Speech–Language Therapy Services
in State Schools

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1. Introduction

The Department of Education and Training (DET, the department) provides speech–language therapy services to students enrolled in State education institutions or children registered for Early Childhood Development Programs and services through the employment of speech–language pathologists. The department is committed to the provision of speech–language therapy services for students with special needs in communication. These services are delivered as part of the educational program and are directed towards educational outcomes.

This document provides guidelines for the provision of speech–language therapy services in state education. It includes information about students who may access services, the management of speech–language therapy services within the department, and roles and responsibilities of departmental staff in relation to speech–language therapy services.

1.1 Definitions

**Speech–language pathologists**
Professionals who specialise in disorders of communication and oro-motor functioning. Speech–language pathologists are also called speech therapists, speech–language therapists or speech pathologists in contexts other than Queensland state schools. According to the *Competency-based Occupational Standards (CBOS) for Speech Pathologists* (Speech Pathology Australia, 2001) the speech pathology profession upholds the rights of individuals to possess effective communication and oro-motor functioning.


**Speech–language therapy services**
Speech–language therapy (SLT) services can support individuals with difficulties in the areas of language, speech, voice, fluency, oro-motor functioning, or complex communication needs. The department is one of a range of providers delivering SLT services for children in Queensland. Services may be provided by a range of government and non-government agencies and private providers. This document only refers to those services provided by the department.
Communication

The act of conveying meaning (e.g. information, experiences, ideas, knowledge and feelings) from one person to another to create a shared understanding, using a wide range of systems and methods. Communication most commonly refers to talking and listening, but also includes signing, gesturing, using communication aids (such as speech generating devices), reading and writing.

Oro-motor functioning

Movement of the muscles of the mouth for eating and drinking, and for producing speech sounds for talking. This also includes saliva control and oro-facial muscle tone.

Special needs in communication (SNIC)

Difficulties in talking and/or understanding for learning and relating to others. For the purposes of this document, the term special needs in communication will also encompass special needs in oro-motor functioning.

1.2 Focus of speech–language therapy services

Speech–language pathologists in the department work as part of the educational team to maximise students’ access, participation and achievement of competencies in interpersonal communication, literacy, numeracy and key learning areas. Speech–language therapy services support students’ educational outcomes by focusing on the essential foundation areas of language, speech, voice, fluency and oro-motor functioning, where these impact on learning, particularly for those students with special needs in communication.

Speech–language therapy services in state schools include assessment, diagnosis, intervention, evaluation, consultation, liaison, advocacy, in-service training, community education and research. Speech–language therapy services also incorporate management, supervision and support, and quality assurance specific to the professional services; statewide support to regions to meet specific professional development and resource development needs; and the development of procedures and guidelines.
2. Students

2.1 Eligible students

The students who may access speech–language therapy services in the department are those with special needs in communication who are experiencing barriers to learning. These students require assistance to develop competencies in the areas of interpersonal communication, learning and literacy. Students with special needs in communication may have difficulties in any of the following:

- learning at school;
- understanding, requesting and expressing information;
- relating to teachers and peers;
- reading and writing;
- expressing needs, abilities and interests;
- participating in group activities;
- developing a positive self-concept; or
- using appropriate behaviour.

A student’s special needs in communication may be apparent prior to schooling or may not be identified until later in schooling when learning, literacy and social skills do not develop as expected. Due to the central role of communication in learning, literacy and interpersonal relationships, even relatively minor special needs in communication can have a significant impact on student participation and curriculum achievements.

2.2 Students with special needs in communication

Students with special needs in communication include:

- those who experience difficulties in communication due to factors such as delayed development, limited opportunity to communicate, a mismatch between the language, dialect or communication style used at home and at school, and many other factors;
- those who experience disabilities in communication due to significant developmental factors, the presence of impairment (speech–language, physical, hearing, vision, intellectual or multiple areas, or autistic spectrum disorders), other significant special needs (e.g. in areas of attention or memory), and many other factors; or
- those who experience disabilities in oro-motor functioning, including eating, drinking, swallowing, saliva control and speaking.
3. Principles underpinning speech–language therapy in education

3.1 Inclusive education

Speech–language therapy in education is based on inclusive education principles consistent with the department's policy CRP-PR-009 Inclusive Education.


