



College of Audiologists and
Speech-Language Pathologists of Ontario
Ordre des audiologistes et
des orthophonistes de l'Ontario

MENTORSHIP PROGRAM GUIDELINES

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CHAPTER 1: INTRODUCTION

This document outlines the process and policies of CASLPO's mentorship program. These guidelines are intended to support the Initial CASLPO registrant (i.e., the mentee). Although this document is written with the Initial registrant in mind, the information provided is equally relevant for mentors and employers, as well as General registrants of CASLPO who may be required to complete a mentorship period.

THE PURPOSE OF CASLPO'S MENTORSHIP PROGRAM

CASLPO's Mentorship Program has been in place since 1994 and serves three important purposes related to the College's role and mandate.

1. REGISTRATION REQUIREMENTS

Mentorship is a condition of an initial certificate of registration. This means that you must successfully complete your mentorship before you can become a General registrant of the College.

In some cases, existing General registrants of the College may be required to complete a period of mentorship as an Order from the Registration Committee. For more information on the regulatory requirements for mentorship see [Ontario Regulation 21/12, subsections 9 and 10.](#)

2. PUBLIC PROTECTION

An important purpose of CASLPO's Mentorship Program is public protection. To protect the public the College develops and requires adherence to practice standards, which are the minimum standards that speech-language pathologists (SLPs) and audiologists in Ontario must abide by in their professional practice. During your mentorship, your mentor will assess your compliance with the College's professional practice standards. Your mentor ultimately will decide if they recommend you for a General Certificate of Registration based on your understanding of, and compliance with, the College's standards.

3. QUALITY ASSURANCE OF COLLEGE REGISTRANTS

During your mentorship period, you will be introduced to the requirements of the College's Quality Assurance (QA) Program. General registrants demonstrate their participation in the QA program through an online Self-Assessment Tool (SAT). In the mentorship program, you complete the Mentorship Self-Assessment Tool (MSAT), which is based on, and essentially mirrors, the SAT for General registrants. Participation in QA means continually ensuring that you apply professional practice standards and actively engage in self-reflection and competency evaluation. It also involves setting appropriate goals for your practice to ensure that you meet the minimum expected standards and improve your practice over time. Click [here](#) to learn more about CASLPO's QA program.

WHY MENTORSHIP IS IMPORTANT

Mentorship provides you with the support of a colleague to ensure you have the knowledge, skill, and judgment to practice safely and independently. Your mentor’s role should be viewed as an experienced consultant and trusted advisor, who will coach you in understanding and applying the College’s practice standards as well as principles for developing sound clinical judgement. If your mentor observes substandard practice, their responsibility is to guide you to learn and understand the standards and help you adjust your practice so that you meet them.

When you receive your CASLPO registration and become an initial registrant, you officially become a self-regulated healthcare professional who is now permitted by law to use the title “audiologist”, “speech-language pathologist”, or “speech therapist, with all the responsibilities that entails.

As a regulated healthcare professional, you accept responsibility for your role in maintaining the public’s confidence in the competence of the profession to provide safe, quality and ethical care. This is the concept of professional **self-regulation**.

During your mentorship you engage in the important and career-long process of self-directed learning, reflection and assessment of your own competence to practice. All health regulatory Colleges in Ontario require their registrants to engage in this important process. The process helps to ensure that patients are receiving their health care from skilled, knowledgeable, and competent professionals whom they can trust.

THE DIFFERENCE BETWEEN MENTORSHIP AND STUDENT SUPERVISION

Mentorship is different from the supervised practice you had as a student. Your mentor is not accountable for your clinical decisions or the care you provide to patients and their families.

During your mentorship you are legally, ethically and professionally accountable for your clinical decisions, as the title “speech-language pathologist”, “speech therapist” or audiologist implies.

FIG 1. Mentoring vs. Student Supervision

MENTORING	SUPERVISING
The mentee is fully accountable for all clinical activities they provide	The supervisor is accountable for all clinical activities provided by the student
The mentee uses the title “speech-language pathologist”, “speech therapist” or “audiologist”	The student must use a title indicating they are a student

MENTORING	SUPERVISING
The mentor assumes the mentee has a basic level of competence and focuses on general guidance and further honing of clinical skills.	The supervisor does not assume competence of the student and teaches information and skills to bring the student to a level of basic competence.
The mentor determines if the mentee complies with CASLPO professional practice standards. The mentor may provide general guidance around professional practice issues and support the mentee in developing clinical decisions based on sound reasoning.	The supervisor evaluates the student’s knowledge, skill, and judgement for the areas of practice in which they are involved. The supervisor intervenes in the student’s practice to teach skills and impart knowledge to raise the student’s level of competence.
CASLPO determines all aspects of the requirements for mentoring.	Universities determine all aspects of the requirements for supervision.

WHO BENEFITS FROM MENTORSHIP?

Mentorship enhances the professional development of both the mentor and the mentee. The public, who ultimately experience the results of mentorship, is a primary beneficiary of the process because mentorship works to promote competent, ethical, skilled, and professional registrants of the College (*Mentorship in Healthcare, Shaw & Fulton, 2015*).

