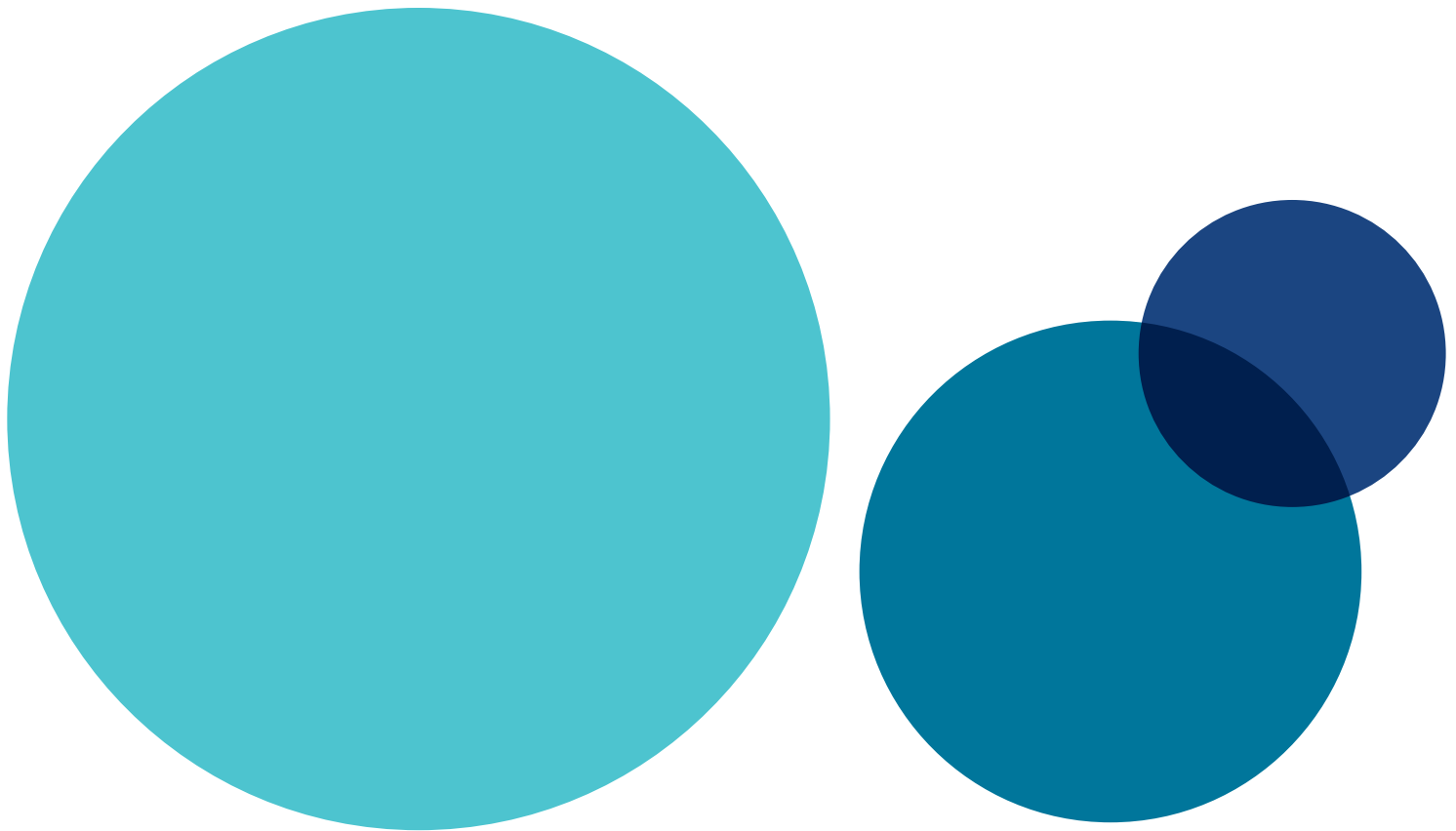


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Clinical Practice Guideline

Communication Health Assistants:
Verifying Education, Training, & Competence



College of Speech and
Hearing Health Professionals
of British Columbia

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1.0 Purpose

This clinical practice guideline is to assist registrants in verifying and documenting Communication Health Assistants' (CHA) competence in clinical activities that are delegated to them by a CSHBC registrant. It is intended to be a companion to the standards of practice for Communication Health Assistants including CHA Delegation and Assignment (SOP-PRAC-04) and CHA Education, Training and Competence (SOP-PRAC-05).