Inclusive education reflects the values, ethos and culture of a state education system committed to enhancing equitable educational opportunities and improved outcomes for all students. It requires that schools support all students, recognise diversity of individuals and groups, maximise educational and social outcomes, and contribute to shaping a just, equitable and democratic global society.

3.2 Speech–language therapy practice in education

Speech–language therapy practice in education is characterised by:

• promoting inclusion of students;
• practicing collaboratively;
• working in partnership with others;
• understanding the educational context;
• enabling students’ learning;
• enabling participation of students across the curriculum and in the decision making processes in schools; and
• supporting students to exercise the right to freedom of expression and opinion, including the freedom to seek, receive and impart information and ideas.

3.3 Profession specific role

Speech–language pathologists have specialist knowledge in linguistics and communication. The involvement of the speech–language pathologist in spoken and written language programming can enhance educational outcomes for all students, particularly those who have special needs in communication. Working collaboratively with other school staff, the speech–language pathologist can contribute to whole school intervention for improvement in literacy and numeracy.
Speech–language pathologists, as members of the educational team, contribute to determining needs and appropriately targeted interventions for students with special needs in communication. This entails maintaining a therapeutic focus while contributing to student outcomes.

Speech–language pathologists diagnose disorders of speech and/or language, communication disabilities and oro-motor disabilities in students, and provide speech–language therapy intervention.

4. Ensuring quality speech–language therapy services

Quality speech–language therapy services that maximise educational outcomes for students are dependent upon resources, processes and structures that support the professional standards, efficiency and effectiveness of speech–language therapy services.

4.1 Resources

An appropriate speech–language therapy service requires adequate resources and facilities.

At the base location, speech–language pathologists should have:

- ready access to adequately maintained office space; facilities for storage of resources and filing of confidential information; access to telephone (including outgoing calls to National and mobile numbers), photocopier and fax; ready access to computer, departmental intranet and internet; consumable materials for production of programs and administration; and funding for profession-specific resources including assessment materials, equipment and program resources.

In every school where services are provided, speech–language pathologists should negotiate:

- access to an appropriate, quiet room and telephone for the duration of their visit, some storage space (e.g. a cupboard) and resource support for student programs as deemed appropriate (e.g. photocopying, expendable materials).

Schools can maximise students’ educational outcomes by establishing processes for collaborative program planning by the speech–language pathologist, teachers and other education team members including parents (e.g. arranging non-contact time for teachers to meet with speech–language pathologists). Schools may support the implementation of speech–language therapy...
programs through the allocation of teacher aide or volunteer time, including sufficient time for training of personnel.

4.2 Budget

Speech–language therapy services may be identified in one or several funding programs, for example, funding linked to students with disabilities, the student support resourcing model, or other initiatives.

The speech–language therapy service requires resourcing processes at central, regional and school levels to identify, negotiate, and prioritise how funds will be provided for:

- travel costs;
- facilities costs (e.g. information technology, utilities and general maintenance);
- administrative costs (e.g. photocopying and administrative support);
- professional costs (e.g. training and development);
- educational materials for students (e.g. games, toys and books); and
- specialist materials and equipment (e.g. commercial assessment and programming materials, communication software and devices).

The Regional Allocated Specialist Support Staff Resource Grant for speech–language pathologists is paid each semester through Central Office to a designated location. These funds are to support the provision of the speech–language therapy service, specifically for annual stock and requisites, petty cash, equipment and materials for speech–language pathologists.


