

This is a SAMPLE only. Please <u>contact the ACSLPA office</u> to have a personalized supervision plan and evaluation form created for your specific situation.

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Under the *Health Professions Act* and the *Speech-Language Pathologists and Audiologists Profession Regulation,* the ACSLPA Registration Committee may require an applicant to undergo examinations, testing, assessment, or additional training/education for the purpose of determining substantial equivalency of their qualifications. Completion of a period of supervised practice constitutes one such type of assessment and is typically required following successful completion of a written examination. The purpose of the supervised practice is to ensure that new registrants have the knowledge and skills required to practice their profession, while supporting and assisting them in becoming successful, independent practitioners in Alberta.

The following outlines the supervised practice plan and agreement for registrants undergoing the entry process.

Section 1 – Contact Information		
Supervisee	Name:	
Supervisor(s)	Name: Name:	

Section 2 –Supervised Practice Overview			
Start Date:	End Date:		
#Work Hours Scheduled/Week			
Definitions	 Direct Supervision: The supervisor is physically present within the environment or virtually present via real-time videoconferencing or audioconferencing. The supervisor is able to observe the supervisee carry out activities and can provide immediate feedback, as necessary. Indirect Supervision: The supervisor is not physically or virtually present when an activity is being carried out by the supervisee. The supervisor monitors and evaluates the supervisee's performance of activities by reviewing audio/video recordings, written records, and/or through discussions with the supervisee, clients, family, team members, etc. 		
Conditions:	 The following conditions apply: a. A practice permit with the condition that the registrant must practice under supervision will be issued for the duration of the period of supervised practice (a minimum period of the equivalent of 12 weeks of full-time work or approximately 450 hours), as per the requirements stated in the ACSLPA Registration Handbook. b. The period of supervised practice will allow the registrant to obtain experience in a number of areas that would be reflective of practice for their profession and to demonstrate that they meet the minimums in each area of the Practice Competencies for Speech-Language Pathologists in Canada (see rating scale for evaluations). 		
	c. The supervised practice period will include both direct and indirect supervision, including respectively, observations of direct client contact		

	 (i.e., diagnostics/assessment/testing and intervention/treatment/counselling), as well as review of written reports, charting, etc. Time spent in other profession related activities (i.e., on-site research, writing, meetings, etc.) may also count towards the total hours required. The majority of the hours accrued during the placement should relate to client care, whether they are direct client contact hours or client related activities, and will vary dependent on the client population served, service delivery model utilized, etc. d. The amount of direct vs. indirect supervision required will be variable and dependent on client complexity, site, caseload, registrant skills, and experience, and should be adjusted to meet individualized placement needs. In order for the supervisor to evaluate the registrant's skills and abilities, it is essential that adequate direct
	supervision takes place during the early stages of the placement. As a guide, a minimum of 50% combined direct and indirect supervision during the first week of the placement would not be uncommon, decreasing to a low of 5-10% of supervision during progressive weeks of the placement, depending on the registrant. A minimum of 25% overall supervision is suggested during evaluation weeks (mid-placement and final week of placement). It is generally expected that the amount of supervision will decrease over the duration of the placement, however, this is at the discretion of the supervisor based on the needs of the registrant.
	e. As per section 11(1) of the SLP and Audiologist Profession Regulation, all applicants seeking registration as regulated members must be sufficiently proficient in the English language to be able to provide professional services in English. In addition to evaluating knowledge and skills to practice the profession of speech-language pathology/ audiology, the supervisor must also evaluate the registrant's ability to communicate effectively in English. Specifically, the registrant will be required to demonstrate that clients are able to understand and discriminate their verbal instructions. One of the ways this will be demonstrated is when the registrant provides verbal instructions, words, or phrases to a client, the client will be able to follow without difficulty. The registrant should also be able to comprehend questions and comments from clients which would be demonstrated by their ability to respond appropriately.
	f. Consistent with ACSLPA's Standard of Practice 4.3 on Documentation and Information Management, indicator d. i and ii, "the name and professional designation of the person documenting information regarding the client (i.e., the supervisee) and the name and professional designation of the person taking professional responsibility for the work (i.e., the supervisor) must be documented in the client file. Formal documentation such as reports and letters may be written by the supervisee. The supervising SLP or audiologist should review the report, write or stamp their name, designation and that they have reviewed the report, and sign the report (e.g., this document has been read and reviewed by J. Jones, R.SLP/R.Aud).
	g. Additional requirements for direct reading and related activities may be imposed in discussion with the registrant.
Reporting:	The supervisor will complete a mid-point and a final evaluation using the accompanying forms. The supervisor will provide a copy and discuss the results with the registrant who is undergoing the supervised practice period, prior to submitting the completed report form to ACSLPA.
	Based on the recommendation of the supervisor, ACSLPA may extend the period of supervised practice.
	The mid-point evaluation is due:
	The final evaluation is due:
Agreement:	As the supervisee and placement supervisor, we agree to the following:

