



Module Specification: Therapeutic skills

Version 1 FINAL

Purpose of this specification

This document makes explicit the knowledge and skills that are expected from an HTS candidate relevant to the scope of this module, and outlines additional elements needed to be completed prior to examination, such as secondments and case studies. All the prescribed elements of the module must be completed prior to application for the final examination.

It is important that this document is read together with the HTS regulations which clarifies requirements and gives further guidance.

This specification includes the following details:

Purpose of this specification	1
1.0 Scope of this Module.....	1
2.0 Minimum requirements for this module	2
3.0 Theoretical knowledge	2
4.0 Learning outcomes	3
5.0 The range of procedures in which competence needs to demonstrated (Part A)	4
6.0 Types of cases for periodic appraisals of whole patient management (part B)	5
7.0 Examination details	6
8.0 Examination marking guidance	7

1.0 Scope of this Module

This module relates to M-level training to develop theoretical knowledge and practical skills to enable competency managing adults with hearing loss, and / or hearing issues from a primarily therapeutic approach. Managing includes delivering interventions. Patients selected for inclusion in this module should feature those who have more complex or challenging needs than cannot be wholly met through the routine adult rehabilitation pathway. It is expected that the candidate will be aware of their own limits of scope, experience and ability, and recognised the need to refer on when appropriate (e.g. to a more experienced therapist or other professional).

This module is classed as a large HTS module.

2.0 Minimum requirements for this module

This module requires candidates to have existing skills and knowledge equivalent to that of a BSc in Audiology or Post-graduate Certificate in Hearing Therapy.

The detailed minimum requirements for completion, prior to examination are summarised in the following table. However, it should be noted this is a minimum requirement only, many candidates require more experience or training than this to enable them to meet the examination standard, and / or would benefit from a wider variety of learning opportunities such as placements with other professionals. The guidance notes should be followed, any experience which does not comply with this guidance cannot be counted towards the minimum requirements.

Element	Minimum
M-level credits	10 credits
Total supervised clinical sessions *	40
Tutorials	5
Secondments sessions*	10
Placement sessions	5, to include Lip-reading teacher Voluntary sector organisation, Social Care, hearing impaired support group and local mental health services
Part A – direct observations of clinical skills	N/A
Part B – Competencies - periodic appraisals of whole patient management and reflective diary.	5 appraisals in each category
Case Studies**	2

*A session is a minimum of 3.5 hours to include clinic preparation, seeing patients and any subsequent record and report writing.

**one case study is required on each of the exam case types

3.0 Theoretical knowledge

The candidate is expected to gain the following theoretical knowledge through academic study, tutorials, self study and discussion:

1. Knowledge of the psychosocial impact of different levels of hearing loss
2. Knowledge of the biopsychosocial model of deafness, and perceptions of deafness
3. Counselling skills
4. Knowledge of change management models used in therapeutic processes
5. Knowledge of the role of motivational and goal setting within patient management
6. Knowledge of a range of techniques to employ within a change management model
7. Knowledge of communications skills techniques and how to select them, to include knowledge of communication skills training techniques to include anticipatory strategies, communication training, assertiveness training, hearing tactics, lipreading, listening skills, repair strategies, stress management, telephone tactics and verbal and non-verbal communication strategies.
9. Knowledge of assessment and feedback techniques, and outcomes monitoring in therapeutic rehabilitation.
10. Knowledge of assistive devices and how to identify and evaluate devices which support individual patients in communication, and local provision
11. Knowledge of the communication chain, impact of hearing loss and / or difficulties, communication barriers and disordered communication barriers
12. Content of a full and relevant history / assessment
13. Knowledge of person-centred principles and approaches for assessment, treatment planning and delivery