Schools that provide a base location for itinerant staff also receive a School Based Itinerant Staff Operational Grant to assist the school to meet operational costs including telephone, photocopying, postage, access to technology, administrative assistance, utilities and professional development and training. http://education.qld.gov.au/finance/grants/fund/garp/html/itin.html

The department meets the costs of travel associated with the delivery of speech–language therapy services through the payment of a travel allowance or by providing access to a government vehicle or by other negotiated means.
4.3 Range of work activities

Speech–language pathologists undertake a wide range of activities to ensure a quality service to students with special needs in communication. The full range of activities should be incorporated into the organisation of the speech–language therapy service. These activities include:

- direct services to students (e.g. diagnostic and review assessments of individual students, therapy with students, teaching the use of augmentative and alternative communication (AAC) systems);
- indirect services to students (e.g. therapy program planning, collaborating with teachers and other personnel, training of others for program implementation, resource development, parent interviews, involvement in the Education Adjustment Program or developing individual support plans, prescription and review of communication devices, report writing);
- services to schools (e.g. training of staff to screen the communication abilities of students; participation in curriculum planning, developing resources and funding submissions for school resources; developing school-based programs); and
- service management and accountability (e.g. negotiating services with schools, travel, strategic planning and networking, service data collection, involvement in professional supervision, research projects, networking with other speech–language pathologists, educators and agencies, supervision of speech–language pathology students from tertiary institutions, and professional development training and development).

The range of activities undertaken by speech–language pathologists does not include rostered bus/taxi or playground duties or general supervision of students in class, at sport or on school camps or excursions. Speech–language pathologists have a duty of care for students while they are receiving speech–language therapy services.

4.4 Workload management

Workload management is a complex process and is not simply about the number of students serviced. Workload refers to the full range of activities required to provide an effective speech–language therapy service. There is also a range of issues that may impact on the management of an individual workload which includes but is not limited to:

- the speech–language pathologist’s available time across all facilities;
- number of students with special needs in communication;
- range of communication needs amongst students;
the nature of the educational needs arising from the communication needs;
other needs of students (e.g. other impairments);
number of facilities assigned to the individual speech–language pathologist;
range of educational facilities;
distance and time for travel;
model and frequency of service delivery used;
time required for administration and resource preparation;
time required for the maintenance of expertise through specialist training and development; and
level of expertise in working as a speech–language pathologist within an educational context.

Negotiation of an appropriate workload should acknowledge the identified issues, the variety of tasks required and the conditions of employment. Provision of an efficient and effective service should be determined by the speech–language pathologist in conjunction with the line manager, the relevant professional supervisor and the other members of the educational team.

The flexible use of out of school hours (including school vacations) assists the management of workload demands and ensures a responsive service while maximising the time available during school hours for interaction with students. This flexibility is managed through the application of the accumulated days off arrangements for School Support Staff.

4.5 Workforce capacity

The appointment of suitably qualified personnel and the ongoing provision of support and professional development contribute to workforce capacity to provide a quality speech–language therapy service. The department’s Developing Performance Framework (2007) provides a comprehensive model for planning and providing such training, development and support. http://education.qld.gov.au/staff/development/performance/

This includes:

- induction for newly appointed speech–language pathologists, who in addition to consolidating specific speech–language therapy skills, need to learn about the educational setting and working as a member of the educational team;
- support for newly graduated employees who need to ‘reframe’ their practice to an educational context;
• professional supervision provided by the regional senior speech–language pathologists, which may include quality assurance activities, and identification of and assistance with training and development needs;
• professional training, development and support opportunities to maintain professional competence and improve and update knowledge and skills;
• participation in profession-specific and broad educational networks within local areas and across the State; and
• ongoing liaison with tertiary institutions, with regard to speech–language pathology student training.

4.6 Service evaluation

The department's speech–language therapy services in state schools are evaluated through:
• activities within and across schools conducted by speech–language pathologists;
• professional supervision of speech–language pathologists;
• ongoing monitoring of speech–language pathologists' training and development;
• specific quality assurance practices based on identified needs;
• involvement and reporting within the annual operational plans of schools; and
• statewide reporting on the speech–language therapy service.

Indicators of a quality speech–language therapy service in the department include:
• ongoing support for quality assurance practices including research that develop, review and evaluate the components of speech–language therapy service provision;
• measured improvement in outcomes for students with special needs in communication;
• curriculum that is responsive to the educational needs of students with special needs in communication through the involvement of speech–language pathologists in school planning;
• service planning, implementation and management that meet professional standards and ensure the efficiency and effectiveness of speech–language therapy services;
• effective provision and use of human and material resources for efficient and appropriate speech–language therapy services to students;
• departmental personnel, parents/carers and others are skilled and informed about speech–language therapy services; and
• appropriate professional supervision, development and training provided to speech–language pathologists.
5. Industrial issues

Speech–language pathologists are employed by the department as public servants. They are employed under the Public Service Award – State (2003). Speech–language pathologists may be employed as part-time or full-time employees, and may be employed on a permanent or specified term basis.