 We will work together to facilitate in-depth reflection on issues affecting practice, developing both personal and professional expertise.
• We will develop a learning plan that includes activities that allow the supervisee to develop and demonstrate competence in each area of the <i>Practice Competencies for Speech-Language Pathologists in Canada</i> . However, the supervisor reserves the right to revise the learning plan as required, based on availability of activities and evolving learning needs.
We will both assume positive intentions and actively listen to one another.
 In addition to ongoing supervisory activities and interactions, we will meet every other week for a structured and reflective review of learning.
 We will protect the time and space for supervision by keeping to agreed appointments and time boundaries. During our meetings, we will respect privacy and avoid interruptions.
 We will work respectfully, mutually open to feedback about how we handle the supervision relationship
 As a supervisee, I agree to: Successfully complete ACSLPA's jurisprudence modules and exam prior to embarking upon supervised practice. This will allow for an understanding of relevant Alberta legislation, regulations, and regulatory requirements prior to the commencement of practice in Alberta.
• Prepare for each of the supervised activities (i.e., read relevant background materials, prepare notes, etc. as required).
Take responsibility for making effective use of the time.
 Contact my supervisor as soon as possible if I cannot attend due to illness or family emergency.
 Inform the supervisor of planned absences (i.e., doctor's appointment) as far in advance as possible.
 Be willing to learn, to develop my clinical competency, and be open to receiving support and feedback.
 Contact the ACSLPA Registrar (registrar@acslpa.ca) if I have concerns about my experience during the supervised practice period.
 As a supervisor, I agree to: Offer advice, support, and supportive challenge to enable the supervisee to reflect in depth on issues affecting practice.
 Ensure that transparency, fairness, objectivity, and impartiality toward the supervisee are maintained during the supervised practice period.
 Ensure that the supervisee has full access to all learning activities as agreed upon in the learning plan.
 Contact the supervisee as soon as possible if I cannot attend due to illness or family emergency.
 Inform the supervisee of planned absences (i.e., doctor's appointment) as far in advance as possible and make every possible arrangement to ensure placement activities are not compromised.
• Attempt to manage any issues/concerns that may compromise successful completion of the period of supervised practice. However, if the issues/concerns cannot be resolved, I will notify ACSLPA of the situation.
• Complete and submit the required evaluation reports as described in Section 2.
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Section 3 – Agreement to Supervised Practice Plan				
We agree to the supervised practice plan outlined in this document:				
Signature of Supervisee	Date			
Signature of Supervisor	Date			
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Supervised Practice SLP – Mid-Point Report to ACSLPA

Name of Registrant:	
Supervisor(s):	
Report Due Date:	

Period of Supervision:

Start o	date:
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End date:

Total Hours Worked by Registrant During This Reporting Period:

Hours Supervised:

Direct – diagnostic/assessment/testing hours	
Indirect – diagnostic/assessment/testing hours	

Direct – intervention/treatment/counselling hours

Indirect - intervention/treatment/counselling hours

Other (please specify)

TOTAL HOURS SUPERVISED THIS REPORTING PERIOD:

Rating Scale

Please rate each sub-competency under "Progress to Date" using the rating scale outlined below. Be as honest and objective in your ratings as possible. A rating of "meets requirements with general guidance" or "does not meet requirements" on one or more sub-competencies does not necessarily imply unsuccessful completion of the supervised practice period. ACSLPA staff will follow up with supervisors where there are questions regarding supervised practice.