14. Awareness of communication strategies and appropriate language when working with patients.
15. How to integrate relevant information to make a shared informed decision concerning the diagnosis and management of individual cases
16. Up to date knowledge and understanding of associated national protocols, procedures and standards (e.g. Scottish Executive Services Standards for Adult Rehabilitation, 2009) is expected.
17. Understand their own role and those of other professionals (e.g. Speech & Language Therapists, psychologists, social services support workers) volunteers and agencies who contribute to the management and welfare of the patient and their significant others, and how these services can be accessed
18. Demonstrate understanding of local referral routes

4.0 Learning outcomes

On completion of the module the candidate should integrate theoretical knowledge and practical skills to enable them to:

1. Prepare facilities, equipment and materials needed for the session, and room set-up
2. Plan clinical approaches, using clinical reasoning strategies and evidence based practice, liaising with the relevant professionals to co-ordinate assessments & care, as appropriate.
3. Carry out a person-centred assessment, to include a full and relevant case history and communication needs assessment, and using tools and validated questionnaires as appropriate, in a safe and effective manner adapting as required to ensure information gained is maximised within the time available
4. Show creativity, initiative and originality of thinking in tackling and solving practical problems
5. Collate relevant information and make an informed decision concerning the diagnosis and management of individual cases
6. Develop person-centred treatment plans incorporating the needs, preferences and values of the patient and their family, and use shared decision making to choose between options.
7. Deliver person-centred treatment plans and identifying where these plans may need to change or adapt according to clinical, personal, or familial preferences, and demonstrate an ability to:
 - a. Identify and use appropriate counselling skills and methods within a change management model
 - b. Integrate therapeutic and technological interventions, identifying and evaluating assistive technologies and hearing aids which augment therapeutic interventions.
 - c. Identify and use appropriate teaching skills, to develop communication skills e.g. relaxation, assertiveness and stress management skills, effective listening skills and ensure optimal use of assistive technologies.
 - d. Give advice on services available from other agencies and voluntary bodies, working across different agencies to bring services together for the benefit of patients and / or refer on, as required.
 - e. Give advice on current legislation and assistance available with regard to access, particularly in the work environment, such as the Disability Discrimination Act and Access to Work Scheme.
8. Collate, and prepare resource materials (including patient information) including signposting to online resources, to complement their own interventions and those of colleagues.
9. Recognise the need for and arrange onward referral to appropriate colleagues to relevant professionals considering the holistic needs of the patient, such as for specialist technological interventions, social support or to the voluntary sector.
10. Communicate effectively with patients giving clear information on the plan for the session, results, recommendations and management using appropriate language and communication strategies.
11. Keep appropriate clinical records
12. Write reports on assessment sessions, recommended treatment plans and / or outcome of treatment as required, suitable for the intended audience, to include a range of professionals.
13. Demonstrate the ability to, and articulate clearly through presentation and constructive discussion with colleagues:
 - a. Relate their own practice to a supporting knowledge base – including reference to evidence based and/or recognised good practice
 - b. Clearly justify any of their own clinical decisions made in the assessment or management of patients

- c. Explain the local structures (i.e. care/treatment pathways) for processing patients and offer critical evaluation
- d. Critically evaluate and reflect on their own actions
- e. Show independent thought through evaluation and presentation of alternative (and justified) approaches to existing local practice

In this module the above overarching learning outcomes will apply to the indicative content outlined in part A.