Most speech–language pathologists are itinerant school-based public servants providing services to a number of schools within an area. Travel time from the speech–language pathologist’s base to other schools occurs during work hours.

6. Responsibilities

A quality speech–language therapy service appropriate to students' needs is the shared responsibility of speech–language pathologists, schools, regions, Central Office, and other service providers. Collaborative relationships with families, communities and other government agencies are essential.

6.1 Responsibilities of speech–language pathologists

Speech–language pathologists:

- provide quality speech–language therapy services to designated schools;
- deliver best practice assessment, program planning, intervention and monitoring strategies;
- participate as a team member supporting students with special needs in communication to maximise their educational participation, achievement and outcomes;
- utilise and support established regional processes that align with statewide procedures for the identification of student needs and the provision of speech–language therapy services as outlined in Priorities in Speech–Language Therapy Services in State Schools (2002);
- collaborate with speech–language pathologists from all agencies involved with a student to achieve optimal educational outcomes; assist other members of the team, including teachers and teacher aides, to develop knowledge and skills to support students with special needs in communication;
• consult with line managers, regional senior speech–language pathologists and relevant school and region staff regarding provision of flexible and responsive speech–language therapy services;
• allocate adequate time and resources to ongoing development of professional knowledge and skills in contemporary school-based speech–language therapy practice;
• promote proficient language, speech, voice, fluency and oro-motor functioning as key student outcome areas underlying essential learnings for all students;
• liaise with other providers of speech–language therapy services including other government departments, non-government organisations and private practitioners; and
• execute duties in accordance with the department’s position description of speech–language pathologist or senior speech–language pathologist, and the Code of Conduct.

6.2 Responsibilities of Senior Speech–Language Pathologists based in schools

In addition to the responsibilities outlined above, the Senior Speech–Language Pathologists based in schools:
• provide collegial support to speech–language pathologists; and
• provide professional development to speech–language pathologists.

6.3 Responsibilities of principals in relation to the provision of speech-language therapy services

Principals (or delegate):
• support established regional processes for the identification of student needs and the provision of speech–language therapy services as outlined in *Priorities in Speech–Language Therapy Services in State Schools* (2002);
• provide access to adequate resources at the school to support efficient and effective speech–language therapy service provision;
• support speech–language pathologists’ involvement in relevant school processes, including the coordination of services to students with special needs in communication; and
• collaborate with regional senior speech–language pathologists when utilising school funds for contracting additional non-departmental speech–language therapy services in schools, to ensure a quality and coordinated service.
6.4 Responsibilities of line managers of speech–language pathologists

Line managers:
- administer, organise, monitor and support speech–language pathologists and local speech–language therapy services;
- manage the accumulated days off arrangements for enhanced service delivery;
- provide funding, resources and administrative assistance to support speech–language therapy services;
- collaborate with personnel in all facilities serviced by speech–language pathologists to ensure access to adequate resources across sites to support service provision;
- provide speech–language pathologists with timely access to relevant school, regional and systemic information;
- enable access to relevant induction, training, professional development and networking activities; and
- collaborate regularly with the regional senior speech–language pathologist regarding professional issues for speech–language pathologists, such as recruitment and selection, supervision, professional development, workload management and professional resources.

