Exploring accounts of joint working between Speech and Language Therapists and Stroke Association Communication Support Coordinators following stroke

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**Background**

- Both Speech and Language Therapists (SLTs) and Stroke Association Communication Support Coordinators (CSCs) are employed across the UK to provide services for people with communication difficulties following stroke.
- There is little existing literature exploring current practices or joint working in this example of cross sector working between health and voluntary sectors. The ‘CHANT’ project (Mumby & Whitworth, 2012) was a formal partnership project which involved joint working and service provision between an SLT and a CSC.
- However, in contrast, this research explores experiences of informal joint working which may occur in regions where both roles are commissioned.

**Method**

- In this research, a series of in-depth interviews were undertaken with five CSCs and seven SLTs across services within the East of England.
- A semi structured interview schedule was used, with open questions focussing on exploring participants’ experiences and feelings around joint working between SLTs and CSCs.
- Data from the 12 interviews were transcribed and analysed using thematic analysis (Braun & Clarke, 2006; King & Horrocks, 2010).
- Analysis led to the development of six themes which are displayed below in this novel schematic model.

**Findings**

- ‘We are seen as ‘that’s the voluntary service, it’s not the NHS. Very nice’… but I just don’t think they take us 100% seriously” (CSC5)
- “And that’s the only way you’re going to build up a relationship with them and their trust in what you are doing. ‘Cos they have to be able to see you working and that what you are doing is correct...” (CSC4)
- “It [joint working] should be standard everywhere across the country because it has such positive outcomes for patients” (SLT3)
- “SLTs have a role to play [with people with aphasia] but we’re not the only people…there’s an awful lot of stuff that other people can do” (SLT5)
- “I think even within my department we all have different focusses and different views [about role division]” (SLT7)
- “SLTs have a role to play [with people with aphasia] but we’re not the only people…there’s an awful lot of stuff that other people can do” (SLT5)
- “I think think a lot of our theoretical background and our [SLT] training is invisible really. It underlies what we do and our thought processes and our judgements, but it’s not explicit necessarily to people” (SLT6)
- “I had to take on board what they wanted [the commissioners]...and then I had the SLTs with what they wanted....and they were, I suppose, two different things” (CSC2)
- “We put together a programme of how it would work ...so they [SLT] put down everything they would do, things that we would do, and stuff we would do together” (CSC4)

**Discussion**

- The research reveals joint working relationships between SLTs and CSCs can be positive and beneficial. However, the findings also highlight challenges inherent in this example of cross sector working, between two roles who undergo different levels of training and professional regulation. SLTs and CSCs engage in processes to establish place in unstructured hierarchies and to negotiate role boundaries to ‘share out aphasia’.
- Clinical applications are suggested based on research findings – please contact the lead researcher for more information - katherine.scantlebury@nhs.net

**References**