How Mentees Benefit	<ul style="list-style-type: none"> • Introduction to the College’s practice standards and the self-assessment tool (SAT) • Support to facilitate the integration of standards into independent professional practice • Development of new professional and clinical skills • Engagement in self-directed learning and reflection on your practice
How Mentors Benefit	<ul style="list-style-type: none"> • Contribute directly to strengthening the principles of self-regulation • Help shape the next generation of professionals • Enhance mentoring and management skills • Learn about new practices or research from the knowledge offered by new professionals entering the field • Exposure to new and different thinking styles and perspectives
How the Public Benefits	<ul style="list-style-type: none"> • Strengthening of public trust in the professions • Development of more knowledgeable CASLPO registrants with broader perspectives • Assured that they will receive competent service from registrants at different career stages

CHAPTER 2: SETTING UP YOUR MENTORSHIP

IMPORTANT IN THIS CHAPTER

- **There are 4 steps** to setting up your mentorship: **1)** find employment, **2)** secure a mentor, **3)** submit your CASLPO registration form and **4)** complete and submit your mentorship contract to the College
- **There are 6 points to discuss** with your mentor to complete your mentorship contract: **1)** the mentorship period start date, **2)** your mentored guidance hours, **3)** methods of guidance, **4)** methods of feedback, **5)** a review of the evaluation process and **6)** your patient care hours
- **You cannot use the title** “speech-language pathologist”, “speech-therapist”, or “audiologist” until you are registered to practice with the College
- **You are required to have one designated mentor who agrees to mentor you for all of your practice settings.** You do not require multiple mentors.
- **You must submit a mentorship contract** to the College **within 30 days** of starting work in your profession

STEP 1: FIND EMPLOYMENT IN YOUR PROFESSION

It is strongly advised that you complete CASLPO’s application process and receive notification that you are eligible for registration before seeking employment.

When you are ready to proceed with finding employment, or if you are offered employment as a SLP or audiologist in Ontario, you must explain CASLPO’s steps to becoming employed to potential employers.

POTENTIAL EMPLOYERS MUST BE INFORMED:

- 1) You are not yet registered to practice
- 2) To become registered, you require 1) an offer of employment as an audiologist or SLP in Ontario and 2) the name of your mentor to fulfill the College’s [mentorship program requirements](#)
- 3) Your registration will be processed within 5 business days once the required documents for registration have been received by the College
- 4) You cannot use the title “speech-language pathologist”, “speech-therapist” or “audiologist” until you are registered¹
- 5) You cannot practice in the profession until you are registered
- 6) Your position must involve [patient care](#), as defined in this Guide

¹ *Audiology and Speech Language Pathology Act, 1991*

STEP 2: FIND A MENTOR

You must secure a mentor who meets the criteria and qualifications specified in this Guide. Often, finding a job and a mentor go hand-in-hand because it's easier to have a mentor who you also work with. This is ideal but not required.

MENTOR CRITERIA

The following are **mandatory** criteria for mentors.

The mentor must:

1. Be a General registrant without any terms, conditions or limitations on their certificate of registration issued by any committee of the College.
2. Be an experienced practitioner with a minimum of four years of professional practice in the area in which mentorship is provided (audiology or speech-language pathology).
3. Not have been:
 - a. found guilty of professional misconduct and/or incompetence;
 - b. found to be incapacitated
 - c. issued a caution in person from the Inquiries, Complaints and Reports Committee within the last 6 years; or
 - d. required to complete a Specified Continuing Education or Remediation Program (SCERP) from the Inquiries, Complaints and Reports Committee within the last 6 years
4. Not be the subject of an investigation, a capacity inquiry, or a complaint (unless the complaint is considered frivolous, vexatious or made in bad faith under sections 26(4) and 26(5) of the *Health Professions Procedural Code*¹).
5. Not have any existing charges against them in respect to a federal, provincial or other offence.
6. Not be the subject of a proceeding respecting allegations of professional misconduct, incompetence, or incapacity by a body that governs a profession.
7. Have an up-to-date and completed Self-Assessment Tool (SAT) and be compliant with the College's Quality Assurance Program requirements.
8. Not have a history of repeated suspended or revoked registration.

¹ Schedule 2 of the *Regulated Health Professions Act, 1991*

ADDITIONAL QUALITIES OF A MENTOR

In addition to the above criteria, mentors are in their role because they demonstrate the following qualities:

- Leadership ability
- Knowledge of evidence-based clinical practices
- General understanding of the areas in which you will be practicing
- Willingness to share experiences and provide constructive feedback
- Ability to adopt a “coaching role”, including supportive and reflective behaviour
- An ability to manage misunderstandings and conflicts
- Ability to encourage the mentee to engage in *clinical reasoning* in order to further develop skills of reflective practice and sound judgement when making clinical decisions

Clinical Reasoning Definition (from the [Guide to the Clinical Reasoning Tool](#)):

The ongoing process by which registrants collect, analyse and evaluate information, come to an understanding of a patient problem or situation, plan and implement interventions, evaluate outcomes, and reflect on and learn from the process.

SINGLE MENTOR REQUIREMENT

You must have one designated mentor, even if you have multiple practice settings and/or multiple employers. Multiple mentors are not permitted, although “collaborators” are.

It is preferable for your designated mentor to be associated with your primary employment setting, defined as the setting where you will work most often. If you plan to work equally between two different employers, then you must choose one setting as your primary.

It is also preferable that your mentor be on-site with you, at least periodically, at your primary employment setting. You are required to keep your mentor aware of your work in other settings or with other employers, and to track your hours more specifically in this situation.

For more information on multiple jobs during mentorship and on collaborators for your mentored guidance hours please see [Chapter 4 on Unusual Circumstances in Mentorship](#).

DISTANCE MENTORING

You are encouraged to have a mentor who can be on-site with you periodically at your primary employment setting. The College understands that this is not always possible. Distance mentoring is an option; keeping in mind that your mentor must agree to mentor you for your work at your primary employment setting.

It is important to note that during your mentorship period, your mentor must spend time directly observing your clinical practice. This can occur over live video call or by having your mentor review videotaped sessions of your appointments with appropriate patient consent.

