

The competencies and sub-competencies listed in the evaluation form are based on the National Speech-Language Pathology Competency Profiles (May 2018). It should be noted that clinicians' level of skill in these competencies should rise throughout their careers, meaning that an entry-to-practice speech-language pathologists would likely perform these competencies at a lower level when compared to a more experienced clinician.

Skills Rating Instructions for the Supervisor	
- Review the competency profile including the introduction and preamble prior to completing the following evaluation (on the CSASK website). - Circle the rating that corresponds to each skill described below (5 = most effective performance, and 1 = least effective performance). - Rate the supervised registrant on the 93 skills according to the registrant's accuracy, consistency, and independence. - Discuss the ratings with the supervised registrant.	
Mid-Evaluation Period	Final Evaluation Period
Beginning date: _____	Beginning date: _____
Ending date: _____	Ending date: _____

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	Mid-Evaluation Period					Final Evaluation Period				
a. Apply profession-specific knowledge to prevent, identify, and manage communication disorders, and feeding and swallowing disorders across the lifespan.	i. Apply knowledge of communication development and disorders to clinical practice.	1	2	3	4	5	1	2	3	4	5
	ii. Apply knowledge of feeding and swallowing development and disorders to clinical practice.	1	2	3	4	5	1	2	3	4	5
	iii. Apply knowledge of prevention, assessment, and intervention processes to clinical practice.	1	2	3	4	5	1	2	3	4	5
b. Apply basic knowledge from relevant fields that apply to communication and feeding and swallowing across the lifespan.	i. Apply basic knowledge from relevant fields (e.g., human physiology, psychology) to clinical practice.	1	2	3	4	5	1	2	3	4	5

c. Apply knowledge of hearing, hearing loss, and disorders of the auditory system to the practice of speech-language pathology.	i. Apply knowledge of auditory function, hearing loss, and disorders of the auditory system to the service provided to clients, where applicable.	1	2	3	4	5	1	2	3	4	5
	ii. Effectively administer standard hearing screening protocols to clients.	1	2	3	4	5	1	2	3	4	5
d. Use evidence and clinical reasoning to guide professional decisions.	i. Critically appraise research and other available evidence to inform clinical practice.	1	2	3	4	5	1	2	3	4	5
	ii. Integrate current leading evidence and clinical reasoning in clinical practice.	1	2	3	4	5	1	2	3	4	5

1.2 Clinical Expert

Essential Competencies	Sub-Competencies	Mid-Evaluation Period					Final Evaluation Period				
e. Identify individuals requiring speech-language pathology services.	i. Collect and review information from relevant sources (e.g., referrals, reports, consultation) to determine an individual's need for a speech-language pathology assessment	1	2	3	4	5	1	2	3	4	5
	ii. Manage and promote screening programs (e.g., infant, industrial, school) to identify individuals requiring speech-language pathology services.	1	2	3	4	5	1	2	3	4	5
f. Plan, conduct, and adjust an assessment.	i. Collect and analyze pertinent information prior to the assessment, including: case history, previous reports, and the client's perspectives.	1	2	3	4	5	1	2	3	4	5
	ii. Organize the environment for an optimal interaction.	1	2	3	4	5	1	2	3	4	5
	iii. Plan the assessment, including the appropriate tools, strategies and resources that will address the unique needs of the client.	1	2	3	4	5	1	2	3	4	5
	iv. Conduct a valid, accurate, and reliable assessment, modifying as necessary.	1	2	3	4	5	1	2	3	4	5
	v. Actively listen to and observe all components of communication and/or feeding and swallowing.	1	2	3	4	5	1	2	3	4	5
	vi. Provide a re-assessment as appropriate.	1	2	3	4	5	1	2	3	4	5
g. Analyze and interpret assessment results.	i. Analyze formal and informal assessment results.	1	2	3	4	5	1	2	3	4	5
	ii. Interpret the data accurately.	1	2	3	4	5	1	2	3	4	5
	iii. Formulate conclusions regarding the client's diagnosis, abilities, resources, and needs.	1	2	3	4	5	1	2	3	4	5
h. Develop and share recommendations based on the	i. Develop evidence-informed recommendations, including potential referrals to other professionals, based on the assessment findings.	1	2	3	4	5	1	2	3	4	5