5.0 The range of procedures in which competence needs to be demonstrated (Part A)

1. Preparation for appointment (dependent on the mode of delivery), to include collation of appropriate counselling tools, props and patient information, and room set up
2. Independently and succinctly assesses or reassesses the patient, to include obtaining a relevant case history about the patient in a logical but flexible progression, communication assessment and identifying the values and preferences held by the patient. Covers the main areas defined below (unless justifiably omitted), involving significant others as appropriate:
 - Priorities for the patient, in terms of communication
 - Patient values and preferences in communication
 - Communication ability in a variety of settings
 - Current / previous communication tactics used (if any) and reported benefit
 - Current / previous assistive technologies used (if any) and reported benefit
 - Hearing aid use, benefit and expectations of benefit.
 - Associated concerns: Sleep / mood / anxiety / depression / tinnitus etc.
 - Previous treatment / counselling
 - Significant others and home situation
 - Lifestyle
 - psychosocial needs
3. Use of validated questionnaires to assess the impact of the condition on wellbeing, e.g. hearing abilities, co-morbidities (e.g. GHABP, Hospital anxiety and depression scale)
4. Use of measures of health and experience status and apply as measures of pre-and post outcome as required to monitor progress of individuals and the service
5. Identification of intervention options to include advice giving, training, counselling, referral to other professionals and agencies
6. Evaluate possible communication challenges based on clinical assessment data and uses a synthesis of this knowledge alongside discussions with the client and their family to offer appropriate communication repair strategies
7. Engaging in shared decision making, by discussing options and agreeing priorities for interventions
8. Identify and use appropriate counselling skills and methods within a change management model
9. Give advice on communication tactics and strategies, to meet the agreed needs of the individual to include adaptation of the intervention as required
10. Give advice on stress, relaxation and sleep management as appropriate, to meet the agreed needs of the individual to include adaptation of the intervention as required
11. Give advice on assistive listening devices and telephone use, to meet the agreed needs of the individual to include adaptation of the intervention as required
12. Give advice on services available from other agencies and voluntary bodies, working across different agencies to bring services together for the benefit of patients and / or refer on, as required.
13. Give advice on current legislation and assistance available with regard to access, particularly in the work environment, such as the Disability Discrimination Act and Access to Work Scheme

14. Deliver training in use of hearing aids and assistive devices, to meet the agreed needs of the individual to include adaptation of the intervention as required
15. Deliver training in telephone use and tactics, to meet the agreed needs of the individual to include adaptation of the intervention as required
16. Deliver training in stress management, to meet the agreed needs of the individual to include adaptation of the intervention as required
17. Deliver training in relaxation, to meet the agreed needs of the individual to include adaptation of the intervention as required
18. Deliver training in assertiveness, to meet the agreed needs of the individual to include adaptation of the intervention as required
19. Collate, and prepare resource materials (including patient information) including signposting to online resources, to complement their own interventions and those of colleagues.
20. Use appropriate communication skills throughout:
 - Responds to questions from patients in an appropriate way, showing sensitivity and rephrasing / re-explaining as necessary to ensure understanding
 - Back up information given with information leaflets where possible
 - Demonstrates clear, congruent communication to break difficult news to patients
 - Shows sensitivity to the patient's concerns both in questioning and information giving
 - Records relevant information whilst maintaining a rapport with the patient and being aware of their concerns
 - Demonstrating empathy through communication behaviours
 - Demonstrates good listening and reflection skills
 - Apply counselling models to develop beginning and end of therapy
 - Form a working alliance with the patient.
21. Keep appropriate clinical records: record findings and interventions delivered clearly, in a consistent format, all of which must be dated and named.
22. Write reports on assessment sessions, recommended treatment plans and / or outcome of treatment as required, suitable for the intended audience, to include a range of professionals.

6.0 Types of cases for periodic appraisals of whole patient management (part B)

The specified appointment types / patient categories for this module are:

- New patient assessment
- Delivery of interventions:
 - Advice giving - to include communication skills, managing hearing loss at work, support from other agencies, stress, relaxation and sleep management, Legislation and assistance available with regard to access, assistive listening devices and telephone use
 - Training - to include communication training, lip-reading, stress management and relaxation, use of assistive listening devices and telephones, and assertiveness
- Review appointment

It is expected that the new patient assessment will include identification of intervention options and agreeing a management plan.

It is recognised that for a single patient there may be more than one of the above interventions, and in such cases, one case can be used to cover more than one part B appraisal.

Part B assessments will be assessed against same criteria as the examination marking guidance.