NOTE: For the purposes of this document, registrant refers to full or temporary registrants throughout

2.0 Background

Part 12 of the CSHBC Bylaws outlines what may and must not be delegated to CHAs providing clinical services in Audiology, Hearing Instrument Dispensing and Speech-Language Pathology.

CHAs have a wide variety of education, training, and competence, ranging from on-the-job training to formal degree programs. It is incumbent on registrants to understand the level of education and training each CHA has for each role they are being delegated clinical work in.

In verifying competence, there is a 2-way verification required. The supervising registrant must be satisfied that the CHA is competent to do what is being asked and the CHA must also agree. Should either party not agree, there must be additional training or education provided in the form of a learning plan. If competency has been previously verified by another registrant, it is incumbent on the new supervising registrant to ensure that the CHAs education and skills are current and applicable to the work being delegated.

REGISTRANT RESPONSIBILITY

The CSHBC standard on Professional Accountability and Responsibility (SOP-PROF-02) states that registrants are ultimately responsible for the care provided by those under their supervision including: Communication Health Assistants, interns, students, trainees, and conditional registrants. In addition, Section 139 of the CSHBC bylaws states that, when a registrant delegates an aspect of practice to a non-registrant, the registrant remains ultimately responsible for the quality of care provided by the non-registrant (i.e., CHA).

It is the registrant's responsibility to ensure that clients have given informed, express consent for clinical care. This includes consent to be seen by a CHA. Clients must know that their consent for CHA care can be revoked at any time. Further information is available in the standard Client Consent (SOP-PRAC-06).

3.0 Definitions

Assignment means a process whereby a registrant directs a Communication Health Assistant (CHA) to perform health care service tasks to an individual or group of individuals that have low or negligible risk and do not involve any clinical decision making.

Assist means the CHA helps a registrant with a client, in the presence of the registrant, (in person or virtually). This means that the CHA is under constant supervision in these instances.

Assessment means formal and informal measures to systematically evaluate the client's condition, and to arrive at one or all profession-specific diagnoses, prognosis, and treatment plan/management strategies.

Communication Health Assistant (CHA) means any non-registrant employed by a registrant or a registrant's employer to support the registrant's clinical practice of audiology, hearing instrument dispensing, or speech-language pathology.

Delegation means the act of a registrant requiring an unregulated CHA to perform an allowable aspect of speech and hearing health services, to specific clients, in any practice setting. This must be in accordance with the CSHBC bylaws (Part 12) and established standards of practice.

Education program means a formal learning program provided by an educational institution, which results in completion of a certificate, diploma, or degree. Education may also include completion of courses, webinars, or workshops.

4.0 Previous Education and/or Training

The standard on CHA Education, Training and Competence (SOP-PRAC-05) details the various levels of education and training that CHAs may have for various roles. There may be a difference between when the education or training was taken and the current level of proficiency that the CHA has.

Formal education is considered current if it was attained within the last 7 years. It is considered current if the CHA has been practicing their skills within the previous 3 years. Continuing education may also be warranted over 3-year intervals. A review of current skills and abilities is warranted if there is no evidence of previous training, current practice, or ongoing continuing education or if there are any competency concerns by either the supervisor or the CHA.

5.0 General Provisions for Clinical Services Provided by Communication Health Assistants

Communication Health Assistants must understand the parameters of the following topics as they relate to provision of clinical services. There may be employer provided training on these topics that are context-specific to the practice setting. It is incumbent on registrants to know the standards of practice and associated documents of CSHBC. CHA general topics for education include:

- Supervision
- Infection prevention and control
- Safety Measures and Emergency protocols
- Documentation and record management
- Client confidentiality
- Communication with clients/families and inter-professional practice
- Consent for clinical services, including services provided by CHAs, and consent to share information.

