Alberta College of
Speech-Language Pathologists
and Audiologists

Guideline:

Service Termination

Month Year

Service Termination

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Guideline: *Provides guidance to regulated members to support them in the application of Standards of Practice.*

Introduction

The Alberta College of Speech-Language Pathologists and Audiologists (ACSLPA) is the regulatory body for the professions of speech-language pathology and audiology in Alberta. ACSLPA carries out its activities in accordance with provincial legislation to protect and serve the public by regulating and ensuring competent, safe, ethical practice of speech-language pathologists and audiologists.

The intent of this guideline is to outline the expectations of regulated members when terminating services with clients, and to support regulated members in addressing the challenges that may arise when terminating therapeutic relationships with clients. Regulated members may find it useful to review the following Key College Documents when reviewing this guideline:

- Standard of Practice 1.3 Client Assessment and Intervention (see indicators (h) and (i)).
- Code of Ethics

Service Termination

Service termination or discontinuation is a normal and necessary but significant phase of the therapeutic process, which can carry important ethical and professional responsibilities for regulated members. All therapeutic relationships with clients will eventually come to an end, ideally in a mutually planned process when agreed-upon treatment goals are met or sufficient progress has been made, when the specified time for working with a client has ended, when services are no longer required, or when the client is no longer interested in continuing services. Services that are not terminated under the above circumstances (e.g., sudden, early, unanticipated, and/or unilateral service termination) may make discharge planning and implementation challenging for the regulated member and the client, and may even give rise to conflict within the therapeutic relationship.

For the purposes of this guideline, service termination means the planned or unplanned ending of a regulated member's provision of a professional service to a client. Depending on the practice setting or service delivery model, the ending of one service or episode of care may end an individual provider's involvement but may not end all speech-language pathology or audiology supports. Regulated members should identify what service or supports are ending, what will continue, and who is responsible.

To avoid harm to the client, services must therefore only be terminated in situations where it is considered ethical, reasonable, and appropriate to do so. This includes situations where:

- The regulated member lacks the necessary competencies to provide continued services to the client (e.g., the client has service needs that are beyond the regulated member's expertise),
- The regulated member is leaving a place of employment, relocating, transferring to a different team, or closing their practice,

- The regulated member has reasonable justification to believe that the client will not benefit from continued services (e.g., the client's progress has plateaued), after considering the client's priorities and functional needs, and any reasonable modifications or alternatives,
- The regulated member is exposed to an unsafe therapeutic environment and would be at risk of harm if services were to continue (e.g., the client is aggressive towards or threatens or assaults the regulated member, shows up to sessions under the influence, or violates the regulated member's personal and professional boundaries),
- The client is non-compliant with the agreed upon or established treatment plan or is otherwise disengaged from services (e.g., frequently no-shows or cancels, or shows a clear lack of participation during sessions), after reasonable efforts to understand and address potential barriers (e.g., accessibility, disability-related, cultural or linguistic, socioeconomic, transportation, scheduling, and other barriers)
- The benefits of concurrent practice no longer outweigh the risks, as per ACSLPA's Concurrent Practice guideline,
- A conflict of interest requiring recusal of services is identified, or
- The funding for services to the client is no longer available, or the client is unable to provide or has stopped providing the agreed upon payment for services, after the client has been informed of and consented to applicable fee and cancellation policies.

Client Abandonment

Client abandonment occurs when services are unilaterally and abruptly terminated without arranging for a client's continuity of care or taking steps to ethically terminate services as described above. Client abandonment places a client at risk of harm and may be considered unprofessional conduct.

Considerations for Safe and Ethical Service Termination

Even when services are terminated for valid and reasonable reasons, service termination comes with professional and ethical requirements and responsibilities that must be handled with care. Service termination decisions must be made in good faith, and the termination process must proceed in a manner that prioritizes the best interests of the client. It is important that regulated members terminate services in a manner that will not lead to perceptions of discrimination or client abandonment.