7.0 Examination details

Examination will take place over a maximum of a one-day period at the candidates training centre, assessing the candidate against the learning outcomes for this module. This examination has two components:

1. Practical assessment of clinical skills This will involve the direct observation of the candidate in two appointments, as outlined below, followed by a case viva after each case, plus a written report on one of these cases. The report on any new case should include the following discrete sections: history, summary of findings, interventions delivered and individual management plan.
2. General viva voce, to assess the level and scope of theoretical knowledge underpinning the learning outcomes. This may explore broader issues prompted by the practical exams, and the content of this module.

For the practical cases, candidates will be assessed on their ability to manage adults on a 1:1 basis as outlined in the 'scope' for two appointment types:

1. New case not previously seen
2. Review case who has been seen on at least one occasion

These appointments would usually be face to face, but the candidate is expected to be able to provide care in a variety of delivery modes, such as online and by telephone if required or appropriate. However, for the examination process if an alternative delivery mode is used, this should not significantly compromise the content of the appointment, and must enable the examiners to observe / hear both the candidate and patient.

It is recognised that some candidates may deliver aspects of their role to groups and will have done so as part of their practical training, however, this is not a compulsory part of this module, and will not be examined.

8.0 Examination marking guidance

Learning outcome		0 Does not meet examination standard	1 Meets examination standard	2 Exceeds examination standard
1	Prepare facilities, equipment and materials needed for the session, and room set-up	Does not adequately prepare facilities, equipment and materials needed for the session, or room set up inappropriate for the session.	Does prepare facilities, equipment and materials needed for the session, AND room set up is appropriate for the session.	Prepares facilities, equipment and materials needed for the session to a high standard, and room is set up with a high attention to detail and patient needs.
2	Plan clinical approaches, using clinical reasoning strategies, evidence based practice, , liaising with the relevant professionals to co-ordinate assessments & care, as appropriate.	Does not select appropriate or person-specific assessment or management plans, OR is unable to explain the reasoning behind the approach taken, OR does not show sufficient knowledge of the current research evidence and clinical guidance, OR does not liaise with relevant professionals as appropriate	Identifies appropriate assessment and management plans, and modified to meet individual needs. Is able to broadly explain the reasoning underpinning the approach taken using current research evidence and clinical guidance. Liaises with relevant professionals as appropriate.	Creates an assessment or management plan which is highly tailored to the patient's specific needs and consistent with current clinical guidance and evidence-based practice and liaises with the relevant professionals as appropriate.
3	Carry out a person centred assessment to include a full and relevant case history and communication needs assessment using tools and validated questionnaires as appropriate, in a safe and effective manner adapting as required to ensure information gained is maximised within the time available.	Obtains insufficient information about the patient's difficulties, impact and needs, health, lifestyle, preferences, priorities, values and expectations OR does not adequately assess communication (for new patients), OR assessment is unsafe, OR does not follow local or national guidance (or without evidence based justifications as to why not), OR is not completed within an appropriate time, OR does not adapt the assessment to maximise data collection OR does not use validated questionnaires as appropriate	Uses effective questioning and listening to elicit sufficient information about the patient's difficulties, impact and needs, health, lifestyle, preferences, priorities, values and expectations. AND Carries out a communication assessment (for new patients) AND Performs assessment safely, according to local and national guidance and within the appropriate appointment time allocation. Adapts the testing process where appropriate to ensure the most valuable data is prioritised, and uses validated questionnaires as appropriate	Uses skilful questioning, and active listening to elicit a comprehensive picture of patient's difficulties, impact and needs, health, lifestyle, preferences, priorities, values and expectations AND Carries out a comprehensive assessment of communication (for new patients) AND Performs assessment skilfully, according to local and national guidance and within the appropriate appointment time allocation. Adapts the testing process where appropriate to ensure the most valuable data is prioritised, and uses validated questionnaires as appropriate.
4	Show creativity, initiative and originality of thinking in tackling and solving practical problems	Does not show creativity, initiative and originality of thinking in tackling and solving practical problems if they arise during the session	Shows creativity, initiative and originality of thinking in tackling and solving practical problems if they arise during the session	Shows a high level of creativity, initiative and originality of thinking in tackling and solving practical problems if they arise during the session

