

One of the essential tasks of a professional regulator is making regulatory decisions. Professional regulatory colleges make decisions about minimum requirements for registration, standards of practice for the professions, complaints received about regulated members, and many other regulatory issues. In this ACSLPA Insights, we would like to illustrate how ACSLPA makes decisions by providing insight into a recent decision.

## Decision to be made:

Should ACSLPA continue pursuing an advanced authorization (AA) for speech-language pathologists (SLPs) to independently order ionizing radiation for the purpose of videofluoroscopic swallowing studies (VFSS)?



## Historical Context

ACSLPA began pursuing this AA with the Alberta government in 2015. Support for the proposal was received from the College of Physicians and Surgeons of Alberta (CPSA) and an external stakeholder consultation was conducted by Alberta Health in 2016. Soon after, due to the implementation of significant amendments to the Health Professions Act (HPA), a moratorium was placed on amendments to individual health profession regulations. As a result, the approval process for the AA was put on hold. ACSLPA re-approached the government about the AA in 2023 after the broad amendments to the HPA were implemented.

The intention of this potential AA was to increase timely access to VFSS for Albertans.

## Consultation and Data Collection

For regulators to make good decisions they need to gather information about the environments in which their regulated members are practicing, and where the public is receiving services.

When considering this AA decision, the College started by soliciting regulated members to form an ad-hoc advanced authorization committee. Regulated members with current or recent dysphagia experience in rural, urban, acute care, and community settings volunteered to be part of this committee, and they generously shared their insights and feedback with College staff working on preparing for the AA decision.

ACSLPA's Registrar consulted with the Ministry of Health to gather information about what would be required to obtain Ministerial Health approval for this AA. Alberta Health Services was also consulted as the organization that currently provides VFSS in Alberta.

The College surveyed regulated members to find out if they perceived this potential AA to be beneficial for the Alberta public, what the benefits would be, how many SLPs working in dysphagia would be interested in pursuing the AA, and any barriers to SLPs obtaining the AA.

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Finally, data was gathered about the feasibility and cost associated with the learning modules and exam required for SLPs to obtain the AA.

Staff sought to understand the current situation for Albertans requiring a VFSS and how this potential AA would impact the Alberta public.

## **Analysis**

After gathering information to aid the decision-making process, staff analyzed the data. ACSLPA staff often use a Right Touch Regulatory Perspective when analyzing data and considering a decision. This approach asks the College to consider many issues when making a decision. One important consideration for this decision was whether a regulatory solution, in this case an AA, is required to improve access to VFSS for Albertans.

Data from consultation revealed that although there was strong agreement that the AA would be of benefit to the Alberta public, significant barriers were identified regarding SLP pursuit of the AA. Cost for obtaining and maintaining the AA was identified as a significant barrier, as well as the time required to complete the necessary steps to obtain the AA.

Additionally, perceived system barriers were noted, including limited managerial, employer and physician support for both use of the AA and for SLPs taking the steps necessary to obtain the AA. Other identified barriers included some SLPs not having access to the health information necessary to make informed orders for VFSS, and potential site-specific barriers in some areas of the province. Interestingly, ConnectCare was identified as both a potential barrier to AA implementation and a potential technological option for improving VFSS access for Albertans.

Finally, the current health care environment where many patients do not have a primary health care provider, coupled with SLPs not having the ability to refer directly for medical consultation by specialists, was also identified as a barrier. When a health care professional orders a procedure, they become responsible for ensuring appropriate follow-up. In some cases, a referral for medical consultation by a specific specialty may be required following a VFSS. Given that SLPs cannot currently make such referrals themselves, it could be challenging to find another health care professional to make these referrals for clients/patients who do not have a primary health care provider.

## **Decision**

An important step in the decision-making process is determining who has the authority to make the decision. In this case, ACSLPA Council was identified as the decision-maker. Members of ACSLPA's Council are the governors of the College and responsible for setting ACSLPA's direction.

To ensure Council had the information it needed to make a well-informed decision, Council's decision-making process started with a thorough written and verbal briefing from ACSLPA's Registrar. After engaging in a discussion of the advantages and disadvantages of the AA for the Alberta public, Council decided that ACSLPA will discontinue its pursuit of an AA for SLPs to order ionizing radiation for the purposes of VFSS.

While this potential AA might increase timely access to VFSS for Albertans, the costs and other system limitations identified during our consultations suggested it may not be the best solution at this time.

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