

PROGRAMME SPECIFICATION	
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1	Awarding Institution	Newcastle University
2	Teaching Institution	Newcastle University
3	Final Award	1. BSc 2. Master of Speech and Language Sciences
4	Programme Title	1. BSc (Hons) Speech and Language Therapy 2. Master of Speech and Language Sciences
5	UCAS/Programme Code	B621/B62M
6	Programme Accreditation	Health and Care Professions Council Royal College of Speech and Language Therapists
7	QAA Subject Benchmark(s)	Health Care Programmes: Speech & Language Therapy
8	FHEQ Level	1. FHEQ level 6 2. FHEQ level 7
9	Last updated	May 2026

This document covers two related programmes 1) BSc (Hons) Speech and Language Therapy and 2) Master of Speech and Language Sciences. The programmes share the teaching in stages 1 and 2. There is also considerable overlap in the teaching in stage 3. These shared aims, teaching, assessment and outcomes are reflected in the programme specification. At the end of stage 3, the BSc students do an additional clinical placement within Clinical and Professional Education III Extended. Only the Masters students complete stage 4; they, therefore, have some additional aims and outcomes. The aspects specific to the Masters course are highlighted.

10	Programme Aims
<p>Both programmes aim to produce graduates who:</p> <ol style="list-style-type: none"> 1) have a coherent understanding of the causes, diagnosis, assessment and treatment of speech, language and communication as well as swallowing disorders. 2) have excellent communication and problem solving skills. 3) have the knowledge, understanding, intellectual and practical skills to meet the approval criteria of the Health and Care Professions Council (HCPC) for registration of graduates for employment as Speech and Language Therapists. 4) are reflective and evidence-based clinicians, equipped to meet the changing needs of the profession <p>In addition, the Masters programme will produce graduates who:</p> <ol style="list-style-type: none"> 5) have advanced research skills and emerging leaderships skills which allow them to pursue careers in clinical and/or research settings. 	

- 6) have an in-depth and critical understanding of how individual client need, evidence from research and clinical evaluation and government policy can influence the provision of services for people with communication and swallowing disorders.

The content and structure of the programmes has been designed to ensure that students acquire the knowledge, understanding and skills commensurate with fitness for practice, purpose and award at the point of graduation. There is an emphasis throughout the programme on the integration of theory and practice, and on the adoption of a reflective and evidence-based approach to practice and to the evaluation of its effectiveness. Clinical practicum and academic learning are presented concurrently. In this way, it is envisaged that one is challenged by the other and that experience and knowledge develop in an iterative way.

In the final year, Masters students consolidate their knowledge of research methods and research skills, applying them as they complete a dissertation project. This will equip them for post-graduate research. Students also carry out a clinical based project, e.g. clinical audit, service evaluation, about an aspect of service delivery. Students have the opportunity to enhance their knowledge of the assessment and management of communication and swallowing disorders, with in-depth consideration of factors influencing the provision and type of services available.

To provide programmes:

- 1) which consistently attract highly qualified applicants.
- 2) in which teaching is informed by research, both relevant research across the disciplines and research carried out by members of staff.
- 3) which are approved by the HCPC.
- 4) which are accredited by the Royal College of Speech and Language Therapists (RCSLT) as it meets their curriculum guidelines.
- 5) that reflect the QAA subject benchmarks for Speech and Language Therapy.

The BSc programme satisfies the requirements of the FHEQ for a level 6 programme.

The Masters programme satisfies the requirements of the FHEQ for a level 7 programme.

11 Learning Outcomes

The programmes provide opportunities for students to develop and demonstrate the knowledge and understanding, intellectual, practical and transferable skills in the sections below. The outcomes of the programmes reflect the QAA benchmarks for Speech and Language Therapy and the HCPC Standards of Proficiency for Speech and Language Therapy.

Knowledge and Understanding

Both programmes provide opportunities for students to develop and demonstrate:

A1 in-depth knowledge and understanding of the symptoms, causes, and consequences of the full range of human communication and eating, drinking and swallowing disorders. This includes accurate use and spelling of specific terminology.