In addition, your mentor must review five of your patient records at the midterm evaluation and another five records at the final evaluation. For this purpose, your mentor may need to either visit you on-site at your primary employment setting or view your patient records electronically. It is important for your employer to be informed of these requirements to ensure they will be possible to fulfill.

HELP TO FIND A MENTOR

If you have an offer of employment where a mentor cannot be provided, the College can assist by providing a list of potential mentors. It will be up to you to contact the SLPs or audiologists on the list to determine if they are able to mentor you for your primary employment setting.

To obtain a list of potential mentors contact mentorship@caslpo.com and indicate:

1. Your profession (AUD or SLP)
2. The cities/areas where you are searching for a mentor

STEP 3: SUBMIT YOUR REGISTRATION FORM.

Once you have completed the College's application process, you will be notified by e-mail that you are eligible for registration. An *Initial Certificate of Registration Form* will be included in the e-mail communication.

The College will not issue an initial registration number to you until you have submitted the Initial Certificate of Registration Form indicating where you will be employed and the name of your mentor.

When the College receives a completed Initial Certificate of Registration Form, your registration will be processed within 5 business days.

For more detailed information on timelines for your application and registration with CASLPO visit the "Applicant" portion of the College's website (www.caslpo.com).

General registrants who are required to complete a mentorship period must follow the directions provided in their Order from the Registration Committee before beginning their mentorship.

You must be registered to practice with CASLPO before you can use the title "audiologist", "speech-language pathologist" or "speech therapist" and begin working in the profession.

STEP 4: COMPLETE YOUR MENTORSHIP CONTRACT

Once you begin working you will coordinate a meeting with your mentor to establish a joint understanding of how the mentoring process will take place. You can then complete your mentorship contract.

Your mentorship contract must be submitted to the College **within 30 days** of beginning your employment.

MENTORSHIP CONTRACT: 6 POINTS TO DISCUSS WITH YOUR MENTOR

1. Mentorship Period Start Date - The College calculates your mentorship period to be 6 months beginning at your indicated start date.

Your start date must be after the date you became initially registered with CASLPO. Time spent with your mentor before your initial registration cannot be counted towards your mentorship.

The College calculates your midterm and final mentorship report due dates based on your start date. The midterm report is due one month after you reach the midway timepoint, which is approximately the 3-month mark. The final report is due one month after the mentorship period end date. For example, if your mentorship period is scheduled to end on March 3rd then the final report will be due on April 3rd. The due dates for the reports will be visible to you and your mentor in the online **Mentorship Self-Assessment Tool (MSAT)**.

You and your mentor will gain access to the **MSAT** after you submit your mentorship contract. Once you gain access to the MSAT, you will have access to an **MSAT Guide** that provides detailed information and instructions on how to use the MSAT.

2. Mentored Guidance Hours – You are required to arrange a minimum of 48 hours of mentored guidance that your mentor will provide over the course of your 6-month mentorship. The College recommends 2 hours of guidance per week, which amounts to 24 hours of guidance received in each half of the mentorship period. You and your mentor may organize the 48 hours differently as long as they are sufficiently spread over time.

It is preferable for your designated mentor to provide all 48 hours of mentored guidance themselves. If necessary, other SLPs or audiologists may “collaborate” with your mentor to provide a portion of the 48 hours of mentored guidance. There are additional requirements in this scenario. Please see [Chapter 4 on Unusual Circumstances in Mentorship](#) for the requirements when involving other SLPs and audiologists as Collaborators for your 48 mentored guidance hours.

3. Methods of Guidance -You will discuss the proportion and type of direct and indirect guidance you will receive from your mentor.

It is mandatory for your designated mentor to spend a portion of the 48-hours of mentored guidance directly observing your practice.

INDIRECT VS. DIRECT GUIDANCE AND OBSERVATION

The College does not specify the number of hours required for mentors to provide direct observation or guidance. However, your mentor must provide sufficient direct observation and guidance to be able to determine if you have the basic knowledge, skill and judgement to practice competently and to comment on whether you comply with CASLPO's practice standards.

Direct Guidance from your mentor includes activities such as:

- i. Observing you in-person during a clinical session with a patient
- ii. Observing you remotely in real-time using a secure video platform with a patient during a clinical session
- iii. Watching a video recording of you in a clinical session
- iv. Listening to an audio recording of you in a clinical session. **Note**, audio recordings cannot be the only source of your direct guidance.

When determining how many hours of **direct observation** are needed from a mentor, it is suggested that the following factors be considered:

- The practice environment (e.g., hospital or acute care may require more direct observation compared with other practice environments)
- The level of ability and confidence of the mentee
- The level of patient risk related to the clinical activity (e.g., swallowing assessments or vestibular assessments would require more direct observation compared with other practice areas)

Indirect Guidance from your mentor includes activities such as:

- i. Directing clinical management discussions (either in person, via text/e-mail or telephone conferences)
- ii. Reviewing written reports (either in person, via text/e-mail, the MSAT or telephone)
- iii. Leading administrative management discussions (either in person, via text/e-mail or telephone conferences)
- iv. Providing guidance and feedback through comments within the Mentorship Self-Assessment Tool (MSAT)

4. Methods of feedback – You will discuss the methods by which you will receive feedback. Your mentor may provide feedback in a variety of ways including:

- i. Face-to-face in-person meetings
- ii. Video conferencing (e.g., Skype or Facetime)
- iii. Telephone conversations
- iv. Written communication – e-mail, text, or using the comment boxes in the Mentorship Self-Assessment Tool (MSAT)

5. Review of the Evaluation Process – You and your mentor will review the College’s professional practice standards and performance indicators so that you have a mutual understanding of how you will be evaluated. A link to the practice standards and indicators is provided in the mentorship contract. The same practice standards appear in the online Mentorship Self-Assessment Tool (MSAT) that you and your mentor will use during the mentorship period.

