College of
HEALTH AND CARE
PROFESSIONALS OF BC

VIDEOFLUOROSCOPY OF PAEDIATRIC VELOPHARYNGEAL DISORDERS

Certification Program

The *Health Professions and Occupations Act*'s **Health and Care Professionals Regulation** authorizes certified speech-language pathologists to insert an instrument, device, hand, or finger beyond the point in the nasal passages where they normally narrow, for the purpose of assessing and managing voice and swallowing function in paediatric patients with velopharyngeal disorders.

Pre-Requisites

The following pre-requisite must be completed prior to starting certification program objectives and must be completed within 7 years of the time of application.

1) Completion of a three-credit (minimum 6 hours) graduate-level course, workshop, or webinar, which includes the methodology, use, and interpretation of videofluoroscopy for velopharyngeal insufficiency (at least 2 hours dedicated to paediatric patients)

   or

2) Completion of equivalent work experience (for those without a graduate-level course but in current related practice for a minimum of 1 year)

Certification program learning objectives

A Full licensee in good standing may apply to be certified to perform this restricted activity if they successfully complete the following requirements within a period of 3 years or less.

Licensees who anticipate needing longer than 3 years to complete certification program requirements may request an extension by emailing **certification@chcpbc.org**. Extension requests are reviewed and approved by the Licence Committee.

Supervised practice should occur after completion of observations and in order of objective number. Supervision level should decrease gradually to enable the licensee to attain autonomous practice.

Objectives	Knowledge, skills, and demonstrated competencies for certification program
Objective 1	**Attains the foundational knowledge for working with paediatric patients who require a videofluoroscopic velopharyngeal study (VFVPS)**
1.1	Understands the role of the speech-language pathologist (SLP) in a VFVPS including the ability to provide an SLP diagnosis of velopharyngeal dysfunction.
1.2	Understands the role of other health professionals involved in the assessment of velopharyngeal function including VFVPS.

Objectives	Knowledge, skills, and demonstrated competencies for certification program
1.3	Understands the causes, signs, and symptoms of velopharyngeal dysfunction.
1.4	Understands the difference between velopharyngeal insufficiency and velopharyngeal incompetence.
Objective 2	**Attains the clinical knowledge for conducting paediatric VFVPS**
2.1	Identifies and describe normal and abnormal anatomy and physiology for phonation, articulation and velopharyngeal function for speech and swallowing.
2.2	Understands the relationship between phonation, articulation, resonance, and velopharyngeal dysfunction.
2.3	Recognizes indicators of velopharyngeal dysfunction including resonance imbalance, nasal air emission and speech sound errors.
2.4	Understands potential causes of velopharyngeal dysfunction including submucous cleft palate and neuromuscular weakness.
2.5	Understands the impact of persistent velopharyngeal dysfunction on speech intelligibility and acceptability.
2.6	Understands how to differentiate between speech errors that are related and unrelated to velopharyngeal dysfunction.
Objective 3	**Understands the foundational elements of a comprehensive VFVPS**
3.1	Understands the need to select appropriate speech sample for assessment.
3.2	Understands the effects of compensatory misarticulations on velopharyngeal movement.
3.3	Understands when multi-view videofluoroscopy and barium are required in the VFVPS.
Objective 4	**Determines patient candidacy and selection**
4.1	Understands the advantages, disadvantages, contraindications, and limitations of VVS including how this may vary with the patient population (e.g., developmentally delayed children, medically fragile children, children with syndromes and/or oro-facial anomalies).
4.2	Demonstrates proficiency in patient selection by obtaining patient consent; obtaining a relevant case history including medical history and potential risks for velopharyngeal insufficiency.
4.3	Recognizes when a patient is unlikely to tolerate, comply with or benefit from the procedure.
4.4	Understands other tools for assessing velopharyngeal function (e.g., nasoendoscopy, MRI) including their purpose and value.

Objectives	Knowledge, skills, and demonstrated competencies for certification program
Objective 5	**Prepares for the velopharyngeal disorder assessment**
5.1	Understands the impact of barium when introduced into the nasal passages.
5.2	Understands how to maximize patient safety during the assessment and management procedures including conferring with the radiation protection officer as needed.
5.3	Understands the need for recording the study for post-examination replay and analysis.
5.4	Understands the temporal resolution requirements for the study.
5.5	Understands the risks and acceptable radiation exposure at each developmental stage.
Objective 6	**Performs the VFVPS independently**
6.1	Identifies anatomical landmarks seen in lateral, enface and/or frontal fluoroscopic views.
6.2	Identifies when test procedures may need to be modified for a patient.
6.3	Extrapolates VFVPS findings and relates them to perceptual speech measures.
6.4	Prepares child and family for the procedure.
6.5	Uses clinical judgment to modify and tailor procedures as needed, including the order of speech stimuli, use of barium and positioning.
6.6	Completes 3 observations of paediatric VFVPS that include: review of patient history, (perceptual) assessment results, rationale for the VFVPS, interpretation and recommendations post-study. At least one observation must be of a qualified authorized health professional performing the VFVPS. Up to 2 observations may be completed virtually.
6.7	Completes 8 paediatric VFVPS under gradually decreasing levels of supervision, to attain independent practice.
Objective 7	**Interprets VFVPS results accurately**
7.1	Applies current knowledge of best practice including evidence-informed practice to VFVPS.
7.2	Demonstrates ability to accurately analyze the VFVPS data.
7.3	Recognizes and describes the physical signs of velopharyngeal dysfunction (e.g., inadequate palate length, increased pharyngeal depth, no velar eminence).
7.4	Recognizes and describes the movement of velopharyngeal structures, gap size and pattern of closure.

Objectives	Knowledge, skills, and demonstrated competencies for certification program
7.5	Demonstrates ability to differentiate between velopharyngeal incompetency and insufficiency.
7.6	Recognizes from the results any indications for behavioral, prosthetic, or surgical management.
7.7	Understands the risks of surgical recommendations associated with velopharyngeal dysfunction management.
Objective 8	**Documents the assessment results and plans patient management**
8.1	Provides complete, accurate documentation of the study and related findings.
8.2	Develops a management plan with appropriate recommendations and referrals.
8.3	Provides accurate, collaborative, and individualized recommendations including recommendations for further interventions, referrals and SLP re-assessment.
8.4	Integrates patient preferences and attitudes regarding any proposed management strategies.
8.5	Includes patient/family in all management recommendations and decisions.
8.6	Provides SLP prognostic and diagnostic statements where applicable.
8.7	Collaborates with appropriate team members on a case-by-case basis.
8.8	Provides SLP related education and counseling related to the VFVPS results, recommendations, and management plan.
8.9	Demonstrates ability to monitor and identify changes that would necessitate modifying the management plan.

Licensees are responsible for documenting learning interactions with patients and patient consent in accordance with the CHCPBC Ethics and Practice Standards.

References

CHCPBC Bylaws, section 7
CHCPBC Ethics and Practice Standards
National Speech-Language Pathology Competency Profile

Resource

Practical Learning Log