A2 in-depth knowledge and understanding of the assessment and management of the full range of human communication and eating, drinking and swallowing disorders.

A3 relevant knowledge from the disciplines of education, linguistics, phonetics, biomedical and medical sciences, psychology, sociology and research methods, and the ability to apply this appropriately.

A4 understanding of speech and language therapeutic contexts and service delivery, and an awareness of legislation and statutory codes affecting speech and language therapy practice.

A5 understanding of professional and ethical standards and factors influencing fitness to practise.

The Masters programme has additional focus on:

A6 advanced knowledge of research methods and critical appraisal enabling students to conduct research and service delivery projects, and to evaluate findings from a variety of studies.

A7 an in-depth understanding of the role of the speech and language therapist and factors influencing service design and delivery, enabling them to act as advocates for their profession and the population of people with speech, language and communication needs.

Across the programme, it is envisaged that students will move from having understanding of foundation knowledge, to being able to integrate and apply information from different disciplines to their understanding of communication disorders, and be able to critically evaluate evidence and its application to clinical issues.

The final year allows the Masters students to extend their knowledge and understanding to broader issues about service provision and leadership and to carry out research, with critical evaluation of current evidence, the generation and testing of a research question and integration of their results with the evidence base.

Teaching and Learning Methods

Stage 1 involves foundation modules in the disciplines that underlie the study and description of human communication, including human anatomy and physiology, psychology, sociology, linguistics, phonetics and research methods (A3). This stage also provides an introduction to speech, language and communication difficulties, with opportunities to observe clients' communication and learn from service users (A1). Within Clinical and Professional Education, there is an introduction to the stages involved in case management and case-based problem solving (CBPS), to reflective practice and to the policies and principles which underpin practice, e.g., confidentiality, safeguarding, fitness to practise (A4, A5). Modules in this stage are delivered through a combination of methods including lectures, tutorials and practical classes.

In stage 2, students have the opportunity to apply problem-based learning in the form of CBPS to clients with acquired and developmental disorders (A1, A2). The CBPS approach combines some lectures with group work and independent study. Students consider assessment, diagnosis and the planning and evaluation of intervention (A1, A2). The CPBS approach is also reinforced as students work directly with adult and child clients in the campus based clinical placements. Building on learning in stage 1, additional modules focus on the application of knowledge from psychology, sociology, phonetics and linguistics to the understanding of speech, language and communication difficulties (A3). Research methods (A3) focuses on students' understanding of evidence-based practice, with a focus on the role of audit, service evaluation and research in informing practice (A4).

Stage 3 continues to develop the knowledge and understanding related to specific client groups, for example, clients with autism, dementia, voice disorders (A1, A2). Students complete practical dysphagia workshops that enables demonstration of RCSLT pre-registration eating, drinking and swallowing competencies (A1, A2). This is supported by modules fostering application of knowledge, e.g., biomedical sciences, neurology, psychology and sociology to the understanding of communication disorders. Teaching

methods include a combination of lectures and group work, with opportunities to meet and learn from service users. Students have the opportunity to consolidate and apply the CBPS approach to clients they are working with on external clinical placements. There is also increasing consideration of the professional context in which speech and language therapists work within the teaching and through their experience on placement (A4, A5).

In stage 3, the BSc students have a module (Professional Issues for Speech and Language Therapists) which explores relevant legislation via seminars and individual and group presentations (A4, A5). For the Masters students, research methods in stage 3 (A6), focuses on the application of statistical analysis to clinical data and the generation of a research proposal.

Stage 4 continues to build on Masters students' knowledge and understanding of the professional context and relevant legislation in a Professional Issues and Leadership module (A4, A5). There is in-depth consideration of the role of the speech and language therapist, not only as clinicians, but also as advocates for and future leaders of the profession (A7). Students carry out a project related to service delivery; the project is generated by and carried out within a clinical service. Students also conduct an independent research project (A6).