6.0 CHA Role, Responsibilities and Use of Titles in Clinical Practice

Registrants must ensure that CHAs understand their role and responsibilities. The title used by the CHA may be employer driven for the work setting. For simplicity, all assistants, screeners, and technicians are referred to as Communication Health Assistants (CHAs). Job descriptions for CHAs must not conflict with the CSHBC bylaws and standards. Registrants must ensure that the title used by a CHA does not create confusion for clients or misrepresent the role of the CHA. (Policy-QA-10 Communication Health Assistants: Titles and Credentials). CHAs may hold multiple roles within their work setting and the competencies for each role may differ and must be verified. The overarching roles of: Early Hearing Program Screeners, Hearing Screeners, Speech, Language & Swallowing screeners, Industrial Audiometric Technicians (IAT), Audiometric Technician, Speech Assistant and Communicative Disorders Assistant are detailed in Appendix B: Verification of CHA Education, Training & Competence (Level of Independence, Learning & Supervision Plans). It is incumbent on registrants to ensure what role their staff are performing services in. For example, office staff who perform clinical duties such as screening are considered CHAs during the performance of the clinical activities.

7.0 Assignment of Tasks to CHAs

Tasks that may be assigned are of low or negligible risk and do not require any clinical interpretation. The registrant should provide the CHA with a basic explanation of the task and confirm that the CHA knows what you want them to do. There is no clinical judgment involved in assigned tasks and they does not directly impact the client's care. Examples of assigned tasks may include preparing therapy materials, copying client materials, opening a client file, scheduling appointments, cleaning a hearing instrument, or collecting client information. There is no client-specific clinical outcome involved in assigned tasks.

8.0 Delegated Clinical Activities to CHAs

The registrant must decide whether a clinical activity can be delegated to a CHA as per the CSHBC bylaws and the standard of practice entitled Communication Health Assistant Delegation& Assignment (SOP-PRAC-04). If the activity can be delegated, there must be a registrant decision that the delegation is appropriate for EACH, individual client. Client consent for CHA provision of services is also required. If these provisions have been met, then the next step is verifying that the CHA is competent to do what is being asked of them. Consent to be seen by a CHA must be documented and the client must be aware that this can be revoked at any time (SOP-PRAC-06).

9.0 Competence Verification Records, Learning & Supervision Plans

Appendix A outlines a decision tree entitled: Verification of Communication Health Assistant Competence and Credentials, to assist supervising registrants in their obligation to establish and verify CHA competence including previous education, training, learning needs/plans and supervision plans.

9.1 VERIFICATION RECORDS

Registrants must have or have access to any documentation verifying a CHAs education and training, including on the job training. If the CHA completed the training in a different setting, it is important that the registrant verify successful completion of the course or training. Registrants should advise their CHAs to maintain copies of their training and continuing education records for other registrants and future use. The range of skills and competencies to be verified is dependent on which role(s) are required to maintain verification records, learning and supervision plans. Registrants should provide CHAs with copies of any verification documentation, learning or supervision plans.

9.2 LEARNING PLANS

A learning plan must include any remediation strategies for identified learning needs. Communication with the CHA is vitally important throughout the process and the learning plan should detail what education and training including coursework is needed and by what expected date. The learning plan should include aspects regarding general skills (e.g., infection control), relevant clinical populations and age group(s) and clinically related skills and competencies. The learning plan should identify learning needs if the education and training is outdated, and the CHA has not used those skills within the prescribed amount of time. The level of detail in a learning plan is commensurate with the CHAs background education, experience, role expectations and client need.

9.3. SUPERVISION PLANS

A supervision plan accompanies the learning plan and may be incorporated into the same document. The registrant is responsible for deciding what level of supervision is required for each competency. This will vary depending on the CHA's level of independence and whether a skill is new, already acquired or in need of refreshing. The minimum level of supervision for all delegated activities where the CHA has achieved competency is general supervision. Registrants are advised to review the Supervision standard of practice (SOP- PRAC-07).

Appendix B provides a sample verification matrix that incorporates learning plans and supervision requirements for various CHA roles. Registrants may develop their own plans or adapt Appendix B to their particular needs. Objectives may be extended into sub-objectives when warranted. For example, a CHA who has previously been trained in ear impressions may not require extensive further training whereas a CHA who is learning this as a new skill may have multiple sub-objectives and more rigorous supervision while the skill is being learned.

Appendix A: Verification of Communication Health Assistant Competencies and Credentials: Decision Tree

1. Have you determined which role category(ies) the CHA is in?

YES

Proceed to #2

NO

Determine the role(s) before proceeding

2. Have you verified the CHA's education and training credentials, even if the original training was completed by another registrant?

YES

This may include requiring proof of attendance or completion. Proceed to #3

NO

If no proof exists, the registrant must verify the skills required.

3. Are you familiar with the skills and competencies required by the CHA in your setting?

YES

Proceed to #4.

