

## Notice to the Professions

### Frequently asked questions Inter-professional collaborative practice, and providing feeding and swallowing management care to clients

October 25, 2023

Different health professions have their own distinct educational requirements, approaches, competencies, and scopes of practice. While each health professional may only practice within their own profession, CSHBC acknowledges that inter-professional collaborative practice is vital to quality client healthcare and is an expectation of all CSHBC registrants, including Registered Speech-Language Pathologists (RSLPs) who may frequently work with inter-professional teams.

As outlined in the CSHBC standard of practice, *Inter-Professional Collaborative Practice*, there are shared or common competencies that overlap across more than one health profession. Underlying these shared or common competencies, are individual professional competencies that are based on the health professional's unique body of knowledge, skills, attitudes, and judgments.

The individual health professional's contribution to the overall care of the client will vary in scope and importance depending on the professional's role with a given client population and the needs of each client. And while there can be shared or common competencies that overlap across more than one health profession, this overlap does not mean interchangeability. Each health professional's application of their unique scope of practice in combination with common competencies across health professionals must be considered when providing effective inter-professional collaborative practice.

Inter-professional collaborative practice does not include teaching, training, or clinically supervising<sup>1</sup> members of other health professions on how they should deliver client care as part of their own regulated practices. RSLPs may, however, communicate or share information on how they engage in professional practice as RSLPs, and may present at conferences and workshops on the factual aspects of managing feeding and swallowing disorders.

Read the following frequently asked questions to learn more about inter-professional collaborative practice:

## **1. Why were these FAQs needed?**

The College received a number of enquiries from RSLPs as to whether their scope of practice and competence included training or supervising registrants of other health professions in accordance with their own standards. RSLPs raised concerns that they are not competent to practice other health professions, and therefore could not train or supervise other health professions with respect to their practice of overlapping activities. On August 29, 2023, the College provided a Notice to the Professions to clarify that RSLPs are not authorized to teach, train, or supervise members of other regulated professions on how to manage feeding and swallowing disorders as part of their clinical practices. These FAQs address further inquiries from registrants.

## **2. What does it mean to communicate or share information about an RSLP's practice in an inter-professional collaborative practice?**

RSLPs have a professional responsibility to engage in inter-professional collaborative practice, where appropriate, in their workplace setting. RSLPs communicate and share information about their knowledge and practice with other health professionals, to ensure there is inter-professional collaboration in support of safe and successful client care. This information sharing occurs, for example, when RSLPs provide their findings and recommendations to the client's team as part of the assessment and intervention process in dysphagia management.

## **3. What is the difference between an RSLP communicating or sharing information with another regulated health professional about clinical activities that potentially may also be performed by, or overlap with, other regulated health professionals, versus an RSLP teaching, training, or clinically supervising another health professional to conduct these potentially shared or overlapping clinical activities?**

RSLPs sharing information about an overlapping clinical activity with another health professional is explanatory, not supervisory in nature. In other words, RSLPs are not monitoring, evaluating, or providing corrective feedback to another health professional about how to practice as an RSLP, or how to practice another health profession.

Teaching, training, or supervising another health professional to conduct an overlapping clinical activity is considered supervisory in nature because an RSLP is directing or training another health professional how to practice as an RSLP, or how to practice their own health profession.

Under the [Speech and Hearing Health Professionals Regulation](#), the scope of practice of RSLPs, which has not changed, includes, for the purposes of promoting and maintaining communicative health, the services of assessment, treatment, rehabilitation and prevention of:

- speech, language and related communication disorders and conditions, and
- vocal tract dysfunction, including related feeding and swallowing disorders.

The scope of practice of RSLPs does not include directing or clinically supervising another health professional in treating a client outside the context of an SLP student practicum.