Assessment Strategy

Across the programmes, the assessment strategy includes a broad range of assessment types, with both formative and summative assessment suited to the particular area of learning. Assessments are designed to assess knowledge and understanding, with a particular focus on application. Foundation knowledge is assessed through essays, practical exercises, reports, classroom tests and formal exams (A3). Students' understanding of the causes and consequences, assessment and treatment of communication (A1, A2) is assessed primarily by written case reports which provide a profile of communication, diagnosis and a plan for intervention with consideration of service delivery and the monitoring of effectiveness. Eating, drinking and swallowing RCSLT competencies are assessed through a written exam (knowledge-based) and a practical exam (skills-based) (A1, A2). Clinical vivas allow assessment of the students' ability to apply the CBPS approach to novel clients, demonstrating an in-depth understanding of the assessment and treatment of acquired and developmental speech, language and communication difficulties. For BSc students, Professional Issues for Speech and Language Therapists is assessed via group presentations and a reflective log (A4, A5). For Masters students, Professionals Issues and Leadership is assessed via individual presentations, a reflective log and a critical reflection related to their conduct of the clinical project (A4, A5, A7). Masters students submit their dissertation following the format of a journal article and also produce a research poster (A6). Following their service-based project, students produce a professional report; this is prepared for the service and demonstrates an understanding of the service context (A4, A6).

Intellectual Skills

The programmes provide opportunities for students to develop and demonstrate:

B1 an ability to synthesise and evaluate information, enabling them to solve clinical problems and adapt to advances in theory and clinical practice throughout their career.

In addition, the Masters programme focuses on:

B2 application of research and critical appraisal skills enabling students to critically evaluate the research literature and develop small scale research (and clinical) projects.

B3 application of scientific thinking and leadership skills.

Across the programme, it is envisaged that students will move from **describers** who observe and seek information, to **analysers** who are able to apply theory to assessment and intervention with support, to **integrators** who synthesise and critically evaluate information independently to **professionals** who demonstrate an ability to solve complex problems and who can adapt to advances in theory and practice throughout their career. Stage 4 allows Masters students to become **emerging researchers and leaders**.

Teaching and Learning Methods

B1 The rapidly changing knowledge base of the profession is explicitly acknowledged. Students are taught about evidence based practice and critically appraisal, allowing them to critically evaluate evidence. They apply this within CBPS, with synthesis and evaluation of relevant evidence to inform decisions about assessment and intervention. Eating, drinking, and swallowing workshops provide opportunity to work through cases, develop practical skills e.g. assessment and working with clients. This is reinforced as they integrate and evaluate information to a broader range of clients and service related issues in stage 3 (and in stage 4). Staff and student led workshops, seminars and presentations provide opportunity for students to investigate and consider issues relevant to the profession . Students keep a reflective log of what they have learnt to demonstrate they have met the Standards of Proficiency.

For the Masters Students:

B2 Critical evaluation of the research literature is required throughout all CBPS teaching. Seminars and individual dissertation supervision for the Masters students support the design of a research proposal, the implementation of the research project, analysis and evaluation of results and the dissemination of findings in different formats.

B3 In carrying out their research project and clinical service provision project, students have the opportunity to apply both scientific thinking and leadership skills. The development of these skills is supported by their dissertation supervisor and their supervising clinical educator on placement. Leadership is also a focus of the teaching in Professional Issues and Leadership.

Assessment Strategy

B1 Throughout the programme, and particularly within the written case reports, students are assessed on their ability to provide support for decisions based on the evidence and to critically evaluate the research literature. Individual eating, drinking and swallow competencies are assessed through practical (skill-based) and written video-based exam (knowledge-based) exam. Students' critical reflection on learning and professional development is considered in reflective logs.

B2 Critical evaluation of literature is assessed in written case reports, the research proposal and the dissertation.

B3 Scientific thinking is assessed in written case reports, the research proposal, dissertation project and service provision report. Students need to demonstrate leadership in order to complete the project work in a timely and effective way. Within Professional Issues and Leadership, students have to reflect on the leadership skills.