You and your mentor will be assigned separate log-ins to gain access to the Mentorship Self-Assessment Tool (MSAT) after you submit your mentorship contract.

6. Patient Care Hours – You are required to provide 500 hours of patient care during your mentorship period.

If you will complete all 500 patient care hours at your primary employment setting with your mentor on-site, you can decide with your mentor on the method for keeping track of your patient care hours. There are additional requirements for tracking your patient care hours if you intend to count hours worked at a secondary employment setting. Please see [Chapter 4 on Unusual Circumstances in Mentorship](#) for information on how to track patient care hours from a secondary employment setting.

DEFINITION OF PATIENT CARE

Patient Care refers to direct client care that involves professional activities on behalf of the patient, including:

- Assessment of the hearing, communication, or swallowing abilities and needs of the client.
- Recommending, developing, or implementing a treatment and/or management program based on the client's abilities and needs.
- Counseling and consulting with the families /caregivers and/or other parties or individuals directly associated with the client.
- Other client management activities such as discharge, referrals, follow-up, report writing, case conferences.
- Conducting research in speech-language pathology or audiology that involves the assessment or management of patients with communication disorders.

During the COVID-19 pandemic, mentees may include the following towards the 500 patient care hours that are required.

- Training in infection prevention and control practices, COVID-19 screening and use of personal protective equipment (PPE).
- Additional time spent during the provision of in-person patient care on infection prevention and control (e.g., screening of patients, hand hygiene, use of PPE, and equipment and area cleaning before and after in-person appointments)
- Aspects of assessment or treatment that are carried out using virtual care according to the standards of the College.

Submitting your mentorship contract – Once you have reviewed the six points outlined above with your mentor you can complete your contract, sign your declarations, and submit the contract to CASLPO.

E-mail your completed mentorship contract to mentorship@caslpo.com as one single document to avoid processing delays.

If you cannot e-mail your contract, you may fax documents to 416-975-8394.

We do not require an original copy of your mentorship contract; however, you must retain a copy for your own records. You will be charged a fee (\$50) if you request a copy of your mentorship contract from the College, according to CASLPO's By-law 2011-3, 9.4.1.

When your mentorship contract has been approved, College staff will contact you and your mentor by e-mail to provide login information for the online Mentorship Self-Assessment Tool (MSAT).

Always keep your employment information, e-mail, and other contact information up-to-date in the CASLPO registrant portal. You can access the registrant portal from CASLPO's main webpage (www.caslpo.com).

You are advised to provide a personal e-mail address so that you reliably receive important e-mail communication from the College.

CHAPTER 3: THE MENTORING PROCESS

MENTORSHIP REQUIREMENTS AT A GLANCE

During the Mentorship Period You Must:

1. Complete a minimum of 6-months of mentored practice
2. Complete 500 hours of [patient care](#)
3. Arrange 48 hours of mentored guidance, which your mentor provides
4. Complete the online Mentorship Self-Assessment Tool (MSAT), which includes a sequence of sections and tasks

THE MENTORSHIP SELF-ASSESSMENT TOOL (MSAT)

The MSAT is an online tool based on the Self-Assessment Tool (SAT) that General registrants complete annually for the Quality Assurance Program. In addition, the MSAT is an interactive interface that allows you and your mentor to log in and see each other's input, including evidence that you upload to demonstrate that you meet standards, as well as both your and your mentor's comments and your exchange of ideas.

After the College receives and verifies your mentorship contract, a link will be sent to you and your mentor so that you can log in and begin using the MSAT. Information about the MSAT is also on the CASLPO website [here](#).

YOU WILL USE THE MSAT TO DO THE FOLLOWING:

1. Evaluate yourself on the professional practice standards of the College (self-assessment).
2. Enter comments to explain how you meet each of the indicators under each standard category. You can also enter questions in the comment box for your mentor to review.
3. Upload evidence of compliance to show that you are meeting the standards.
4. Formulate 3 learning goals after the midterm evaluation.
5. Document learning activities that you complete to meet your learning goals.
6. Review your midterm and final evaluation reports before they are submitted by your mentor via the MSAT to the College on the indicated due dates.

YOUR MENTOR WILL USE THE MSAT TO DO THE FOLLOWING:

1. Evaluate your practice based on the professional practice standards of the College.
2. Review your comments and respond to your questions within the MSAT.
3. Review your uploaded evidence of compliance with the indicators and standards.
4. Help you to determine and prioritize your learning goals.
5. Review your learning goals, the learning activities you complete to accomplish your goals and approve three goals as complete.

6. Complete the midterm and final evaluation reports and submit them to CASLPO via the MSAT by the indicated due dates.

You and your mentor will be able to refer to instructions within the MSAT if you need help to navigate and use the online tool. Links are also provided within the MSAT to a detailed Guide with screen shots to help you.

THE STEPS FOR MENTORING

During your mentorship period, your mentor's role is to:

- Provide general support and guidance to help you comply with the College's professional practice standards.
- Provide general guidance around professional practice issues.
- Evaluate your clinical decision-making using the Clinical Reasoning Tool (CRT) to ensure that your decisions are based on sound clinical logic.
- Encourage you to continually reflect on your practice to ensure you meet standards.
- Confirm to the College, through completion of the MSAT and submission of a midterm and final report, that you meet the minimum standards of practice during your mentorship period.

The Professional Practice Standard Categories and the performance indicators for each category are listed in the Mentorship Self-Assessment Tool (MSAT) in the "Professional Practice Standards and Indicators" section. Your mentor may guide you to resources, for example on CASLPO's website, or to other educational opportunities to help you develop your skills, understand the standards, and apply them in your daily practice.

