# Standards of Practice Introduction



Alberta College of Speech-Language Pathologists and Audiologists

### Background

The Alberta College of Speech-Language Pathologists and Audiologists (ACSLPA) is a regulatory body that carries out its activities in accordance with provincial legislation to protect and serve the public by regulating, supporting, and ensuring **competent**, safe, and ethical practice of speech-language pathologists (SLPs) and audiologists in Alberta. In this context, "competent, safe, and ethical practice" includes care that is free from racism and discrimination, *respecting equity, diversity, and inclusion*. SLPs and audiologists have been regulated under the *Health Professions Act* (HPA) in Alberta since July 1, 2002. The HPA directs the activities of ACSLPA and outlines the regulatory responsibilities of the College that are required to protect and serve the public.

Under the HPA, ACSLPA must establish, maintain and enforce **standards**<sup>1</sup> of practice for the regulated professions. The *Standards of Practice* define the minimum level of professional performance that SLPs and audiologists are expected to demonstrate in their practice. They are updated on a regular basis to reflect changing practice needs and trends.

The Standards of Practice incorporate the concept of "Right Touch Regulation", first introduced in the United Kingdom in 2000. Right Touch Regulation has subsequently been adopted internationally as a leading regulatory practice, including themes related to regulatory legislation and policies as follows:

- Proportionate and appropriate to the risk posed
- Consistent and fairly implemented
- Targeted minimizing potential side effects
- Transparent simple and user friendly
- Accountable and subject to public scrutiny
- Agile and adaptive to change

Each **regulated member** of ACSLPA is accountable for practicing in accordance with the *Standards of Practice*, regardless of role, practice area or practice setting. Practicing in breach of the *Standards of Practice* may constitute unprofessional conduct, as defined in the HPA.

### Purpose of the Standards of Practice

Standards of Practice have a different relevance/purpose to stakeholders both within and external to the professions of speech-language pathology and audiology such as:

- **Regulated members** use the *Standards* of *Practice* to obtain guidance related to accountabilities, expectations and continuing **competence**.
- The regulatory college (ACSLPA) uses the Standards of Practice to inform practice related to continuing competency, complaints and the conduct of regulated members.

- Educators can utilize the Standards of Practice to serve as a framework for curriculum content and development, practice evaluation and program review, in conjunction with entry-to-practice **competency** statements.
- Managers / employers can use the Standards of Practice to guide development of job descriptions/roles and performance evaluation.
- Other health professionals may use the Standards of Practice to provide insight into roles and responsibilities, overlapping areas of practice and highlight opportunities for collaboration.
- The public may use the Standards of Practice to gain understanding of what they can expect from services that are provided by SLPs and audiologists.

#### How the Standards of Practice are Organized

The *Standards of Practice* framework consists of six broad areas including the following:

- Standard Area 1.0 Service Delivery;
- Standard Area 2.0 Professional Responsibility/ Accountability;
- Standard Area 3.0 Continuing Competence Program;
- Standard Area 4.0 Practice Management;
- Standard Area 5.0 Sexual Abuse and Sexual Misconduct; and
- Standard Area 6.0 Restricted Activities

Each Standard Area is composed of individual standards that are outlined as follows:

- The Standard statement describes the minimum expected level of performance of a regulated member in the provision of **quality services**.
- Indicators describe actions that demonstrate how a standard statement is applied in practice. They can be used to assist in interpreting or measuring performance to determine if a standard is being achieved. The indicators are not listed in order of importance, nor are they all inclusive. All indicators are applicable to both SLPs and audiologists.
- *Expected outcomes* outline **clients'** expectations from the services provided by a regulated member.

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<sup>1</sup><u>A glossary of terms is includ</u>ed in each Standard statement and at the end of the complete Standard document. Key terms included in the glossary are indicated in **bold text** the first time they are used in each Standard statement, including subsequent indicators and expected outcomes.

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### **Guiding Principles**

The *Standards of Practice* are based on the following assumptions/guiding principles. Specifically, they:

- Reflect the College's responsibility and commitment to the delivery of competent and safe services to the public.
- Outline mandatory expectations/criteria for the professional conduct of regulated members.
- Represent the minimum requirements for professional behaviour of regulated members.
- Apply to all regulated members regardless of their practice area and setting. Are part of the overall legislative scheme and form a continuum with other documents such as the Code of Ethics, Advisory Statements, Position Statements, Guidelines, Protocols, and Competency Profiles.

All ACSLPA documents and relevant Alberta Government legislation can be accessed from the ACSLPA website at <u>http://acslpa.ca</u>. A visual depiction of the relationship between ACSLPA's overarching legislation, minimum professional requirements that apply to regulated members, and resources to support the application of those requirements, is provided in the diagram below.



**Client** refers to "a recipient of speech-language pathology or audiology services, and may be an individual, family, group, community or population. An individual client may also be referred to as a patient."

**Collaboration** refers to "an approach that enables health care providers to deliver high quality, safe, person-centered services to achieve the best possible individual health outcomes. Collaborative practice is not the goal in and of itself: rather, it is a means to move the system to a higher level of quality and safety while maintaining a focus on the needs of the individual seeking health services."

Quality services refers to "services in the health care system as measured by accessibility, acceptability, appropriateness, efficiency, effectiveness, and safety factors, including cultural safety and freedom from racism/discrimination."

**Regulated member** refers to "an individual who is registered with ACSLPA in any of the regulated categories of membership prescribed by ACSLPA Bylaws, the Health Professions Act and our Regulations."

A **standard** refers to "a statement that provides requirements, specifications, guidelines or characteristics that can be used consistently to ensure that materials, products, processes and services are fit for their purpose."