Practical Skills

The programmes provide opportunities for students to develop and demonstrate:

C1 the clinical skills needed to assess and provide effective treatment for individuals with communication and swallowing disorders, drawing on the evidence base.

C2 an ability to demonstrate professional behaviour adhering to standards of conduct, performance and ethics.

C3 an ability to engage in reflective practice.

C4 an ability to work in partnership with clients, parents/carers and other professionals.

C5 the skills needed to transcribe normal and disordered speech to analyse language production (applying learning from phonetics and linguistics).

In addition, the Masters programme focuses on:

C6 the research skills to design, carry out, analyse results and write up research and clinical projects (e.g. audit or service evaluation).

Across the programmes, it is envisaged that students will be reflective practitioners, who reflect on and develop their knowledge and skills in working with clients with communication and swallowing difficulties. It is expected that they will act responsibly and professionally with clients and with other professionals, with an increasing understanding of the role of the speech and language therapist and service provision issues. Within stage 4, Masters students develop the practical skills needed to carry out small scale projects.

Teaching and Learning Methods

C1-4 The development of clinical skills is underpinned by all aspects of the programme, Specifically, CBPS supports understanding of the evidence base underpinning assessment, treatment and management. Clinical skills are developed via graded clinical experience across the years. In stage 1, there is an opportunity to observe people with communication difficulties. In stage 2, campus based clinical placements have a central role in developing skills, with the provision of high level of support and enable close integration of academic knowledge and clinical skills. Students have the opportunity to work directly with children with developmental and adults with acquired speech, language and communication difficulties. In stage 3 (and 4), external block placements are more varied in terms of context and provide an opportunity to work with a wider range of clients and to work alongside other professionals. Throughout all clinical placements, there is a focus on the development of clinical skills and professional behaviour, with students adhering to the HCPC guidance on conduct, performance and ethics.

C3 Students are taught about reflection in stage 1, with the opportunity to practise reflective writing. Reflection on practice (both spoken and written) is encouraged across all clinical placements, with students receiving regular formative feedback about their reflective skills. Within stage 4 for Masters students, Professional Issues and Leadership focuses on reflection about broader service level issues.

C4 Students learn about partnership working and the role of other professionals in the management of speech, language and communication difficulties within CBPS. There are opportunities to observe, liaise and work with other professionals whilst on placement. There are also opportunities for inter-professional learning with students from other professions e.g. student teachers, students from other allied health professions.

C5 Students have introductory teaching on phonetics and linguistics in stage 1, with tutorials and self-study materials supporting the transcription and analysis of normal speech and language. In stage 2, the focus moves to disordered speech and language. Within CBPS and clinical practice, students then continue to develop and use these skills.

C6 Masters students carry out a dissertation project in stage 4, supported by 1:1 tutorials with their academic supervisor. As part of their stage 4 clinical placements, they also carry out a clinical project related to service delivery. This project, which is usually an audit or

service evaluation, is commissioned and overseen by a clinical service, with supervision across academic and clinical settings.

Assessment Strategy

C1-4 Clinical and professional skills are assessed using a competency based Clinical Evaluation Report (CER) filled in by placement based, clinical educators. The CER focuses on professionalism and then assessment, description and diagnosis, planning of client management, intervention and service delivery. Specific competencies focus on the ability to reflect on practice and working in partnership with others. Additional clinical assessments include viva examinations and case reports which consider the application of CBPS to both clients they have worked with and novel cases.

C3 Written reflection is assessed in stage 1, with the submission of reflections on non-clinical situations. Reflection is an integral part of placement learning and is assessed within the CER. In stage 3 (BSc students) and stage 4 (Masters students), students complete a reflective log. In addition, Masters students complete a critical reflection on their leadership within a clinical based service provision project.

C5 Knowledge of linguistics and phonetics are assessed within exams. Phonetic skills are assessed via oral and aural tests in stages 1 and 2. Within clinical vivas and case reports, students are expected to transcribe and implement appropriate analyses as part of their information gathering and diagnosis.