NO

Review skills and competencies for the role shown in Sections 5 and 8 before proceeding

4. Did the CHA completed the education and training in the past 7 years OR has practiced the skills within the past 3 years?

YES

Proceed to #5.

NO

Determine which skills require updated training, courses, or continuing education before proceeding

5. Does the CHA have the necessary background in the required areas of infection prevention and control, safety measures and emergency processes, documentation and record keeping, client confidentiality, client/family communication and consent (for clinical services and sharing information)?

YES

Proceed to #6.

NO

these skills must be added to a learning plan before proceeding

6. Does the CHA have the necessary knowledge for your client populations (including the age group you serve)?

YES

Proceed to #7.

NO

Determine what learning is required before proceeding to a final learning plan in #7.

7. Do you have a documented learning plan for a. background skills, b. clinical populations and age group(s) and c. clinically related skills and competencies?

YES

Proceed to #8.

NO

Complete the learning plan components before proceeding

8. Do you have a documented, supervision plan that applies the appropriate levels of supervision based on the CHA's learning needs outlined in your learning plan?

YES

Proceed to #9.

NO

Complete the supervision plan before proceeding

9. Does your plan include periodic reviews of CHA skills and abilities, including a review of client outcomes?

YES

Proceed to #9.

NO

Complete the supervision plan before proceeding

Appendix B: Sample Verification Matrix: Learning & Supervision Plans

ROLE: EARLY HEARING PROGRAM SCREENER

CHA Information					
Name			Role/Title		
Email or Phone			Training/employment setting		
Hospital	Outpatient	Agency	Private Clinic	School	Other

Pre-requisite EDUCATION/TRAINING

The following PRE-REQUISITES are required prior for Communication Health Assistants to perform the role of Early Hearing Program Screener (EHP Screener)

Pre-requisite	Pre-Requisite Requirements	Date Completed	Date Due	Initials
1.	Initial provincial early hearing program training 3 days hands on training			
2.	EHP competency review every 2 years after initial training			

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 1	To understand the BC EHP scope, background, program principles and goals; family centered care; privacy & confidentiality			
Learning Needs				
Objective 2	To understand and be able to complete the BCEHP protocols & procedures			
Learning Needs				
Objective 3	To understand the screening team & Environment & Infection Control			
Learning Needs				
Objective 4	To understand the auditory system			
Learning Needs				
Objective 5	To perform the screening procedures of the EHP			
Learning Needs				

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 6	To understand and perform daily procedures based on screening outcomes			
Learning Needs				
Objective 7	To understand the EHP forms and documentation			
Learning Needs				
Objective 8	To understand the pertinent CSHBC standards such as supervision and consent			
Learning Needs				

Note: for comprehensive learning requirements please refer to the BC EHP manual

Comments

ROLE: HEARING SCREENERS (INDIVIDUAL AND MASS)

CHA Information					
Name		Role/Title			
Email or Phone		Training/employment setting			
Hospital	Outpatient	Agency	Private Clinic	School	Other

Pre-requisite EDUCATION/TRAINING

The following PRE-REQUISITES are required prior for Communication Health Assistants to perform the role of Hearing Screener (Individual or Mass screening)

Pre-requisite	Pre-Requisite Requirements	Date Completed	Date Due	Initials
1.	None – some knowledge for competency expectations may have already been acquired in another CHA role such as Audiometric Technician			

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 1	To understand the screening program parameters			
Learning Needs				
Objective 2	To understand the auditory system			
Learning Needs				

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 3	To be able to apply applicable infection control procedures			
Learning Needs				
Objective 4	To understand the applicable CSHBC standards such as supervision, confidentiality, and consent			
Learning Needs				
Objective 5	Demonstrate ability to use the appropriate equipment			
Learning Needs				
Objective 6	To be able to perform screening pure tone audiometry, tympanometry and otoscopy as required by the screening program			
Learning Needs				
Objective 7	To understand and perform the applicable documentation requirements			
Learning Needs				
Objective 8	To have knowledge of the population being served			
Learning Needs				
Objective 9	Ability to instruct and support the client as needed			
Learning Needs				

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 10	Ability to share results without interpretation			
Learning Needs				
Objective 11	Understands and can apply applicable safety measures and emergency procedures			
Learning Needs				
Objective 12				
Learning Needs				
Extensions	By mutual agreement between the supervisor and CHA, any or all objectives may be extended beyond minimum requirements			
Objectives extended?		YES	NO	
If yes, specify objective(s) by number				