Regulated members should consider the following strategies when terminating services with a client, to avoid claims of client abandonment or otherwise inappropriate discharge planning, while remaining mindful that the most appropriate termination process will differ depending on the circumstances.

Planning for Service Termination

Regulated members should consider preparing for service termination as soon as termination is considered. Members may find it useful to have a service termination plan which could include:

- **Self-reflection**: Potential termination grounded in client-based reasons (e.g., non-compliance with treatment, non-payment of fees, client request to withdraw from services) may require self-reflection on the part of the regulated member to ensure that the reason for termination is valid and reasonable, that barriers and alternatives have been

considered, that the client's best interests are prioritized, and that regulated member's feelings about the situation (e.g., stress, anxiety, or frustration) do not negatively impact service delivery.

Depending on the circumstance, regulated members may also find it useful to seek consultation or mentorship from a trusted colleague to ensure that service termination is handled safely and ethically.

- **Reviewing any termination requirements or expectations**: Regulated members should review and ensure compliance with ACSLPA minimum standard expectations for service termination as outlined in this guideline and the other Key College Documents listed in the Introduction of this guideline.

  Regulated members may also find it helpful to review and ensure compliance with any contractual or employer policy expectations regarding service termination. In some settings, the organizational administrators may retain responsibility for some aspects of service termination (e.g., facilitating record transfer, providing notice of service termination, or transferring the client to a new service provider). It is important that regulated members understand and clearly communicate to clients which aspects of service termination will be managed by whom. Where administration staff are responsible for some activities, it is considered the responsibility of the regulated members to confirm that these activities will be completed and that communication to the client about these steps occurs.

  Regulated members who employ or contract other professionals or who are in administrative roles should consider creating and enforcing clear service termination policies and procedures, that define the service termination roles and responsibilities of the employer or contracting agency, the regulated member, and the client.

  If a regulated member is suddenly unavailable or incapable of practicing, the employer, practice owner, or record custodian may need to notify clients and coordinate transition activities. Independent practitioners should consider maintaining a contingency plan addressing incapacity, death, or service interruption, including client communication, records, and addressing urgent follow-up needs.

Implementing Service Termination

Regulated members should consider the following when planning for service termination:

- **Informing the client**: It is recommended that discussions with clients about service termination be initiated as early as possible. This is so that the client is provided with adequate notice of termination of services, so that they have sufficient time to arrange for continuity of care before services are discontinued. Determination of adequate or reasonable notice will require careful consideration of several factors, including the client's diagnosis, age or vulnerability, complexity and frequency of service, risk of adverse outcomes, and the availability of alternative service providers. In the event of sudden or unanticipated service termination (e.g., sudden change of employment), the regulated member, or their employer if the regulated member is unavailable, is still expected to make reasonable efforts to ensure that clients are informed of service discontinuation and that discharge planning is implemented as soon as possible.

The regulated member should take reasonable steps to discuss service termination with the client. Discussions about service termination may include:

- The reason(s) for service termination,
- The timeline for service termination (e.g., remaining session dates, date of last session),
- Review of the client's treatment and progress,
- Referral suggestions for other service providers or information about how the employer will be transferring the client to a new provider,
- Client education and provision of any resources that may facilitate the client's management of their own care post-discharge,
- The client's responsibility for their continued care post-discharge (e.g., scheduling appointments with their new service provider),
- If relevant. (e.g., if the regulated member is leaving their place of employment), what the client can expect from the regulated member's employer or agency following the member's departure, and
- Any other relevant implications of service termination (e.g., discussing any unintended or unexpected consequences that service termination may bring up for the client).

Communication about service termination should be timely, respectful, accessible, and protect the client's privacy. Regulated members should consider the client's preferences and needs, use of plain language instead of technical jargon, the need for interpretation or translation, disability-related accommodations, use of augmentative and alternative communication, and presence of support persons.

Ideally, discussions about service termination would take place during face-to-face or in-person meetings, but this is dependent on circumstance. For example, a face-to-face or in-person meeting is not advisable if the client poses a safety risk to the regulated member, or if the client cannot be available for meeting in-person or online. In some situations, phone contact or written communication may be the best or only option available for informing clients of termination.