assessment results.	ii. Discuss the assessment results, recommendations, and implications with the client and other relevant individuals, as permitted by client.	1	2	3	4	5	1	2	3	4	5
i. Develop a realistic, evidence-informed, and measurable intervention plan.	i. Establish and prioritize long-term intervention goals that reflect the client's strengths, needs, values, expectations, and constraints.	1	2	3	4	5	1	2	3	4	5
	ii. Develop specific, measurable, realistic, time-limited, short-term goals to reach the long-term intervention goals.	1	2	3	4	5	1	2	3	4	5
	iii. Develop an evidence-informed intervention plan with direct and/or indirect service delivery, as appropriate, to target the short-term goals.	1	2	3	4	5	1	2	3	4	5
	iv. Determine the resources and timelines required for the intervention.	1	2	3	4	5	1	2	3	4	5
	v. Develop outcome measures that align with the client's long-term goals.	1	2	3	4	5	1	2	3	4	5
	vi. Identify and recommend alternative services for a client whose needs are beyond the professional limitations of the speech-language pathologist.	1	2	3	4	5	1	2	3	4	5
j. Implement intervention plan.	i. Organize the environment for an optimal interaction.	1	2	3	4	5	1	2	3	4	5
	ii. Conduct the intervention, modifying as appropriate.	1	2	3	4	5	1	2	3	4	5
	iii. Measure and record the client's response to intervention.	1	2	3	4	5	1	2	3	4	5
	iv. Provide appropriate feedback and modelling to the client.	1	2	3	4	5	1	2	3	4	5
	v. Use the appropriate modalities, materials, and technologies in the provision of service.	1	2	3	4	5	1	2	3	4	5
	vi. Provide the client and family or significant others with education, support, training, and counselling, relating to communication, feeding or swallowing.	1	2	3	4	5	1	2	3	4	5
	vii. Refer to other health care or educational professionals as required.	1	2	3	4	5	1	2	3	4	5
k. Monitor, adapt and/or redesign intervention plan based on the client's responses and needs.	i. Evaluate the outcomes of the intervention on an ongoing basis.	1	2	3	4	5	1	2	3	4	5
	ii. Conduct the intervention, modifying as appropriate.	1	2	3	4	5	1	2	3	4	5
	iii. Consult with the client when considering a change in the course of action.	1	2	3	4	5	1	2	3	4	5
	iv. Plan for discharge and/or transition to other services.	1	2	3	4	5	1	2	3	4	5
	v. Discontinue the intervention, as appropriate.	1	2	3	4	5	1	2	3	4	5

I. Provide clinical direction and oversight to support personnel.	i. Incorporate support personnel in clinical care to meet the clinical objectives, as appropriate to the clinical activity and jurisdiction.	1	2	3	4	5	1	2	3	4	5
	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.	1	2	3	4	5	1	2	3	4	5
	iii. Determine the capabilities of support personnel.	1	2	3	4	5	1	2	3	4	5
	iv. Provide tasks to support personnel based on their competencies.	1	2	3	4	5	1	2	3	4	5
	v. Provide the necessary training of support personnel.	1	2	3	4	5	1	2	3	4	5
	vi. Monitor and review the performance of support personnel.	1	2	3	4	5	1	2	3	4	5