Meets Requirements (MR)	Meets Requirements with General Guidance (MR/G)	Does not Meet Requirements (DNMR)	Not Observed (NO)
Is independent, competent, and	Requires general guidance	Requires specific guidance (e.g.,	No opportunity to observe the
efficient for the majority of tasks in familiar/routine situations;	(e.g., cueing) for some tasks and specific guidance (e.g.,	direction, modeling) and extra time for most tasks and general	supervisee participating in these tasks during the
sometimes requires extra time.	direction, modeling) for some	guidance (e.g., cueing) for	evaluation period.
sometimes requires extra time.	tasks: requires extra time for	some tasks.	evaluation period.
Seeks guidance intermittently for	many tasks.	some tasks.	
more complex situations.		Participates in tasks in	
	Participates in tasks across a mix	familiar/routine situations; is	
	of familiar/routine and	beginning to participate in	
	complex situations.	complex situations.	

Evaluation of Practice Competencies (SLP):

1. Role of Expert

Speech-language pathologists apply their knowledge of the development and disorders of communication, as well as feeding and swallowing, together with their assessment and intervention skills to provide professional, client-centred care to individuals across the lifespan. This role is central to the function of speech-language pathologists.

1.1 Knowledge Expert

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
a. Apply profession-specific knowledge to prevent,	 Apply knowledge of communication development and disorders to clinical practice. 		
identify and manage communication disorders,	ii. Apply knowledge of feeding and swallowing development and disorders to clinical practice.		
and feeding and swallowing disorders across the lifespan.	iii. Apply knowledge of prevention, assessment and intervention processes to clinical practice.		
b. Apply basic knowledge from relevant fields that apply to communication and feeding and swallowing across the lifespan.	 Apply basic knowledge from relevant fields (e.g., human physiology, psychology) to clinical practice. 	□ MR □ MR/G □ DNMR □ NO	
C. Apply knowledge of hearing, hearing loss and disorders of the auditory	 Apply knowledge of auditory function, hearing loss and disorders of the auditory system to the service provided to clients, where applicable. 		
system to the practice of speech-language pathology.	 Effectively administer standard hearing screening protocols to clients. 		
d. Use evidence and clinical reasoning to guide professional decisions.	 Critically appraise research and other available evidence to inform clinical practice. 		
	 ii. Integrate current leading evidence and clinical reasoning in clinical practice. 		

1.2 Clinical Expert			
Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
e. Identify individuals requiring speech- language pathology services.	 Collect and review information from relevant sources (e.g., referrals, reports, consultation) to determine an individual's need for a speech-language pathology assessment. 	□ MR □ MR/G □ DNMR □ NO	
	 Manage and promote screening programs (e.g., infant, school-aged, feeding and swallowing) to identify individuals requiring speech-language pathology services. 		
h. Plan, conduct and adjust an assessment.	 Collect and analyze pertinent information prior to the assessment, including case history, previous reports and the client's perspectives. 		
	ii. Organize the environment for an optimal interaction.		
	 iii. Plan the assessment, including the appropriate tools, strategies and resources that will address the unique needs of the client. 		
	 iv. Conduct a valid, accurate and reliable assessment, modifying as necessary. 		
	v. Actively listen to and observe all components of communication and/or feeding and swallowing.		
	vi. Provide a re-assessment as appropriate.		
i. Analyze and interpret	i. Analyze formal and informal assessment results.		
assessment results.	ii. Interpret the data accurately.		
	iii. Formulate conclusions regarding the client's diagnosis, abilities, resources and needs.		
j. Develop and share recommendations based on	 Develop evidence-informed recommendations, including potential referrals to other professionals, based on the assessment findings. 	□ MR □ MR/G □ DNMR □ NO	
assessment results.	 Discuss the assessment results, recommendations and implications with the client and other relevant individuals, as permitted by client. 	□ MR □ MR/G □ DNMR □ NO	