THE CLINICAL REASONING TOOL (CRT)

The Clinical Reasoning Tool (CRT) is a required component of the mentorship process.

Clinical reasoning is an essential competency for SLPs and audiologists at the beginning and throughout their careers. Reflecting on how clinical reasoning guides clinical and professional decisions is an integral component of quality practice that has been established across many health care professions.

HOW TO USE THE CRT DURING MENTORSHIP

A version of the CRT has been developed for the Mentorship Program. Links to the Mentorship version of the CRT are provided on the Mentorship Program [webpage](#), in the MSAT under "Mentee Resources" and "Mentor Resources" as well as in the "Midterm Mentor Report & CRT" section of the MSAT .

The CRT is structured to support mentors in assessing your clinical decision making through a guided conversation. It consists of a set of discussion questions designed to help you reveal why you did what you did with a particular patient and to encourage reflective practice.

The College encourages you and your mentor to become familiar with the CRT early during the mentorship period and to use it regularly as a tool to help guide your discussions of clinical cases throughout your mentorship period.

Mentors are required to review two patient cases using the CRT with you at or by your midterm evaluation meeting and to indicate that they have done so in your midterm report.

Using the CRT for the Midterm Evaluation

- Select a patient case to discuss with your mentor using the CRT. You may select from the 5 patient records prepared for your midterm evaluation or a different case.
- Your mentor will select one patient case, either from the five prepared records or a different case, to discuss using the CRT.
- Your mentor will use the [CRT](#) to guide the discussion about the selected cases.
- Your mentor may make some notes in the CRT about your clinical reasoning.
- Your mentor will consider this guided discussion using the CRT, along with other evidence, discussions and observation of your practice, to assign you a midterm rating on indicator **3.7** in the MSAT related to clinical reasoning.

Indicator 3.7, Under Patient Centred Practice:

I use clinical reasoning at every stage of intervention

Indicator 3.7 is a red flag indicator in the MSAT, meaning it is expected that the mentee will meet this practice standard by the midterm. See section on Red Flag Indicators (pg. 25).

Using the CRT for the Final Evaluation

If you receive a rating of “Meets the Standard” from your mentor for the clinical reasoning practice indicator by midterm, then you and your mentor are not required to complete the CRT again. You may choose to continue using the CRT on your own as a tool to help guide your clinical discussions.

If your mentor assigned you a midterm rating of “Needs Work to Meet the Standard” on the indicator for clinical reasoning, or if your mentor feels that they require additional evidence to confirm that you meet this standard of practice, then another formal discussion of two patient cases using the CRT must take place at your final evaluation.

You and your mentor will follow the same process as described above for the midterm evaluation.

In all cases, your mentor will be asked to comment on their observation of your demonstrated clinical reasoning in your interactions with them in the final evaluation report.

CHARTING THE MENTORSHIP PROCESS

Your 6-month mentorship can be divided into a first and second half, typically months 1-3 being the first half and months 4-6 being the second half.

The following charts outline the tasks that are to be completed by you and your mentor in each half of the mentorship period. Several tasks take place on an on-going basis over the course of your mentorship period. Those tasks are labelled “**on-going task**” in the chart.

By the end of your mentorship, you and your mentor will have completed the MSAT as well as the tasks outlined. Note that not all the tasks have to occur in chronological order. You and your mentor can use these charts as a guide to ensure that you get through all the tasks.

Inform your mentor when you have added comments or uploaded evidence in your MSAT so that your mentor knows to log in and review your input.

Similarly, mentors should notify the mentee when information has been entered in the MSAT from the mentor’s side for the mentee to review.

FIRST HALF OF MENTORSHIP (MONTHS 1-3)

CHECK	TASK	MENTEE TO DO	MENTOR TO DO
<input type="checkbox"/>	Log into the Mentorship Self-Assessment Tool (MSAT). Information on how to log in is on the CASLPO website.	Review the “Home” page and the Professional Practice Standards and Indicators section, as these are the standards that you will be evaluated on.	The mentor will log into the MSAT and review the standards and indicators that they are to assess and evaluate.
<input type="checkbox"/>	Establish a meeting date for the midterm evaluation meeting.	This date should be at least a week before the midterm evaluation report is due. You can check your report due date in your MSAT.	The mentor must agree upon the midterm meeting date and submit the midterm report on the indicated due date in the MSAT.
<input type="checkbox"/>	Review the Clinical Reasoning Tool (CRT) Mentorship Version. The document is in the MSAT under “Mentee Resources” or “Mentor Resources”. It is also	You are encouraged to use the CRT as a tool to discuss patient cases with your mentor on an on-going basis. Your mentor will more formally use the CRT by or at your midterm evaluation in order to assess your clinical	Mentors are encouraged to use the CRT on an on-going basis to discuss patient cases with the mentee. At or by the midterm evaluation, mentors are required to assess the mentee’s clinical reasoning through discussing at least two clinical cases with the

