integral component in the continuing provision of safe and effective services for the benefit of people with ASD and their families. CPD is a means by which health and social care professionals maintain and improve their knowledge, skills and competence. All SLTs practicing in the Republic of Ireland must hold registration with CORU's Speech and Language Therapists Registration Board. Both CORU's and IASLT's Code of Professional Conduct and Ethics (2014, 2016) states that:

***SLTs must act within the limits of their knowledge, skills, competence and experience. Professional knowledge and skills must also be kept up to date.***

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