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
k. Develop a realistic, evidence-informed and measurable	 Establish and prioritize long-term intervention goals that reflect the client's strengths, needs, values, expectations and constraints. 	MR MR/G DNMR NO	
intervention plan.	 Develop specific, measurable, realistic, time-limited, short-term goals to reach the long-term intervention goals. 		
	 iii. Develop an evidence-informed intervention plan with direct and/or indirect service delivery, as appropriate, to target the short-term goals. 		
	 iv. Determine the resources and timelines required for the intervention. 		
	v. Develop outcome measures that align with the client's long-term goals.		
	vi. Identify and recommend alternative services for a client whose needs are beyond the professional limitations of the speech-language pathologist.		
j. Implement an	i. Organize the environment for an optimal interaction.		
intervention plan.	ii. Conduct the intervention, modifying as appropriate.		
	iii. Measure and record the client's response to intervention.		
	iv. Provide appropriate feedback and modelling to the client.		
	v. Use the appropriate modalities, materials and technologies in the provision of service.		
	vi. Provide the client and family or significant others with education, support, training and counselling, relating to communication, feeding or swallowing.	MR MR/G DNMR NO	
	vii. Refer to other health care or educational professionals as required.		

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
k. Monitor, adapt and/or redesign an	 Evaluate the outcomes of the intervention on an ongoing basis. 		
intervention plan	ii. Modify the intervention, as appropriate.		
based on the client's responses and needs.	iii. Consult with the client when considering a change in the course of action.		
	iv. Plan for discharge and/or transition to other services.		
	v. Discontinue the intervention, as appropriate.		
I. Provide clinical direction and oversight to support personnel	 Incorporate support personnel in clinical care to meet the clinical objectives, as appropriate to the clinical activity and jurisdiction. 		
	ii. Facilitate the integration of support personnel into the service model or employment context in a manner that is appropriate to their scope of practice.		
	iii. Determine the capabilities of support personnel.		
	 Provide tasks to support personnel based on their competencies. 	MR MR/G DNMR NO	
	v. Provide the necessary training of support personnel.		
	vi. Monitor and review the performance of support personnel.		

2. Role of Communicator

Speech-language pathologists facilitate the therapeutic relationship and exchanges that occur before, during and after each encounter. The competencies of this role are essential for establishing rapport and trust, sharing information, developing a mutual understanding and facilitating a shared plan of client-centred care.

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
a. Communicate respectfully and effectively using	 Use language appropriate to the client and context, taking into account age, culture, linguistic abilities, education level, cognitive abilities and emotional state. 		
appropriate modalities.	 Employ environmental and communication strategies to minimize barriers to successful communication, including the use of appropriate modes of communication (e.g., oral, non-verbal, written, electronic). 		
	iii. Mitigate language barriers by using translators/interpreters, as required.		
	iv. Recognize and respond to the client's verbal and non- verbal communication.		
	 v. Use strategies to facilitate a mutual understanding of shared information. 		
	vi. Participate respectfully in challenging conversations.	MR MR/G DNMR NO	
b. Maintain client documentation.	i. Accurately document services provided and their outcomes.		
	ii. Document informed consent.		
	iii. Complete and disseminate documentation in a timely manner.		
	iv. Comply with regulatory and legislative requirements related to documentation.		

3. Role of Collaborator

Speech-language pathologists seek out and develop opportunities to work effectively with other professionals, the client and their family, caregiver, significant others and/or the community to achieve optimal client-centred care as well as continuity of care when clients change providers and/or caregivers.

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
a. Establish and maintain effective collaborations	i. Collaborate with the client during all stages of care.		
to optimize client outcomes.	ii. Interact effectively with all team members.		
	iii. Communicate one's professional roles, responsibilities and scope of practice in collaborative interactions with the client, caregivers and relevant professionals.		
	 iv. Recognize and respect the roles and perspectives of other individuals. 		
	v. Manage misunderstandings, limitations and conflicts to enhance collaborative practice.		
	vi. Facilitate transfer of care within and across professions.		



4. Role of Advocate

Speech-language pathologists use their expertise to advance the health and well-being of a client by assisting them to navigate the healthcare or educational system and access support and resources in a timely manner.

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
a. Advocate for necessary services and resources that support an	 Identify and address the barriers that impede or prevent access to services and resources by the client, according to their goals. 		
individual client.	 ii. Encourage the client's societal inclusion and participation. 		
	 iii. Consult with the appropriate individual(s) and/or organization(s) to obtain available services and resources for the client. 		
b. Provide information and support to	i. Identify and provide information and tools to assist the client, or SDM to access services and supports.		
promote a client's self- advocacy.	 Enable the client to identify and address barriers that impede or prevent access to services and resources. 		