CHECK	TASK	MENTEE TO DO	MENTOR TO DO
	on the CASLPO Mentorship webpage.	reasoning skills and complete your Midterm Report.	mentee using the CRT to help guide the discussion. Mentors will consider the CRT discussions when assigning a rating for the mentee on indicator 3.7 about clinical reasoning in the MSAT.
<input type="checkbox"/>	Begin assessment on the professional practice standards and indicators in the MSAT by assigning yourself a rating. (on-going task)	Over time, assign yourself a rating on all the indicators in each category of standards. The possible ratings are: "I need work to meet the standard" OR "I meet the standard"	The mentor will periodically log into the MSAT to view the mentees assessment, comments and uploaded evidence. Over the first 3 months, mentors will determine their rating of the mentee's performance to meet the indicators in each category of standards.
<input type="checkbox"/>	Upload evidence of compliance in the MSAT (on-going task)	You are strongly encouraged to upload one piece of evidence for each indicator to demonstrate that you meet the standard.	The possible ratings are: "I need work to meet the standard" OR "I meet the standard"
<input type="checkbox"/>	Add comments or questions in the MSAT (on-going task)	A comment on each indicator is <u>mandatory for the mentee</u> . Your comments should explain how you meet the standard indicator in your practice. If you have additional comments or questions about a standard, then you can include them. Your mentor will be able to see your ratings and comments when they log into the MSAT.	Mentors can respond via their own comment boxes in the MSAT to the mentee's comments, questions, evidence and ratings of their own performance to meet standards. Mentors <u>must assign a midterm rating</u> for the mentee on all the standards in the MSAT by the midterm evaluation.
<input type="checkbox"/>	Receive guidance from your mentor and track the hours. (48 hrs. required) (on-going task)	As determined in your contract, you will receive mentored guidance hours. This is when you can discuss your practice, clinical cases and address	The mentor will provide guidance to the mentee using the methods of guidance and feedback agreed upon in the contract. Mentored guidance hours should be sufficiently

CHECK	TASK	MENTEE TO DO	MENTOR TO DO
		<p>questions that you have about standards.</p>	<p>spread over the mentorship period.</p> <p>Mentors may collaborate with another SLP or audiologist to provide a <u>portion</u> of the hours if they cannot provide all 48 hours. See Chapter 4, section on Collaborators, in the Mentorship Program Guidelines for further information.</p>
<input type="checkbox"/>	<p>Track your patient care hours. (250 hrs. required by midterm, 500 hrs. required by final)</p> <p>(on-going task)</p>	<p>Track your hours using a method that works well for your practice.</p> <p>There are additional requirements for tracking patient care hours if you have multiple jobs or practice settings (see Chapter 4 of the Mentorship Program Guidelines for more information on tracking your hours).</p>	<p>The mentor will review how the mentee has tracked their patient care hours and ensure that approximately 250 hours have been provided by the midterm evaluation.</p> <p>500 patient care hours, at minimum, must be completed by the end of the mentorship period.</p>
<input type="checkbox"/>	<p>Continually review and update your MSAT as you progress through the first half of your mentorship period.</p> <p>(on-going task)</p>	<p>By the midterm evaluation you should aim to assign yourself a rating on all the standards in the MSAT with a comment to explain how you meet the standard in your practice. You should also aim to upload as much evidence as possible.</p>	<p>Mentors will periodically log in and check the MSAT, providing feedback to the mentee along the way.</p> <p>Mentors must assign a <u>midterm rating</u> for the mentee on all the standards in the MSAT by the midterm evaluation.</p>
<input type="checkbox"/>	<p>Prepare 5 patient records for the record review at your midterm evaluation.</p>	<p>You will prepare five patient records for your mentor to review to ensure you are meeting record keeping standards.</p>	<p>Mentors will use the Checklist for Chart Review and Checklist for Financial Record (if appropriate) for the record review to ensure the mentee meets the minimum record keeping standards. These resources are available in the "Mentor Resources" section of the MSAT.</p>

CHECK	TASK	MENTEE TO DO	MENTOR TO DO
<input type="checkbox"/>	Use the Clinical Reasoning Tool (CRT) to discuss two clinical cases	Select two patient cases to discuss with your mentor using the CRT Mentorship Version. See section on the CRT in the Mentorship Program Guidelines.	The mentor will discuss two patient cases with the mentee using the CRT as a tool to guide the discussion. The mentor will consider this discussion when determining a rating for the mentee on indicator 3.7 in the MSAT. See section on the CRT in the Mentorship Program Guidelines.

MIDTERM EVALUATION

You and your mentor will meet at the midterm to do the following:

1. Review your MSAT including your ratings, comments, and evidence. Based on this review, your mentor will determine, or finalize, a midterm rating on all of the indicators in each practice standard category.
2. Your mentor will review 5 patient records that you have prepared. The mentor will use the checklist for chart review and checklist for financial record to ensure consistency. These checklists are available under the "Mentor Resources" tab in the MSAT.
3. By or before the midterm evaluation, mentors are expected to have discussed at least two clinical cases with the mentee using the Clinical Reasoning Tool (CRT). Mentors will consider these discussions to assign a midterm rating for the mentee on the clinical reasoning practice indicator (3.7) and are requested to comment on the clinical reasoning discussions in the Midterm Mentor Report.
4. Discuss your progress thus far during mentorship. Are there any areas where you need additional guidance or have questions? How many hours of patient care have you completed out of 500? How many guidance hours have you received out of 48?
5. Based on the discussion of your progress, and on your assessment in the MSAT, you will develop a minimum of 3 learning goals for the second half of your mentorship. Learning goals must focus on areas where you still need to meet a standard. For more information refer to the document called "How to Formulate Learning Goals".
6. Your mentor will complete your midterm report in the MSAT and provide comments on your progress thus far. You will have a chance to review the midterm report and provide your own comments before the report is submitted to CASLPO.

7. Your mentor will submit your midterm report to CASLPO via the MSAT by the due date indicated in the MSAT.

You will receive a confirmation e-mail from the College when your midterm report has been received. The College will follow-up with you and your mentor if there are any discrepancies in your report that need to be addressed.