Learning outcome		0 Does not meet examination standard	1 Meets examination standard	2 Exceeds examination standard
5 6	<p>Collate relevant information, interpret and make an informed decision concerning the diagnosis and management of individual cases</p> <p>Develop person-centred treatment plans incorporating the needs, preferences and values of the patient and their family, and use shared decision making to choose between options.</p>	Does not identify an appropriate range of diagnostic and management options for the patient OR does not incorporate the needs, preferences and values of the patient and their family, OR does not use shared decision making, OR does not formulate goals and individuals management plans	Integrates the details from the history, assessment, research evidence, current clinical guidance and patient preferences to identify a range of appropriate management options for the patient, including onward referral, AND incorporates the needs, preferences and values of the patient and their family, AND uses shared decision making AND formulates goals and individual management plans	Integrates the details from the history, assessment, research evidence, current clinical guidance to identify the full range of appropriate management options for the patient, (including onward referral) and their likely benefits and limitations, and skilfully incorporates the needs, preferences and values of the patient and their family, AND uses shared decision making fully AND formulates highly personalised goals and individual management plans
	<p>Deliver person-centred treatment plans tailoring it to the individual, using counselling skills and appropriate techniques as required, and identifying where these plans may need to change or adapt according to clinical, personal, or familial preferences and demonstrate the ability to (as needed):</p> <ol style="list-style-type: none"> Identify and use appropriate counselling skills and methods within a change management model Integrate therapeutic and technological interventions, identifying and evaluating assistive technologies and hearing aids which augment therapeutic interventions. Identify and use appropriate teaching skills, to develop communication skills e.g. relaxation, assertiveness and stress management skills, effective listening skills and ensure optimal use of assistive technologies. Give advice on services available from other agencies and voluntary bodies, working across different agencies to bring services together for the benefit of patients and / or refer on, as required. Give advice on current legislation and assistance available with regard to access, particularly in the work environment, such as the Disability Discrimination Act and Access to Work Scheme. 	Delivery or treatment is unsafe, OR does not follow local or national guidance (or without evidence based justifications as to why not), OR is not completed within an appropriate time OR is not person-centred OR does not use appropriate counselling skills or techniques as required, or is not adapted as required	Treatment is delivered safely AND does follow local or national guidance (or with evidence based justifications as to why not), AND is completed within an appropriate time, person-centred with the appropriate use of counselling skills or techniques as required, and is adapted as required.	Treatment is delivered skilfully, following local or national guidance (or with evidence based justifications as to why not), is completed within an appropriate time, highly person centred with the appropriate and skilful use of counselling skills or techniques as required and is skilfully adapted as required

Learning outcome		0 Does not meet examination standard	1 Meets examination standard	2 Exceeds examination standard
8	Collate, and prepare resource materials (including patient information) including signposting to online resources, to complement their own interventions and those of colleagues	Resource materials are not prepared OR are inadequate OR incomplete OR inaccurate	Adequate, complete and accurate resource materials are prepared in advance, to include signposting to online resources	High quality and wide ranging resource materials are prepared in advance, to include signposting to online resources, and are tailored for the individual patient.
9	Recognise the need for and arrange onward referral to appropriate colleagues to relevant professionals considering the holistic needs of the patient, such as for specialist technological interventions, social support or to the voluntary sector.	Does not recognised the need for onward referral or does not refer to an appropriate individual, if required	Recognises the need and refers the patient onto an appropriate individual, if required.	Recognises the need and refers the patient onto an appropriate individual, if required, in a skilful way.
10	Communicate effectively with patients giving clear information on the plan for the session, results, recommendations and management using appropriate language, communication skills and strategies throughout.	Communicates information to patients and/or carers in a way that is generally unclear or contains irrelevant information.	Communicates relevant information about testing and management options, and when delivering treatment, to patients and/or carers clearly and in a way that broadly meets their needs.	Effectively and clearly communicates relevant information about testing and management options, and when delivering treatment to patients and/or carers in a way that is highly tailored to their needs.
11	Keep appropriate clinical records	Clinical record omits key information or is omitted from the clinical record system.	Provides a clear summary of the clinical episode, which is stored in an appropriate clinical record system.	Provides clear and detailed information about the clinical episode, which is stored in an appropriate clinical record system.
12	Write reports on test results and recommendations suitable for the intended audience, to include a range of professionals	Report omits key information, is disorganised or written using unprofessional terminology.	Report provides a clear summary of the clinical episode which is logically structured, and written using professional terminology.	Report provides clear and detailed information about the clinical episode which is highly organised, concise, and well written using professional but accessible terminology.