6.5 Responsibilities of regional senior speech–language pathologists

Regional senior speech–language pathologists may be either a Senior Advisor - Speech–Language Therapy or a Speech–Language Pathologist-in-Charge. Regional senior speech–language pathologists:
- provide leadership, advocacy, and professional supervision and support to speech–language pathologists;
- collaborate with relevant staff to coordinate and monitor implementation of speech–language therapy services, and relevant policies and procedures at school, regional and statewide levels;
- establish and support strategies that promote quality speech–language therapy services, including induction, professional development and training, networking and information sharing for speech–language pathologists;
- consult with relevant school and regional staff to manage the attraction, recruitment and selection, and retention of speech–language pathologists with the required competencies;
- promote evidence-based practice, quality assurance and research relevant to speech–language therapy services in schools;
• advocate for, and promote, system-wide speech–language therapy services, procedures and resources to support students with special needs in communication;
• liaise with government and non-government service providers, professional associations, educational and tertiary institutions, and other community stakeholders to develop relationships that support quality speech–language therapy services to students in state schools;
• collaborate with other regional senior speech–language pathologists and the Principal Advisor - Speech–Language Therapy in the provision of strategic expert advice on issues relating to the provision, delivery and enhancement of speech–language therapy services within state schools;
• contribute to regional committees to determine needs-based resourcing; and
• collaborate with regional personnel to distribute speech–language therapy services to schools across the region.

6.6 Responsibilities of Senior Advisors - Speech–Language Therapy

In addition to the responsibilities outlined above, the Senior Advisors - Speech–Language Therapy:

• contribute by active involvement in designated regional teams and committees, to the identification and determination of the strategic direction, program priorities and needs based resourcing of speech–language therapy services in the region.

6.7 Responsibilities of Regional Directors

Regional Directors (or delegate):

• ensure the provision of efficient, effective and accountable speech–language therapy services in the region through collaboration with relevant regional staff, the regional senior speech–language pathologist, and the Principal Advisor - Speech–Language Therapy;
• ensure appropriate base locations and line management for speech–language therapy services through collaboration with the regional senior speech–language pathologist and relevant school and regional staff;
• manage access to and coordination of funding for travel, resources and facilities for speech–language therapy services across the region;
• provide line management, direction and support to the regional senior speech–language pathologists, including timely access to regional and systemic information, and access to regional networks and professional development opportunities; and
• facilitate recruitment and induction of the regional senior speech–language pathologists in consultation with the Principal Advisor - Speech–Language Therapy.

6.8 Responsibilities of advisers in speech–language therapy

Speech–Language Therapy Advisers or Senior Speech–Language Pathologists in the Disability Services Support Unit, Student Services Branch:
• provide professional support for speech–language pathologists, in collaboration with regional senior speech–language pathologists;
• plan, deliver and evaluate professional training and development services for speech–language pathologists and regional senior speech–language pathologists; and
• contribute to research, development, maintenance, review and implementation of specialist speech–language therapy resources and publications to support quality speech–language therapy services across the department.

6.9 Responsibilities of the Principal Advisor - Speech–Language Therapy

Principal Advisor - Speech–Language Therapy, Disability Services Support Unit, Student Services Branch:
• provides strategic leadership for speech–language therapy services statewide;
• provides expert advice to key stakeholders on all issues relating to speech–language therapy services;
• initiates, leads and manages teams and projects designed to focus speech–language therapy resources on achieving the departmental inclusive education priorities;
• advocates for, promotes and develops system-wide speech–language therapy services, processes and resources to support students with special needs in communication;
• coordinates the identification of emerging issues in the provision of speech–language therapy services within Education Queensland;
• establishes performance and accountability frameworks, including indicators, measures and reporting regimes related to speech–language therapy services;
• represents the department in a variety of forums and liaises with relevant agencies and stakeholders on issues relating to inclusive education and speech–language therapy services;
• provides professional leadership and support to the regional senior speech–language pathologists to facilitate effective implementation of policies and procedures regarding speech–language therapy services;

• provides professional supervision and support to speech–language pathologists based within the Disability Services Support Unit;

• contributes to the development of statewide policies and standards relating to the employment of speech–language pathologists in the department, in collaboration with personnel from Human Resources Branch in Central Office; and

• monitors and reviews the implementation of these guidelines, outlined in this document, throughout the department.
7. Information sources


Position Descriptions: Speech–Language Pathologist (PO2-PO3); Senior Speech–Language Pathologist (PO4); Speech–Language Pathologist-in-Charge; Senior Advisor - Speech–Language Therapy; Speech–Language Therapy Adviser; Principal Advisor – Speech–Language Therapy.

Public Service Act 2008.

Public Service Regulation 2008.