Comments

CHA Information					
Name			Role/Title		
Email or Phone			Training/employment setting		
Hospital	Outpatient	Agency	Private Clinic	School	Other

Pre-requisite EDUCATION/TRAINING

The following PRE-REQUISITES are required prior for Communication Health Assistants to perform the role of Speech, Language & Swallowing Screener

Pre-requisite	Pre-Requisite Requirements	Date Completed	Date Due	Initials
1.	None, however, some CHAs may have many of the required knowledge for competency expectations because of their education and training			

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 1	To understand the screening program parameters			
Learning Needs				
Objective 2	To understand the communication and/or swallowing system			
Learning Needs				

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 3	To be able to apply applicable infection control procedures			
Learning Needs				
Objective 4	To be able to apply applicable infection control procedures			
Learning Needs				
Objective 5	Demonstrate ability to use the appropriate equipment, tools, or protocols			
Learning Needs				
Objective 6	To be able to prepare for and perform the required screenings			
Learning Needs				
Objective 7	To understand and perform the applicable documentation requirements			
Learning Needs				
Objective 8	To have knowledge of the population being served			
Learning Needs				
Objective 9	Ability to support and instruct the client as required			
Learning Needs				

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 10	Ability to share results without interpretation			
Learning Needs				
Objective 11	Understands and can apply applicable safety measures and emergency procedures			
Learning Needs				
Objective 12				
Learning Needs				
Extensions	By mutual agreement between the supervisor and CHA, any or all objectives may be extended beyond minimum requirements			
Objectives extended?		YES	NO	
If yes, specify objective(s) by number				

Comments

CHA Information					
Name			Role/Title		
Email or Phone			Training/employment setting		
Hospital	Outpatient	Agency	Private Clinic	School	Other

Pre-requisite EDUCATION/TRAINING

The following PRE-REQUISITES are required prior for Communication Health Assistants to perform the authorized WorkSafe BC role of Industrial Audiometric Technician

Pre-requisite	Pre-Requisite Requirements	Date Completed	Date Due	Initials
1.	Successful completion of the 4-day initial BCIT training for certification			
2.	In this WorkSafe Role an IAT does not have to be under the supervision of a registrant if they are only performing this role and are qualified to do so. If they are in the employ of a registrant, the registrant should verify the required training and competencies.			
3.	1-day refresher every two years following the initial training			

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 1	Conduct pure tone audiometry; conduct industrial hearing tests		None	
Learning Needs				
Objective 2	Advise workers on industrial hearing loss			
Learning Needs				
Objective 3	Verify the need for hearing conversation programs			
Learning Needs				
Objective 4	Counsel workers regarding their hearing test results			
Learning Needs				
Objective 5	Advise workers regarding hearing protection			
Learning Needs				
Objective 6	Maintain hearing conservation program			
Learning Needs				
Objective 7				
Learning Needs				

Extensions	By mutual agreement between the supervisor and CHA, any or all objectives may be extended beyond minimum requirements			
Objectives extended?	YES	NO		
If yes, specify objective(s) by number				

Comments

CHA Information					
Name		Role/Title			
Email or Phone		Training/employment setting			
Hospital	Outpatient	Agency	Private Clinic	School	Other

Pre-requisite EDUCATION/TRAINING

The following PRE-REQUISITES are required prior for Communication Health Assistants to perform the role of Audiometric Technician

Pre-requisite	Pre-Requisite Requirements	Date Completed	Date Due	Initials
1.	None specified: however, there may be an employer requirement for successful completion of an applicable program at the diploma or degree level. Those programs include clinical practicum hours in hearing, which may cover many or all the competency expectations. In those instances, registrants should review the recency of skills pertinent to the hearing competency expectations			

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 1	Understands the needs of the relevant population and any specific clinical disorders			
Learning Needs				
Objective 2	Applies appropriate infection control procedures			
Learning Needs				
Objective 3	Understands the requirements for consent (for services and sharing information), confidentiality and supervision			
Learning Needs				
Objective 4	Implements applicable safety measures and emergency procedures if needed			
Learning Needs				
Objective 5	Understands their role and title as a CHA			
Learning Needs				
Objective 6	Completes required documentation for the practice setting and context			
Learning Needs				
Objective 7	Understands each client's attitudes, behaviours, and cultural beliefs			
Learning Needs				