5. Role of Scholar

Speech-language pathologists demonstrate a lifelong commitment to professional learning and self-reflection, as well as to the creation, dissemination, application, and translation of current evidence-informed knowledge related to the profession of speech-language pathology.

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
a. Maintain currency of professional	 Identify one's own professional strengths and areas for development. 		
knowledge and performance in order to provide	ii. Determine one's own goals for competency development		
optimal care.	iii. Develop a plan and implement strategies for continued development in all seven competency roles		
	iv. Use appropriate resources to fulfill training needs (e.g., literature, continuing education, mentorship).		
b. Share professional knowledge with others.	 Identify the need for education related to speech- language pathology services in other professionals, the client and/or caregivers and the community. 		
	ii. Identify and adapt to the appropriate level of content for the audience.		
	iii. Provide information in an accessible manner to facilitate audience comprehension.		

6. Role of Manager

Speech-language pathologists are integral participants in decisions relating to the service provided to clients in the healthcare or educational system. The decision process may involve co-workers, resources, and organizational tasks.

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
a. Manage the clinical setting.	i. Balance competing demands to manage time, caseload, resources and priorities.		
	ii. Apply appropriate precautions, risk management and infection control measures, as required.		
	iii. Ensure equipment, materials, instruments, and devices are regularly calibrated, up to date and in good working condition, according to the required standards.		
	iv. Identify opportunities to improve practice models within workplace settings.		
	v. Participate in or lead quality improvement initiatives.		
	vi. Address problems in one's clinical setting that are related to provincial or national accessibility standards for providing services to the public.	MR MR/G DNMR NO	

7. Role of Professional

Speech-language pathologists are guided by a code of ethics, professional standards, regulatory requirements, and a commitment to clinical competence in the service they provide to their clients.

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
a. Maintain professional	i. Maintain confidentiality.		
demeanour in all clinical interactions	ii. Demonstrate professionalism in managing conflict.		
and settings.	 iii. Maintain personal and professional boundaries in relationships with clients, colleagues and other professionals. 		
	 iv. Recognize and respond appropriately to the inherent power differential in the client-clinician relationship. 		
	v. Demonstrate professionalism in all communications, including those involving electronic platforms.		
b. Practice ethically.	 Adhere to professional code of ethics, as defined within one's jurisdiction. 		
	 Recognize and use critical judgment to respond to ethical issues encountered in practice. 		
	 Recognize and use critical judgment to respond to actual or perceived conflicts of interest. 		
	 iv. Identify one's own biases, as they relate to the care of a client. 		
	v. Actively work to mitigate one's biases, as they relate to the care of a client.		
	vi. If unable to overcome significant biases, provide the client with alternative options.		
c. Adhere to professional standards and regulatory requirements.	 Stay informed of and comply with professional standards and regulatory and legislative requirements within one's jurisdiction. 		
	 Practice within the profession's scope of practice and one's personal capabilities. 		
	iii. Comply with regulatory body requirements to maintain competency, as defined within one's jurisdiction.	□ MR □ MR/G □ DNMR □ NO	

Summative Supervisor Comments (or	verall impressions	E
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Supervisee Comments (response to supervisor comments):

Supervisor

Supervisee

Name (print):	
Signature:	
Date:	

Name (print):	
Signature:	
Date:	



Supervised Practice SLP – Final Report to ACSLPA

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Name of Registrant:	
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Supervisor	(S):	

Report Due Date: _____

Period of Supervision:

Start date:

End date:

Total Hours Worked by Registrant During This Reporting Period:

Hours Supervised:

Direct – diagnostic/assessment/testing hours	I
Indirect – diagnostic/assessment/testing hours	
Direct – intervention/treatment/counselling hours	1
Indirect – intervention/treatment/counselling hours	1
Other (please specify)	1
TOTAL HOURS SUPERVISED THIS REPORTING PERIOD:	

Total Hours Worked by Registrant Across Mid Term and Final Reporting Periods (add together total number of hours from both reports):

Rating Scale

Please rate each sub-competency under "Progress to Date" using the rating scale outlined below. Be as honest and objective in your ratings as possible. A rating of "meets requirements with general guidance" or "does not meet requirements" on one or more sub-competencies does not necessarily imply unsuccessful completion of the supervised practice period. ACSLPA staff will follow up with supervisors where there are questions regarding supervised practice.