Learning outcome		0 Does not meet examination standard	1 Meets examination standard	2 Exceeds examination standard
13	<p>Demonstrate the ability to, and articulate clearly through presentation and constructive discussion with colleagues:</p> <ul style="list-style-type: none"> • Relate their own practice to a supporting knowledge base – including reference to evidence based and/or recognised good practice • Clearly justify <u>any</u> of their own clinical decisions made in the assessment or management of patients • Critically appraise the context of individual assessments within national and local structures/processes • Critically evaluate and reflect on their own actions • Show independent thought through evaluation and presentation of alternative (and justified) approaches to existing local practice 	<p>Limited ability to reflect on and critically evaluate own clinical practice, or explain clinical reasoning. Demonstrates limited knowledge of subjects discussed.</p> <p>OR</p> <p>Does not demonstrate a good working knowledge or relevant national guidelines or policies, or evidence base, or calibration aspects of any equipment used</p> <p>OR</p> <p>Unable to interpret or make informed decisions concerning the diagnosis, needs or management of individuals cases</p> <p>OR</p> <p>Does not demonstrate a good working knowledge of local structures, or offer critical comment</p> <p>OR</p> <p>Does not demonstrate critical evaluation or reflection skills of own practice and others, or not aware of the limits of own skills or knowledge, or when to seek advice.</p> <p>OR</p> <p>Does not show independent thought during constructive discussion</p>	<p>Able to reflect on and critically evaluate own clinical practice, and explain clinical reasoning. Demonstrates comprehensive knowledge of subjects discussed.</p> <p>AND</p> <p>Demonstrates a good working knowledge of relevant national guidelines and policies, relevant evidence base, Has a good working knowledge of the relevant calibration aspects of any equipment used</p> <p>AND</p> <p>Demonstrates the ability to interpret and make informed decisions concerning the diagnosis, needs and management of individual cases</p> <p>AND</p> <p>Demonstrates a good working knowledge of the local structures (i.e. care pathways) for processing patients and offer critical comment</p> <p>AND</p> <p>Demonstrates critical evaluation and reflection skills of own practice and others, and awareness of the limits of own skills and knowledge and when to seek advice</p> <p>Shows independent thought during constructive discussion</p>	<p>Able to provide insightful reflection and critical evaluation of own clinical practice, and explain clinical reasoning with reference to research evidence and clinical practice.</p> <p>AND</p> <p>Demonstrates wider knowledge of subjects discussed.</p> <p>AND</p> <p>Demonstrates a high level of working knowledge of relevant national guidelines and policies, relevant evidence base, Has a high level of working knowledge of the relevant calibration aspects of any equipment used</p> <p>AND</p> <p>Demonstrates the ability to skilfully interpret and make informed decisions concerning the diagnosis, needs and management of individual cases</p> <p>AND</p> <p>Demonstrates a high level of working knowledge of the local structures (i.e. care pathways) for processing patients and offer critical comment</p> <p>AND</p> <p>Demonstrates a high level of critical evaluation and reflection skills of own practice and others, and high awareness of the limits of own skills and knowledge and when to seek advice</p> <p>AND</p> <p>Shows a high level of independent thought during constructive discussion</p>

Candidates must achieve a final rating of 1 or 2 in every section of the examination to achieve a pass.