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	Mid-Evaluation Period					Final Evaluation Period				
a. Communicate respectfully and effectively using appropriate modalities.	i. Use language appropriate to the client and context, taking into account age, culture, linguistic abilities, education level, cognitive abilities, and emotional state.	1	2	3	4	5	1	2	3	4	5
	ii. 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).	1	2	3	4	5	1	2	3	4	5
	iii. Mitigate language barriers by using translators/interpreters, as required.	1	2	3	4	5	1	2	3	4	5
	vi. Recognize and respond to the client's verbal and non-verbal communication.	1	2	3	4	5	1	2	3	4	5
	v. Use strategies to facilitate a mutual understanding of shared information.	1	2	3	4	5	1	2	3	4	5
	vi. Participate respectfully in challenging conversations.	1	2	3	4	5	1	2	3	4	5
b. Maintain client documentation.	i. Accurately document services provided and their outcomes.	1	2	3	4	5	1	2	3	4	5
	ii. Document informed consent.	1	2	3	4	5	1	2	3	4	5
	iii. Complete and disseminate documentation in a timely manner.	1	2	3	4	5	1	2	3	4	5
	iv. Comply with regulatory and legislative requirements related to documentation.	1	2	3	4	5	1	2	3	4	5

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	Mid-Evaluation Period					Final Evaluation Period				
a. Establish and maintain effective collaborations to optimize client outcomes.	i. Collaborate with the client during all stages of care.	1	2	3	4	5	1	2	3	4	5
	ii. Interact effectively with all team members.	1	2	3	4	5	1	2	3	4	5
	iii. Communicate one's professional roles, responsibilities, and scope of practice in collaborative interactions with the client, caregivers, and relevant professionals.	1	2	3	4	5	1	2	3	4	5
	iv. Recognize and respect the roles and perspectives of other individuals.	1	2	3	4	5	1	2	3	4	5
	v. Manage misunderstandings, limitations, and conflicts to enhance collaborative practice.	1	2	3	4	5	1	2	3	4	5
	vi. Facilitate transfer of care within and across professions.	1	2	3	4	5	1	2	3	4	5

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	Mid-Evaluation Period					Final Evaluation Period				
a. Advocate for necessary services and resources that support an individual client.	i. Identify and address the barriers that impede or prevent access to services and resources by the client, according to his or her goals.	1	2	3	4	5	1	2	3	4	5
	ii. Encourage the client's societal inclusion and participation.	1	2	3	4	5	1	2	3	4	5
	iii. Consult with the appropriate individual(s) and/or organization(s) to obtain available services and resources for the client.	1	2	3	4	5	1	2	3	4	5
b. Provide information and support to promote a client's self-advocacy.	i. Identify and provide information and tools to assist the client, or substitute decision-maker to access services and supports.	1	2	3	4	5	1	2	3	4	5
	vi. Enable the client to identify and address barriers that impede or prevent access to services and resources.	1	2	3	4	5	1	2	3	4	5

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	Mid-Evaluation Period					Final Evaluation Period				
a. Maintain currency of professional knowledge and performance in order to provide optimal care.	i. Identify one's own professional strengths and areas for development.	1	2	3	4	5	1	2	3	4	5
	ii. Determine one's own goals for competency development.	1	2	3	4	5	1	2	3	4	5
	iii. Develop a plan and implement strategies for continued development in all seven competency roles.	1	2	3	4	5	1	2	3	4	5
	iv. Use appropriate resources to fulfill training needs (e.g., literature, continuing education, mentorship).	1	2	3	4	5	1	2	3	4	5
b. Share professional knowledge with others.	i. Identify the need for education related to speech-language pathology services in other professionals, the client and/or caregivers and the community.	1	2	3	4	5	1	2	3	4	5
	ii. Identify and adapt to the appropriate level of content for the audience.	1	2	3	4	5	1	2	3	4	5
	iii. Provide information in an accessible manner to facilitate audience comprehension.	1	2	3	4	5	1	2	3	4	5