SECOND HALF OF MENTORSHIP (MONTHS 4-6)

CHECK	TASK	MENTEE TO DO	MENTOR TO DO
<input type="checkbox"/>	Establish a meeting date for your final evaluation meeting.	This date should be a week before the final mentorship report is due.	Mentors must agree upon a final meeting date and submit the final mentorship report on the due date indicated in the MSAT.
<input type="checkbox"/>	Continue to review and update your assessment in the MSAT as you develop your ability to meet standards. Inform your mentor when you have updated your MSAT. (on-going task)	In the second half of mentorship, you must address indicators where you assigned yourself, or received, a rating of "needs work to meet the standard". There may be certain indicators where you have developed your competence and you may wish to upload additional evidence or write a comment to demonstrate this to your mentor.	Mentors will log into the MSAT periodically to review any updates to the mentee's self-assessment, comments, or evidence in the Professional Practice Standards and Indicators section of the MSAT.
<input type="checkbox"/>	Update your learning goals (on-going task)	At your midterm evaluation, you and your mentor will have discussed your learning goals. You can revise them in the MSAT as needed during the second half of your mentorship.	Mentors will assist the mentee as required with their learning goals and will review their learning goals for completeness before the end of the mentorship period.
<input type="checkbox"/>	Engage in learning activities to accomplish your learning goals (on-going task)	You can do various activities like reading articles, CASLPO documents or attending courses or seminars. Document your	Mentors will periodically review the mentee's learning goals and learning activities and guide them to resources as needed.

CHECK	TASK	MENTEE TO DO	MENTOR TO DO
		learning activities in the MSAT "Learning Goals" section.	
<input type="checkbox"/>	Ensure you will receive 48 hrs. of mentored guidance. (on-going task)	Adjust your plan accordingly. If an extension is required to complete the hours, fill out a Mentorship Extension Request Form. The form is in the "Resources" section of the MSAT.	Mentors must provide guidance using the methods of guidance and feedback agreed upon in the contract. Mentored guidance hours must total 48 hours over the 6-month period
<input type="checkbox"/>	Ensure you will complete 500 patient care hours. (on-going task)	Adjust your plan accordingly. If an extension is required to complete the hours fill out a Mentorship Extension Request Form. The form is in the "Resources" section of the MSAT.	Mentors must review how hours have been tracked and ensure that 500 patient care hours have been provided by the mentee by the end of the mentorship period.
<input type="checkbox"/>	Complete your MSAT	By your final evaluation meeting, you must complete all sections of your MSAT including: -self-assessment on the indicators in each standard category -A comment for each indicator with uploaded evidence -Your completed Learning goals and learning activities	Mentors will log into the MSAT to review and verify that all sections of the MSAT have been completed. Before the final evaluation meeting, the mentor will ensure that their ratings for each indicator represent their final rating for the mentee on the standards in the MSAT.
<input type="checkbox"/>	Prepare 5 patient records for the record review at your final evaluation	Use the checklist for chart review and checklist for financial record, available in the "Resources" section of the MSAT.	The mentor will review the charts prepared as part of the final evaluation using the checklist for chart review and checklist for financial record.
<input type="checkbox"/>	If required, use the Clinical Reasoning Tool (CRT) to discuss two clinical cases	If you received a rating of "Needs work to meet the standard", select two patient cases to discuss with your mentor using the CRT. See section on the	If the mentee received a rating of "Needs work to meet the standard" for the clinical reasoning indicator, the mentor will again discuss two patient cases with the

CHECK	TASK	MENTEE TO DO	MENTOR TO DO
		CRT in the Mentorship Program Guidelines.	mentee using the CRT as a tool to guide the discussion. The mentor will consider this discussion when determining a <u>final rating</u> for the mentee on indicator 3.7 in the MSAT. See section on the CRT in the Mentorship Program Guidelines.

FINAL EVALUATION

You and your mentor will meet for your final evaluation when your mentor will:

1. Review your MSAT, including your completed assessment, comments and evidence of compliance if applicable for each indicator. Your mentor will determine a final rating for all the indicators in each practice standard category.
2. Review your learning goals. Your mentor will approve your goals based on a review of the learning activities that you have completed to accomplish your goals.
3. Review 5 prepared patient records using the checklist for chart review and checklist for financial record. The checklists are available under the "Resources" tab in the MSAT.
4. Mentors are advised to use the CRT to discuss at least two additional patient cases for the final evaluation with a mentee who received a midterm rating of "Needs work to meet the standard". Mentors are requested to comment on the mentee's application of clinical reasoning in the final evaluation report.
5. Discuss your overall progress during the mentorship period. What did you learn? Was the process beneficial? Are there any areas where you still have questions? Do you have a plan in place to address any remaining questions or areas of concern?
6. Complete your final report in the MSAT. In the Final Mentor Report, the mentor will confirm that you have completed 500 hours of patient care and received at least 48 hours of mentored guidance during the mentorship period. Your mentor will indicate if they recommend you for a General Certificate of Registration with CASLPO based on observation of your practice and the evidence that you meet the practice standards of the College. You will have a chance to review the report and provide your own comments before the report is submitted.
7. Mentors will submit the final report via the MSAT by the due date indicated.

You will receive a confirmation by e-mail from the College when your final mentorship report has been received and approved by the College. If you complete the mentorship period successfully the e-mail will also outline the steps for your General registration. If there are any discrepancies in your final report that need to be addressed, you and your mentor will be contacted by College staff.

EVALUATION ON THE STANDARDS OF PRACTICE

The Mentorship Self-Assessment Tool (MSAT) outlines the 5 Professional Practice Standard categories for audiology and speech-language pathology. Below each category are several behavioural indicators that reflect the overall standard. The standards and indicators apply across all practice areas and settings.