Meets Requirements (MR)	Meets Requirements with General Guidance (MR/G)	Does not Meet Requirements (DNMR)	Not Observed (NO)
Is independent, competent, and	Requires general guidance	Requires specific guidance (e.g.,	No opportunity to observe the
efficient for the majority of tasks in	(e.g., cueing) for some tasks and	direction, modeling) and extra	supervisee participating in
familiar/routine situations;	specific guidance (e.g., direction,	time for most tasks and general	these tasks during the
sometimes requires extra time.	modeling) for some tasks: requires extra time for	guidance (e.g., cueing) for some tasks.	evaluation period.
Seeks guidance intermittently for	many tasks.		
more complex situations.		Participates in tasks in	
	Participates in tasks across a mix	familiar/routine situations; is	
	of familiar/routine and	beginning to participate in	
	complex situations.	complex situations.	

Evaluation of Practice Competencies (SLP):

1. Role of Expert

Speech-language pathologists apply their knowledge of the development and disorders of communication, as well as feeding and swallowing, together with their assessment and intervention skills to provide professional, client-centred care to individuals across the lifespan. This role is central to the function of speech-language pathologists.

1.1 Knowledge Expert

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a. Apply profession-specific knowledge to prevent,	i. Apply knowledge of communication development and disorders to clinical practice.		
identify and manage communication	ii. Apply knowledge of feeding and swallowing development and disorders to clinical practice.		
disorders, and feeding and swallowing disorders across the lifespan.	iii. Apply knowledge of prevention, assessment, and intervention processes to clinical practice.		
b. Apply basic knowledge from relevant fields that apply to communication and feeding and swallowing across the lifespan.	 Apply basic knowledge from relevant fields (e.g., human physiology, psychology) to clinical practice. 	□ MR □ MR/G □ DNMR □ NO	
c. Apply knowledge of hearing, hearing loss and disorders of the auditory	 Apply knowledge of auditory function, hearing loss and disorders of the auditory system to the service provided to clients, where applicable. 	MR MR/G DNMR NO	
system to the practice of speech-language pathology.	ii. Effectively administer standard hearing screening protocols to clients.	MR MR/G DNMR NO	
d. Use evidence and clinical reasoning to guide	 Critically appraise research and other available evidence to inform clinical practice. 		
professional decisions.	 ii. Integrate current leading evidence and clinical reasoning in clinical practice. 		

1.2 Clinical Expert			
Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
e. Identify individuals requiring speech- language pathology services.	 Collect and review information from relevant sources (e.g., referrals, reports, consultation) to determine an individual's need for a speech-language pathology assessment. 	□ MR □ MR/G □ DNMR □ NO	
	 Manage and promote screening programs (e.g., infant, school-aged, feeding and swallowing) to identify individuals requiring speech-language pathology services. 	□ MR □ MR/G □ DNMR □ NO	
f. Plan, conduct and adjust an assessment.	 Collect and analyze pertinent information prior to the assessment, including case history, previous reports and the client's perspectives. 		
	ii. Organize the environment for an optimal interaction.		
	iii. Plan the assessment, including the appropriate tools, strategies and resources that will address the unique needs of the client.		
	 iv. Conduct a valid, accurate and reliable assessment, modifying as necessary. 		
	v. Actively listen to and observe all components of communication and/or feeding and swallowing.		
	vi. Provide a re-assessment as appropriate.		
g. Analyze and interpret	i. Analyze formal and informal assessment results.		
assessment results.	ii. Interpret the data accurately.		
	iii. Formulate conclusions regarding the client's diagnosis, abilities, resources and needs.		
h. Develop and share recommendations based on assessment results.	 Develop evidence-informed recommendations, including potential referrals to other professionals, based on the assessment findings. 	□ MR □ MR/G □ DNMR □ NO	
	 Discuss the assessment results, recommendations and implications with the client and other relevant individuals, as permitted by client. 	□ MR □ MR/G □ DNMR □ NO	