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	Mid-Evaluation Period					Final Evaluation Period				
a. Manage the clinical setting.	i. Balance competing demands to manage time, caseload, resources, and priorities.	1	2	3	4	5	1	2	3	4	5
	ii. Apply appropriate precautions, risk management, and infection control measures, as required.	1	2	3	4	5	1	2	3	4	5
	iii. Ensure equipment, materials, instruments, and devices are regularly calibrated, up to date and in good working condition, according to the required standards.	1	2	3	4	5	1	2	3	4	5
	iv. Identify opportunities to improve practice models within workplace settings.	1	2	3	4	5	1	2	3	4	5
	v. Participate in or lead quality improvement initiatives.	1	2	3	4	5	1	2	3	4	5

	vi. Address problems in one's clinical setting that are related to provincial or national accessibility standards for providing services to the public.	1	2	3	4	5	1	2	3	4	5
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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	Mid-Evaluation Period					Final Evaluation Period				
a. Maintain professional demeanour in all clinical interactions and settings.	i. Maintain confidentiality.	1	2	3	4	5	1	2	3	4	5
	ii. Demonstrate professionalism in managing conflict.	1	2	3	4	5	1	2	3	4	5
	iii. Maintain personal and professional boundaries in relationships with clients, colleagues, and other professionals.	1	2	3	4	5	1	2	3	4	5
	iv. Recognize and respond appropriately to the inherent power differential in the client-clinician relationship.	1	2	3	4	5	1	2	3	4	5
	v. Demonstrate professionalism in all communications, including those involving electronic platforms.	1	2	3	4	5	1	2	3	4	5
b. Practice ethically.	i. Adhere to professional code of ethics, as defined within one's jurisdiction.	1	2	3	4	5	1	2	3	4	5
	ii. Recognize and use critical judgment to respond to ethical issues encountered in practice.	1	2	3	4	5	1	2	3	4	5
	iii. Recognize and use critical judgment to respond to actual or perceived conflicts of interest.	1	2	3	4	5	1	2	3	4	5
	iv. Identify one's own biases, as they relate to the care of a client.	1	2	3	4	5	1	2	3	4	5
	v. Actively work to mitigate one's biases, as they relate to the care of a client.	1	2	3	4	5	1	2	3	4	5
	vi. If unable to overcome significant biases, provide the client with alternative options.	1	2	3	4	5	1	2	3	4	5
c. Adhere to professional standards and regulatory requirements.	i. Stay informed of, and comply with, professional standards and regulatory and legislative requirements within one's jurisdiction.	1	2	3	4	5	1	2	3	4	5
	ii. Practice within the profession's scope of practice and one's personal capabilities.	1	2	3	4	5	1	2	3	4	5
	iii. Comply with regulatory body requirements to maintain competency, as defined within one's jurisdiction.	1	2	3	4	5	1	2	3	4	5

Additional comments:

Mid-Evaluation Period	Final Evaluation Period
Supervisor's Signature _____	Supervisor's Signature _____
Supervised SLP's Signature _____	Supervised SLP's Signature _____
Date of Feedback Session _____	Date of Feedback Session _____

Supervisor's Verification of Information		
☐ Yes ☐ No	I affirm that there were at least 24 formal supervisory activities during each evaluation period (mid and final evaluation periods).	
☐ Yes ☐ No	I affirm that there were at least 24 live observations of direct practice hours during the supervision period.	
☐ Yes ☐ No	I affirm that informal supervision was also provided to the registrant throughout the supervision period.	
☐ Yes ☐ No	I affirm that alternative methods of observation/supervising activities were not used. If alternative methods of observation/supervising activities were used, prior approval was obtained from CSASK before using those methods.	

Signatures of Supervisor and Supervised Registrant	
We, the undersigned supervisor(s) and supervised registrant, hereby attest that this evaluation report has been reviewed and discussed between us. We further attest that the supervisor's registration and licensing remained valid and in good standing for the entirety of the supervision period. Additionally, we affirm that no familial or other personal relationship exists between us that would give rise to a potential, perceived, or actual conflict of interest.	
Signature of Supervisor 1 _____	Date _____
Signature of Supervisor 2 _____	Date _____
Signature of Supervised Registrant _____	Date _____

CSASK developed this document in accordance with the CAASPR National Speech-Language Pathology Competency Profile of 2018.