In situations where a client stops responding, the regulated member should make reasonable attempts to contact the client using authorized communication methods. Written notice may advise the client that the file will close on a stated date and identify urgent supports and how to seek future access or re-referral. Contact attempts and outcomes should be documented.

- **Providing referrals**: When the employer will not be transferring care to another provider, regulated members should make reasonable efforts to find alternate services for clients when terminating services. A good 'rule of thumb' would be to provide at least three appropriate referral suggestions, taking into consideration geographic accessibility, eligibility, cost, wait times, cultural and linguistic needs, the urgency and complexity of the client's needs, and any other specific care needs the client may have.

- **Assisting with the transition of care**: Whenever possible and appropriate, the regulated member should make themselves available for activities associated with the handover of services to another service provider. This may include, when appropriate consent has been obtained, offering to or indicating a willingness to speak with the client's new service provider, or facilitating the provision of the client's records to their new service provider.

- **Documenting service termination**: Regulated members should document all decisions and discussions about service termination, as well as all transition and discharge planning activities. Documentation should include:
    - The reason(s) and rationale for termination, including the client or decision-maker's views, agreement, disagreement, or withdrawal of consent,
    - The date the client was notified and method of communication
    - What service, episode of care, delivery model, or provider involvement is ending, and what will continue,
    - A record of the referral suggestions provided,
    - Any discussions, client education, or resources provided to facilitate continuity of care or the client's management of their care post-discharge,
    - The client's current status, progress, remaining needs, and any outstanding actions, and
    - Consent for information sharing and any records transferred.

  Regulated members may also wish to consider providing notification of service termination in writing, for example with a formal service termination letter to clients. This could include the reason(s) for service termination and the effective date of service termination, a summary of the client's care, and recommendations for continuation of care, if appropriate.

Special Considerations

In general, regulated members must still adhere to ACSLPA's standards of practice and Code of Ethics when discontinuing services even in settings where they do make service termination decisions. If an administrative decision differs from the regulated member's professional recommendation, communicate and document the distinction and use available organizational channels to raise any concerns.

In addition, in some settings, for example educational settings, discontinuation of services may involve the type, frequency, intensity, location, delivery model, or provider of a service rather than the end of all supports. For example, direct service may change to consultation, classroom-based support, monitoring, or a planned pause. In these circumstances, the regulated member should inform clients what services or supports are ending, what will continue, who is responsible, and when the plan will be reviewed.

Educational Settings

Decisions about service termination in educational settings should be individualized and based on current information about communication or hearing needs; participation and access requirements; academic, social, emotional, and environmental demands; client priorities and goals; response to service; and the expected benefits and risks of continuing or changing service. Before ending a service, consider changes to goals, dosage, setting, delivery model, supports, accommodations, technology, and collaboration. Students can be involved in a developmentally appropriate manner as well as the caregiver or legally authorized decision-maker, teachers, and other team members as appropriate. Clarify each person's responsibility and identify decisions made by the school authority.

Transitions in an educational setting may be planned or unplanned, and may involve transferring to a different school, grade, or program, including post-secondary and community transitions. Transition planning should begin sufficiently early and address the student's strengths and needs, progress and remaining goals, effective strategies and accommodations, communication supports, augmentative and alternative communication or hearing technology, team roles, monitoring and review dates, reassessment or re-referral criteria, and communication with receiving schools and/or community providers with consent. When consultation or monitoring continues, specify the frequency and purpose of review, who will collect information, and what will trigger reassessment or a change in service. The plan should be reflected in the student's educational plan and the regulated member's clinical record, as applicable. Where school staff will continue implementing strategies or assigned clinical activities, roles should be clearly communicated and the regulated member must comply with professional requirements for clinical supervision and support personnel.