C6 Masters students write a dissertation following the style of a journal article and also produce a poster about their research. They produce a professional, service provision report which is based on the clinical project.

Transferable/Key Skills

The programmes provide opportunities for students to develop and demonstrate:

D1 excellent verbal and written communication skills.

D2 an ability to take responsibility for their own learning, with an ability to prioritise work and meet deadlines.

D3 an ability to work effectively either independently or alongside other people, including peers, professional colleagues and service users.

In addition, the Masters programme focuses on:

D4 emerging leadership skills.

Teaching and Learning Methods

D1 Throughout the programme, there is a focus on developing excellent communication skills, with group work, opportunities to present information to peers, opportunities to work with people with communication difficulties (where communication may need to be adapted) and to develop professional communication skills (e.g. contributing to professional discussion, written reports).

D2 Prior to each clinical placement, students are required to take responsibility for their own learning, reflecting on previous experience and producing personal goals which highlight their learning needs and an action plan for how they will achieve the goals.

D2 & 3 CBPS promotes self-directed learning and the ability to work within a group.

D4 In stage 4, Masters students will explicitly learn about leadership strategies and the application of research methodology to service delivery and quality improvement, applying knowledge and skills from previous learning.

Assessment Strategy

D1 The assessment of communication skills is integral, with assessment of both verbal and written communication across the programme. This includes communication with clients and professional reports.

D2 Within the CER, students are assessed on their ability to reflect and identify their own learning needs, on their professionalism including their dependability, organisation and ability to meet deadlines.

D3 Within CBPS, formative submissions are produced as a group. Some assessments are carried out as a group, with a shared mark across the group.

D4 In Professional Issues and Leadership, the critical reflection based on their experience planning, executing and evaluating a clinical project in conjunction with a clinical service, will demonstrate emerging leadership skills and provide the student with opportunity to formulate a personal development plan.

12 Programme Curriculum, Structure and Features

Basic structure of the programme

The BSc programme is studied on a full-time basis over three years (6 semesters), with an additional, compulsory 8 week block clinical placement at the end of the programme. Stage 1 and 2 require the study of compulsory modules with a credit value of 120. Stage 3 has a credit value of 140, due to the additional clinical and professional education module.

The Masters programme is studied on a full-time basis over four years (8 semesters). Each year requires the study of compulsory modules with a credit value of 120.

A 20 credit module consists of a notional 200 hours of student work, including lectures, tutorials, practicals, CBPS group work, private study, completion of coursework, revision and assessment. Modules vary in size from 10 to 40 credits. Each stage is preceded by an induction period which gives an overview of the stage in the programme and provides specific information and training relevant to clinical placements. The programme contains a range of clinical placements which satisfy the supervised clinical hours set out by RCSLT's curriculum guidelines.

Key features of the programme (including what makes the programme distinctive)

The programmes combine in-depth coverage of relevant knowledge from disciplines of education, linguistics, phonetics, biomedical and medical sciences, psychology, sociology and research methods, with opportunities to apply this knowledge within both CBPS and whilst working with clients on clinical placements. Both programmes lead to the award of a degree which is accredited by the RCSLT and approved by the HCPC. Successful completion of the programme provides eligibility to apply for registration with HCPC. Many of the staff involved in leading and lecturing on the programme are also researchers, currently conducting research into communication disorders, which contributes to the academic environment. Through strong links with regional SLTs, we attract highly specialised SLTs to be part of the wider teaching team, contributing their expertise regarding specific client groups.

The teaching and learning methods aim to develop knowledge and understanding and also advanced academic skills in critical thinking and synthesis and professional skills of collaboration, communication reflective practice and research. These are achieved through the application of the following pedagogical principles/priorities: inquiry-based learning;

research-led teaching; reflective practice; assessment for learning; collaborative group learning.