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
i. Develop a realistic, evidence-informed, and measurable	 Establish and prioritize long-term intervention goals that reflect the client's strengths, needs, values, expectations, and constraints. 	MR MR/G DNMR NO	
intervention plan.	 Develop specific, measurable, realistic, time-limited, short-term goals to reach the long-term intervention goals. 		
	 iii. Develop an evidence-informed intervention plan with direct and/or indirect service delivery, as appropriate, to target the short-term goals. 		
	 iv. Determine the resources and timelines required for the intervention. 		
	 Develop outcome measures that align with the client's long-term goals. 		
	 vi. Identify and recommend alternative services for a client whose needs are beyond the professional limitations of the speech-language pathologist. 		
j. Implement an	i. Organize the environment for an optimal interaction.		
intervention plan.	ii. Conduct the intervention, modifying as appropriate.		
	 iii. Measure and record the client's response to intervention. 		
	 iv. Provide appropriate feedback and modelling to the client. 		
	v. Use the appropriate modalities, materials, and technologies in the provision of service.		
	vi. Provide the client and family or significant others with education, support, training, and counselling, relating to communication, feeding or swallowing.		
	vii. Refer to other health care or educational professionals as required.		

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
k. Monitor, adapt and/or redesign an	 Evaluate the outcomes of the intervention on an ongoing basis. 		
intervention plan	ii. Modify the intervention, as appropriate.		
based on the client's responses and needs.	 iii. Consult with the client when considering a change in the course of action. 		
	iv. Plan for discharge and/or transition to other services.		
	v. Discontinue the intervention, as appropriate.		
I. Provide clinical direction and oversight to support personnel	 Incorporate support personnel in clinical care to meet the clinical objectives, as appropriate to the clinical activity and jurisdiction. 	□ MR □ MR/G □ DNMR □ NO	
	ii. Facilitate the integration of support personnel into the service model or employment context in a manner that is appropriate to their scope of practice.		
	iii. Determine the capabilities of support personnel.		
	 iv. Provide tasks to support personnel based on their competencies. 		
	v. Provide the necessary training of support personnel.		
	vi. Monitor and review the performance of support personnel.		

2. Role of Communicator

Speech-language pathologists facilitate the therapeutic relationship and exchanges that occur before, during and after each encounter. The competencies of this role are essential for establishing rapport and trust, sharing information, developing a mutual understanding, and facilitating a shared plan of client-centred care.

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
a. Communicate respectfully and effectively using	 Use language appropriate to the client and context, taking into account age, culture, linguistic abilities, education level, cognitive abilities and emotional state. 		
appropriate modalities.	 Employ environmental and communication strategies to minimize barriers to successful communication, including the use of appropriate modes of communication (e.g., oral, non-verbal, written, electronic). 		
	 iii. Mitigate language barriers by using translators/interpreters, as required. 		
	 iv. Recognize and respond to the client's verbal and non- verbal communication. 	MR MR/G DNMR NO	
	v. Use strategies to facilitate a mutual understanding of shared information.		
	vi. Participate respectfully in challenging conversations.		
b. Maintain client documentation.	 Accurately document services provided and their outcomes. 		
	ii. Document informed consent.	□ MR □ MR/G □ DNMR □ NO	
	 iii. Complete and disseminate documentation in a timely manner. 		
	 iv. Comply with regulatory and legislative requirements related to documentation. 		

3. Role of Collaborator

Speech-language pathologists seek out and develop opportunities to work effectively with other professionals, the client and their family, caregiver, significant others and/or the community to achieve optimal client-centred care as well as continuity of care when clients change providers and/or caregivers.

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
a. Establish and maintain effective collaborations	i. Collaborate with the client during all stages of care.		
to optimize client outcomes.	ii. Interact effectively with all team members.		
	iii. Communicate one's professional roles, responsibilities and scope of practice in collaborative interactions with the client, caregivers and relevant professionals.		
	 iv. Recognize and respect the roles and perspectives of other individuals. 		
	v. Manage misunderstandings, limitations and conflicts to enhance collaborative practice.		
	vi. Facilitate transfer of care within and across professions.		



4. Role of Advocate

Speech-language pathologists use their expertise to advance the health and well-being of a client by assisting them to navigate the healthcare or educational system and access support and resources in a timely manner.

