Brief guide: good communication standards for people with a learning disability or autism

Context
Communication difficulties can contribute to poor mental health and to challenging behaviour. Services must demonstrate that they have made reasonable adjustments as required by the Equality Act 2010 to ensure that people who use the service are supported to communicate their needs and to participate in their own care as fully as possible. Staff in specialist learning disability services should have the skills in supporting the maintenance and development of communication skills. This brief guide is for inspection teams that assess services for people with complex needs.

Evidence required
1. Speak to the board and staff champions about their experience and qualifications in communication support. Request and review training records.
2. Speak to people who use the service, people’s families, carers or advocates to assess the provider’s commitment to supporting and enhancing communication.
3. Interview staff, examine care records and observe care, checking that:
   a. Staff create opportunities for interaction, engagement, and involvement, and spend time with people for no purpose other than interaction and communication.
   b. The individual’s communication has been assessed by a qualified speech and language therapist OR there is clear evidence that the person is a competent communicator.
   c. Staff are competently using a range of techniques which take account of individual needs.
   d. Staff encourage and enable individuals to make decisions. Staff do not give communication as the primary reason for a person’s lack of capacity or involvement, without further explanation.
   e. Care plans around Positive Behaviour Support recognise communication difficulties as a significant risk factor and include individualised and clear communication strategies.
4. Check if specialist equipment to support/enhance communication is available, safe to use and well-maintained.
5. Request and review records of regular and effective audits of communication plans.
6. Request evidence that they monitor and report at least annually on the attainment of specific objectives identified in communication support plans.
7. Request and review records of staff supervision meetings which discuss the development or implementation of communication support strategies.

Reporting
1. In the ‘assessment of needs and planning of care’ section of ‘effective’ comment on the extent to which staff assess communication needs and support communication.
2. In the ‘best practice in treatment and care’ section of ‘effective’ comment on whether the provider audits communication support plans against best practice standards.
3. In the ‘skilled staff to deliver care’ section of ‘effective’ comment on whether communication is supported through protected time, training and supervision.
4. In the ‘multidisciplinary and inter-agency teamwork’ section of ‘effective’ comment on working relationships with speech and language therapists or other relevant specialists.
5. In the ‘good practice in applying the Mental Capacity Act’ section of ‘effective’ comment on whether failure to support people’s communication has resulted in staff not obtaining consent or having adequate regard for the Mental Capacity Act 2005 (MCA).

6. In the ‘kindness, dignity, respect and support’ section of ‘caring’ comment on whether staff communicate positively, and how staff determine what people want.

7. In the ‘the involvement of people in the care they receive’ section of ‘caring’ comment on how staff ensure communication is not a barrier to people’s involvement in their care.

8. In the ‘meeting the needs of all people who use the service’ section of ‘responsive’ comment on whether staff have made reasonable adjustments, such as providing interpreters, communication tools or equipment, to support people’s communication, as well as provided information in formats to meet people’s needs.

9. In the ‘vision and values’ section of ‘well-led’ comment on whether the provider has (and people are aware of) an inclusive strategy for making reasonable adjustments to provide positive communication support.

10. In the ‘good governance’ section of ‘well-led’ comment on whether the provider monitors the attainment of specific objectives identified in communication support plans, such as changes in people’s abilities and health.

11. In the ‘leadership, morale and staff engagement’ section of ‘well-led’ comment on how the provider promotes use of communication support tools amongst staff, people who use the service, people’s family, carers, or advocates and the public.

12. In the ‘commitment to quality improvement and innovation’ section of ‘well-led’ comment on how the provider supports staff to try new ways of supporting communication.

Policy position
Providers should meet the five ‘good communication standards’ set out by the Royal College of Speech and Language Therapists, as set out in the appendix.¹

Link to regulations
We should take action under:

- **Regulation 9** when staff do not appropriately assess and implement strategies to support people’s communication needs, and support people to engage in decisions about their care or treatment, or make reasonable adjustments to enable people to access and receive care and treatment.

- **Regulation 10** when providers do not have regard to any relevant protected characteristic as defined in the Equalities Act 2010 (for example disability) or staff do not communicate in a positive way and do not adequately support people’s autonomy and involvement in the community.

- **Regulation 11** if, as a result of not supporting people to communicate, staff act without obtaining people’s consent or do not demonstrate regard for the MCA.

- **Regulation 13** if a provider is treating a patient without lawfully obtaining consent, staff do not protect patients from abuse and improper treatment or care and treatment is given in a way which the patient does not want and which they have the capacity to decide.

- **Regulation 15** when equipment used to support communication is not clean, secure, suitable, appropriately stored or properly used or maintained.

- **Regulation 17** when the provider does not effectively audit and monitor communication support plan outcomes.

- **Regulation 18** when staff are not suitably competent or skilled in communication support or supervised by more experienced people.

Appendix
Royal College of Speech and Language Therapists five good communication standards²:
Standard 1: There is a detailed description of how best to communicate with individuals.
Standard 2: Services demonstrate how they support individuals with communication needs to be involved with decisions about their care and their services.
Standard 3: Staff value and use competently the best approaches to communication with each individual they support.
Standard 4: Services create opportunities, relationships and environments that make individuals want to communicate.
Standard 5: Individuals are supported to understand and express their needs in relation to their health and wellbeing.

Further information
The Care Certificate is an identified set of standards that health and social care workers adhere to in their daily working life. Designed with the non-regulated workforce in mind, the Care Certificate aims to ensure that these workers have the same introductory skills, knowledge and behaviours to provide compassionate, safe and high-quality care and support. It includes a standard on communication, setting out the benchmark for the skills and competencies that should be expected from all staff. Information can be found on the following websites:
- Health Education England: www.hee.nhs.uk
- Skills for Care: www.skillsforcare.org.uk or
- Skills for Health: www.skillsforhealth.org.uk
Practical guidance and support for social care providers on good communication skills can also be found on the Social Care Institute for Excellence website.³

² http://www.rcslt.org/news/docs/good_comm_standards
³ http://www.scie.org.uk/