#### **4. What is an example of a practical application of an RSLP sharing information with another regulated health professional about an overlapping activity?**

During a team-based clinical feeding and swallowing assessment (commonly referred to as a bedside or mealtime swallow assessment), an RSLP and another regulated health professional, such as a Registered Occupational Therapist or a Registered Dietitian, are present to complete a series of clinical activities. During the completion of these clinical activities, the RSLP provides information to the other health professional, including their clinical impressions, findings, and reasons for approach and potential modifications during a client's performance of the clinical activities. The information being shared is based on the RSLP's unique body of knowledge, skills, attitudes, judgments, and profession-specific scope of practice perspective.

Similarly, the other health professional provides information to the RSLP regarding their own findings and recommendations based on their professional competencies and profession-specific scope of practice. While some of the clinical activities being performed may be shared or overlap, each professional interprets the outcome of the clinical activities based on their own scope of practice perspectives.

For example, during this clinical feeding and swallowing assessment, the RSLP may, given their unique clinical competencies in assessing and treating voice disorders, find clinical indicators for potential vocal tract dysfunction necessitating further instrumental evaluation by the RSLP such as an endoscopic evaluation of voice and swallowing study (commonly known as a FEES or FEEVS). The Registered Dietitian may, given their unique competencies in assessing nutritional needs and recommending therapeutic diets, find potential nutritional risks necessitating development of a nutritional care plan to optimize intake.

#### **5. What is an example of a practical application of a RSLP clinically supervising or teaching another regulated health professional during an overlapping activity?**

If, during the clinical feeding and swallowing assessment scenario described above in question 4, the RSLP were to provide corrective feedback to the other health professional during their performance of clinical activities with the client, this would be considered training or teaching the other regulated health professional.

For example, it would be considered training if the RSLP directed the other health professional to “correct” their approach during an oral motor exam (also referred to as oral mechanism exam or oral peripheral exam). In this instance, if the RSLP believed the exam being conducted by the other health professional did not provide sufficient information or potentially inaccurate information about the client’s oral motor abilities, an appropriate alternative would be to have the RSLP share their clinical impressions about the client’s performance during the exam with the other health professional. Further, the RSLP may then choose to perform aspects of, or the entire exam to satisfy the RSLP that the information being sought about the client’s oral motor abilities is accurate and sufficient to assist in appropriately managing, from the RSLP’s perspective, the client’s feeding and swallowing needs.

#### **6. May RSLPs support other health professionals who must carry out overlapping activities?**

Yes. An RSLP may always share information on how an RSLP approaches or carries out an overlapping clinical activity.

The College recognizes that in some health care settings, especially in rural or more remote areas, there may not be an onsite, comprehensive, multi-profession dysphagia health care team. (e.g. a situation where there is no onsite RSLP.) In these circumstances, RSLPs from other geographic locations may support other health professionals with the provision of dysphagia management by discussing how they approach and carry out overlapping clinical activities from the perspective of a RSLP.

Members of other health professions receiving information from RSLPs remain responsible for understanding how the information they receive applies to their own clinical practice and to the standards of their own professions. Members of other health professions are responsible for determining whether to seek clinical supervisory support and to obtain verification of their practice competencies through the support of members of the same regulated health profession as their own.

#### **7. From a legal perspective, what is the reason why RSLPs cannot teach, train, or supervise members of other health professions to conduct an overlapping activity?**

While the scopes of practice of health professions may involve overlapping activities, all health professionals perform activities in compliance with the regulations, standards, and competencies of their own professions. While overlapping activities may involve concerns and approaches that are common between different professions, an RSLP is only authorized to practice speech-language pathology and has not been educated or trained in the practice standards of other health professions.

### **For more information**

Read the August 29, 2023, Notice to the Profession: RSLPs are not authorized to teach, train, or supervise members of other regulated professions on how to manage feeding and swallowing disorders as part of their clinical practices.

<sup>1</sup>Clinical supervision may include monitoring, reviewing, guiding, directing, training, evaluating, or providing formal or informal feedback about a supervisee's performance or competencies under the relevant standard of practice. For more information, see the *Supervision* standard of practice.