Challenging Clients

There may be times when the therapeutic relationship is strained due to conflict, disagreement or discord between the service provider and the client. However, a regulated member must not terminate services with a client because they find the client to be challenging or difficult to interact with. Challenging clients do not absolve the regulated member of their professional responsibilities in the therapeutic relationship. Regulated members in these types of situations are expected to make their best efforts to work together with clients to improve the therapeutic relationships and to establish parameters to facilitate continued care. Factors that a regulated member can consider before deciding to terminate include, but are not limited to: clarity of expectations, accessible communication, cultural humility, trauma-informed approaches, interpretation or other communication supports, reasonable accommodation, a safety or behaviour plan, consultation, and a change in service-delivery model. Strategies to consider for this include:

- **Self-reflection**: Challenging therapeutic relationships may hamper a regulated member's ability to act in the client's best interests. Self-reflection when faced with a challenging client may help regulated members to identify and explore if their own perspectives or challenging emotions are interfering with the therapeutic relationship. Regulated members should also reflect on any potential personal bias, their own stress levels, a possible communication mismatch, workplace policies and practices, and their own conduct.

- **Conflict resolution**: Regulated members are expected to make reasonable efforts aimed at resolving any conflicts with the client and do so respectfully and professionally. Conflict resolution should include an exploration of the reasons underlying any discord in the therapeutic relationship and should set clear and reasonable expectations for continued care. Offering clients the space to voice their perspectives and to be listened to without judgement or defensiveness may help defuse tensions and allow the regulated member to better understand the issues that may be impacting the client's care.

- **Seek assistance or advice**: Regulated members dealing with challenging therapeutic relationships may find it helpful to seek support, advice, or mentorship from a colleague or supervisor who may have a more neutral perspective and who may be able to provide suggestions for repair of the therapeutic relationship. In some circumstances, it may be necessary to seek more formal advice, for example from an organizational administrator or ethics board or seeking legal opinion.

In some circumstances, despite conflict resolution and other repair steps, it may not be feasible to continue the therapeutic relationship. In such circumstances, regulated members are reminded that service termination must only occur for valid and ethical reasons, and that the process of service termination must proceed in a manner that minimizes the risk of harm to the client.

Service Termination & Protected Grounds

Services must not be denied or terminated on a discriminatory basis or based on protected grounds under the *Alberta Human Rights Act*. Protected grounds under the Act include race, religious beliefs, colour, gender, age, sexual orientation, family status, etc. Disability is also a protected ground under the Act, and regulated members must not terminate services based on a client's disability, unless the client's care or treatment for their disability requires expertise or disability specific competence and resources that the regulated member cannot provide. In these circumstances, transferring care to another provider with the specialist knowledge and resources to provide services to the client would be considered a safer and more ethical approach. The regulated member should still communicate and document the rationale and facilitate the transition as appropriate. Advice should be sought where legal or regulatory obligations are unclear.

References & Resources

Alberta Human Rights Commission. (2026). *Goods and services*. https://albertahumanrights.ab.ca/issues-with-services/goods-and-services/

Betteridge, L. (2014). *Practice notes: Early endings – addressing the challenges of termination*. Ontario College of Social Workers and Social Service Workers. https://www.ocswssw.org/wp-content/uploads/PN-Early_Endings.pdf

Brightwell, J., & Cahill, R. F. (n.d.). *Terminating patient relationships*. The Doctors Company. https://www.thedoctors.com/articles/terminating-patient-relationships

Felton, E. M., & Polowy, C. I. (2019). *Termination: Ending the therapeutic relationship-avoiding abandonment*. NASW-CA. https://naswcanews.org/termination-ending-the-therapeutic-relationship-avoiding-abandonment/

Osman, A. (2020, May 29). *Parting ways – the right way: Terminating the client relationship*. Gowling WLG. https://gowlingwlg.com/en-ca/insights-resources/articles/2020/terminating-the-client-relationship

Smith, A. (2026, January 19). *Ending therapy right: A guide to ethical termination*. Ensora Health. https://ensorahealth.com/blog/ending-therapy-right-a-guide-to-ethical-termination/