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
a. Advocate for necessary services and resources that support an	 Identify and address the barriers that impede or prevent access to services and resources by the client, according to their goals. 		
individual client.	 ii. Encourage the client's societal inclusion and participation. 		
	 iii. Consult with the appropriate individual(s) and/or organization(s) to obtain available services and resources for the client. 		
b. Provide information and support to	 Identify and provide information and tools to assist the client, or SDM to access services and supports. 		
promote a client's self- advocacy.	 Enable the client to identify and address barriers that impede or prevent access to services and resources. 		

5. Role of Scholar

Speech-language pathologists demonstrate a lifelong commitment to professional learning and self-reflection, as well as to the creation, dissemination, application, and translation of current evidence-informed knowledge related to the profession of speech-language pathology.

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
a. Maintain currency of professional	 Identify one's own professional strengths and areas for development. 		
knowledge and performance in order to provide	ii. Determine one's own goals for competency development		
optimal care.	iii. Develop a plan and implement strategies for continued development in all seven competency roles		
	iv. Use appropriate resources to fulfill training needs (e.g., literature, continuing education, mentorship).		
b. Share professional knowledge with others.	 Identify the need for education related to speech- language pathology services in other professionals, the client and/or caregivers and the community. 		
	ii. Identify and adapt to the appropriate level of content for the audience.		
	iii. Provide information in an accessible manner to facilitate audience comprehension.		

6. Role of Manager

Speech-language pathologists are integral participants in decisions relating to the service provided to clients in the healthcare or educational system. The decision process may involve co-workers, resources and organizational tasks.

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
a. Manage the clinical setting.	 Balance competing demands to manage time, caseload, resources and priorities. 		
	ii. Apply appropriate precautions, risk management and infection control measures, as required.		
	iii. Ensure equipment, materials, instruments, and devices are regularly calibrated, up to date and in good working condition, according to the required standards.		
	iv. Identify opportunities to improve practice models within workplace settings.		
	v. Participate in or lead quality improvement initiatives.		
	vi. Address problems in one's clinical setting that are related to provincial or national accessibility standards for providing services to the public.	MR MR/G DNMR NO	

7. Role of Professional

Speech-language pathologists are guided by a code of ethics, professional standards, regulatory requirements, and a commitment to clinical competence in the service they provide to their clients.

Essential Competencies	Sub-Competencies	Progress to Date	Provide rationale to address any areas of weakness identified; provide examples & recommendations for change as required.
a. Maintain professional	i. Maintain confidentiality.		
demeanour in all clinical interactions	ii. Demonstrate professionalism in managing conflict.		
and settings.	 iii. Maintain personal and professional boundaries in relationships with clients, colleagues and other professionals. 		
	 iv. Recognize and respond appropriately to the inherent power differential in the client-clinician relationship 		
	v. Demonstrate professionalism in all communications, including those involving electronic platforms.		
b. Practice ethically.	 Adhere to professional code of ethics, as defined within one's jurisdiction. 		
	 Recognize and use critical judgment to respond to ethical issues encountered in practice. 		
	 Recognize and use critical judgment to respond to actual or perceived conflicts of interest. 		
	 iv. Identify one's own biases, as they relate to the care of a client. 		
	 Actively work to mitigate one's biases, as they relate to the care of a client. 		
	vi. If unable to overcome significant biases, provide the client with alternative options.		
c. Adhere to professional standards and regulatory	 Stay informed of and comply with professional standards and regulatory and legislative requirements within one's jurisdiction. 		
requirements.	 Practice within the profession's scope of practice and one's personal capabilities. 	□ MR □ MR/G □ DNMR □ NO	
	iii. Comply with regulatory body requirements to maintain competency, as defined within one's jurisdiction.		

Other Supervisor Comments (overall impressions):

Supervisee Comments (response to supervisor comments):

Supervisor

Please check one:

- I, the undersigned, verify that ______ has successfully completed the supervised practice entry process requirements and is, in my opinion, competent to practice.
- □ I, the undersigned, verify that ______ has not successfully completed the supervised practice entry process requirements.

Name (print):	
Signature:	
Date:	

Supervisee

Name (print):	
Signature:	
Date:	

Approval by ACSLPA to remove supervision condition:

ACSLPA Staff

Date