Clinical placements are a particular strength of the programmes, with transition from observation of clients, supported and closely supervised placements within campus based clinical placements and then external placements. The campus based clinical placements facilitate peer support in these early placement experiences, as students are working together in pairs or small groups. Every student has adult and paediatric experience within the campus clinics. External placements offer opportunities to work in a range of settings (e.g. hospitals, community clinics, schools), for a range of placement providers (e.g. NHS, charities) and with a wide variety of clients with speech, language and communication and/or swallowing difficulties. Clinical hours (as specified by the RCSLT) are met via directly supervised placement experience. There are also additional observation opportunities and non-supervised video based independent study and observation of normal child development within a child study. There is close integration of academic and clinical teaching, with clinically qualified members of academic staff involved directly in work within the campus clinics and application of CBPS across both aspects of the programme. Block placements allow in-depth experience of the workplace and a greater understanding of the wider role of the speech and language therapist, as part of multidisciplinary teams and in monitoring and evaluating service provision. Block placements and Professional Issues, alongside specific support in developing CVs and interview skills, aid the transition from student to graduate within the workplace.

Masters students have a unique opportunity to carry out a project about service delivery as part of one of their stage 4 external placements, with the service generating the question and considering the relevance of the findings to the service context. Masters students also have the opportunity to carry out an independent research project. Students generate their own research question, and with the support of research active staff, carry out and write up the research, in formats (i.e. a research article and poster) that prepare graduates for future research and service development roles.

Programme regulations (link to on-line version):

[Programme Regulations 26_27.](#)

13 Support for Student Learning

Generic information regarding University provision is available [here](#).

14 Methods for evaluating and improving the quality and standards of teaching and learning

Generic information regarding University provision is available [here](#).

15 Regulation of assessment

Generic information regarding University provision is available [here](#).

For BSc Speech and Language Therapy

Pass mark

Students are required to achieve a pass mark (i.e. 40% minimum) in each module, with some modules requiring that component assessments are passed. All modules are compulsory and core.

Weighting of stages

The determination of degree classification will be based on the assessment of the Stage 2 modules and the Stage 3 modules weighted 1:2.

Honours degrees are classified in the following manner:

Weighted Average (Honours Modules)	Classification
40-49%	Third Class
50-59%	Lower Second (2:2) Class
60-69%	Upper Second (2:1) Class
70%+	First Class

For Master of Speech and Language Sciences

Pass mark

Students are required to achieve a pass mark in each module, with some modules requiring that component assessments are passed. All modules are compulsory and core. The pass mark in stages 1 to 3 (levels 4-6) is 40%. The pass mark in stage 4 (level 7) is 50%.

Weighting of stages

The determination of degree classification will be based on the assessment of all of the modules in stage 2, stage 3 and stage 4 with the weighting of 1:2:2 for stage 2, stage 3 and stage 4 respectively.

The programme adheres to the common marking scheme specified in Integrated Master's Examinations Conventions namely:

Summary description application to honours level degree classification modules (levels 4-6)

<40	Fail
40-49	Third class
50-59	Second class, second division
60-69	Second class, first division
70 or above	First class

Summary description application to honours level degree classification modules (level 7)

<50	Fail
50-59	Second class, second division
60-69	Second class, first division
70 or above	First class

Across Both Programmes

Students need to demonstrate Fitness to Practise in order to complete the clinical placements. All components of Clinical and Professional Education modules need to be passed (see Policy on Failing Components of Clinical and Professional Education Modules & Procedure regarding Retrieval Placements).

The degree classification will be determined by the weighted average of all honours modules.

In addition, information relating to the programme is provided in:

The University Prospectus: <http://www.ncl.ac.uk/undergraduate/degrees/#subject>
Degree Programme and University Regulations: <http://www.ncl.ac.uk/regulations/>

Please note. This specification provides a concise summary of the main features of the programme and of the learning outcomes that a typical student might reasonably be expected to achieve if she/he takes full advantage of the learning opportunities provided. The accuracy of the information contained is reviewed by the University and may be checked by the Quality Assurance Agency for Higher Education.