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 8	Understands client/family centered care			
Learning Needs				
Objective 9	Communicates effectively verbally and in writing			
Learning Needs				
Objective 10	Understands basic anatomy and physiology of the human auditory system			
Learning Needs				
Objective 11	Understands normal speech, language, and hearing development as well as acquired and congenital disorders			
Learning Needs				
Objective 12	Understands the impact of hearing loss for the applicable age ranges of clients			
Learning Needs				
Objective 13	Understands hearing loss and communication strategies			
Learning Needs				
Objective 14	Understands the use of and calibration requirements of equipment			
Learning Needs				

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 15	Implements appropriate techniques to assist in an audiological assessment with the registrant.			
Learning Needs				
Objective 16	Ability to administer any testing that is within allowable delegation limits			
Learning Needs				
Objective 17	Ability to use insert earphones correctly and safely			
Learning Needs				
Objective 18	Ability to perform otoscopy safely and effectively			
Learning Needs				
Objective 19	Ability to perform ear impressions (where it is allowed by delegation) A comprehensive training program/course may be required			
Learning Needs				
Objective 20				
Learning Needs				

Extensions	By mutual agreement between the supervisor and CHA, any or all objectives may be extended beyond minimum requirements			
Objectives extended?	YES	NO		
If yes, specify objective(s) by number				

Comments

Pre-requisite EDUCATION/TRAINING

The following PRE-REQUISITES are required prior for Communication Health Assistants to perform the role of Speech Assistant or Communicative Disorders Assistant (or similar title)

Pre-requisite	Pre-Requisite Requirements	Date Completed	Date Due	Initials
1.	None specified: however, there may be an employer requirement to have successfully completed an applicable program at the diploma or degree level. Those programs include clinical practicum hours which may cover many or all the competency expectations. In those instances, registrants should review the specific program and practicum hours attained, the recency of skills pertinent to the SLP competency expectations			

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 1	Understands the CHA role and use of title			
Learning Needs				
Objective 2	Understands the needs of the population(s) being served			
Learning Needs				
Objective 3	Understands specific clinical disorders as required			
Learning Needs				

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 4	Understands the anatomy and physiology of the communication and swallowing systems			
Learning Needs				
Objective 5	Implements appropriate infection control practices			
Learning Needs				
Objective 6	Understands the standards for consent (for clinical services and sharing information), confidentiality and supervision			
Learning Needs				
Objective 7	Ability to implement appropriate safety measures and emergency procedures if required			
Learning Needs				
Objective 8	Completes appropriate documentation and records management for the practice setting			
Learning Needs				
Objective 9	Understands client/family centered care			
Learning Needs				
Objective 10	Understands each client's attitudes, behaviours and cultural beliefs			
Learning Needs				

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 11	Understands the applicable aspects of normal speech, language, voice, and hearing			
Learning Needs				
Objective 12	Understands the impact on communication of specific acquired and congenital disorders as appropriate for the practice setting			
Learning Needs				
Objective 13	Ability to assist the SLP in communication and swallowing assessments as required			
Learning Needs				
Objective 14	Ability to implement treatment plan activities as directed by the SLP for individuals and groups			
Learning Needs				
Objective 15	Ability to record client outcomes and understand what outcomes need to be reported to the registrant			
Learning Needs				
Objective 16	Understands what activities may be performed virtually			
Learning Needs				
Objective 17	Assists with client communication, including when there are language differences, and the CHA is competent in the client's language			
Learning Needs				

Objectives	Competency Expectations	Current competency level	Level of Supervision	Initials
Objective 18	Communicates effectively verbally and in writing			
Learning Needs				
Objective 19	Participates in client conferences and team meetings with the registrant as required			
Learning Needs				
Objective 20	Prepares treatment materials under direction of the registrant			
Learning Needs				
Objective 21	Programs and creates AAC resources under supervision of the registrant			
Learning Needs				
Objective 22				
Learning Needs				
Extensions	By mutual agreement between the supervisor and CHA, any or all objectives may be extended beyond minimum requirements			
Objectives extended?		YES	NO	
If yes, specify objective(s) by number				

Comments

CSHBC Related Documents

Client Consent SOP-PRAC-06

CHA Delegation and Assignment SOP-PRAC-04

CHA Education, Training and Competence SOP-PRAC-05

Documentation and Records Management SOP-PRAC-

01Documentation and Records Management CPG-04

Professional Accountability and Responsibility SOP-PROF-05

Supervision SOP-PRAC-07