THE 5 PROFESSIONAL PRACTICE STANDARD CATEGORIES:

1	Management Practices	Audiologists and speech-language pathologists manage their practice in an accountable manner.
2	Clinical Practice	Audiologists and speech-language pathologists possess, continually acquire and use the knowledge and skills necessary to provide high-quality clinical services within their scope of practice.
3	Patient Centred Practice	Audiologists and speech-language pathologists ensure their patients are treated with respect and are provided with sufficient information and opportunities to make informed decisions regarding intervention. In making clinical decisions, the patient's interests should be primary.
4	Communication	Audiologists and speech-language pathologists communicate effectively.
5	Professional Accountability	Audiologists and speech-language pathologists are accountable and comply with legislation.

RED FLAG INDICATORS

The MSAT has a red flag beside certain practice indicators. These are standards that you are expected to meet by your midterm evaluation. If not met by midterm, red flag indicators will automatically populate in the MSAT Midterm Mentor Report for your mentor to comment on. Red flag indicators must be prioritized as learning goals if they still need work by the midterm. Red flag indicators aren't necessarily more important than the other indicators, however, they have been identified as presenting a higher risk of patient harm if not met early on. Therefore, you are expected to meet these indicators early in your practice. In some cases, the College will reach out to you and your mentor to discuss red flag indicators that still need work.

MEETING THE STANDARD, OR NOT.

You and your mentor will each determine how well you meet the overall standard category by rating the behavioural indicators.

The MSAT has the following rating system:

MEETS THE STANDARD	NEEDS WORK TO MEET THE STANDARD	NOT APPLICABLE
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You will assess your compliance with each indicator by reflecting on your practice and determining a rating. If an indicator does not apply to your practice you and your mentor will indicate NA "not-applicable" and include a brief explanation.

By the end of your mentorship period, you must have a rating and comment for each indicator. You are strongly encouraged to upload evidence in your MSAT to demonstrate that you meet an indicator. Your comments, and potentially your evidence, are to demonstrate to both yourself and your mentor that you meet the standards overall.

Your mentor will evaluate you based on a review of the comments and evidence you provide in your MSAT, as well as the evidence obtained that may not take the form of documents (i.e., through discussion, guidance and feedback during mentorship, observation of your practice, etc.).

Although you will assess your own practice, your mentor's ratings will be the ones reflected in your midterm and final reports that are submitted to the College. Nonetheless, assessing your own competence is an essential skill in reflective practice that will serve you to ensure ongoing professional development for the remainder of your career.

Research indicates that self-assessment is enhanced and more accurate with external input. For this reason, your mentor's ratings are important in your evaluation. It is also important to understand why your mentor may rate you differently than you rate yourself.

GUIDELINES FOR MENTORS ON DETERMINING RATINGS FOR BEHAVIOURAL INDICATORS AND STANDARDS

The following guidelines are for the mentor but should also be used by the mentee when determining ratings for the indicators in each standard category in the MSAT.

These guidelines are not a checklist that cover all aspects to consider when determining ratings. Ratings should be based on the professional judgement of the mentor, taking into account comments and evidence provided by the mentee in the MSAT, as well as time spent

with the mentee discussing and observing their clinical practice and providing guidance and feedback.

<p>A RATING OF MEETS THE STANDARD SHOULD BE GIVEN IF:</p>	<ul style="list-style-type: none"> • The indicator is consistently met (i.e., the mentee meets the indicator most of, if not all, the time) • Evidence is well prepared or presented and understanding of the standards is well documented and/or demonstrated • The mentee independently recognizes areas requiring improvement • The mentee asks questions and seeks feedback and knowledge to improve their compliance with standards
<p>A RATING OF NEEDS WORK TO MEET THE STANDARD SHOULD BE GIVEN IF:</p>	<ul style="list-style-type: none"> • The indicator is not met on a consistent basis • Evidence is incomplete or needs improvement • The mentee does not independently recognize areas that need improvement • Attempts to improve compliance have not been effective • There is a lack of demonstrated effort to seek feedback or knowledge that would improve compliance with the indicator or the standard

You and your mentor should be honest and truthful when determining ratings on the indicators and standards of practice. The mentorship period is when you have maximum support to bring your practice up to standards. It's not unusual for a mentor to assign a "Needs Work" rating, or for you to assign yourself the same rating during the mentorship period. However, by the end of your mentorship, you must aim to meet all the indicators and, by extension, all the practice standards.

If you finish your mentorship period with a rating of "Needs Work" on an indicator, this may be a sign that you need to extend your mentorship, or it may be a matter requiring further discussion with your mentor or the College to ensure you have a plan to address the issue.

EVIDENCE OF COMPLIANCE

You must upload at least one piece of evidence for each indicator in your MSAT if it is required to demonstrate that you comply with the indicator and by extension the standards. If you are not uploading evidence into your MSAT for a particular indicator, then your comment must

direct your mentor to the physical evidence or must sufficiently explain how you meet that particular standard of practice.

The advantages of uploading evidence in your MSAT are to:

- Promote a more thorough understanding of the indicator
- Alert you to practice issues which may otherwise not be apparent
- Provide documentation of quality in your practice
- Introduce you to the process of compiling evidence for a [Peer Assessment](#). In Peer Assessments for General registrants, one piece of evidence per standard indicator is mandatory.

In general, evidence of compliance may come from several sources including:

- patient records
- memos and e-mails
- minutes from meetings
- organizational protocols or standards
- testimony of peers, performance appraisals
- interdisciplinary protocols, and
- article collections.

For certain indicators, specific evidence to demonstrate your compliance may be required.

For example, indicator 1.2 is, "*I maintain records, which accurately reflect the services provided.*" This is an example of an indicator where your evidence of compliance must be consistent with the [Records Regulation 2015](#). Thus, your evidence would specifically come from the patient record and would need to reflect how you meet this indicator.

In cases where evidence does not have to be as specific, you can be creative when selecting your evidence, as long as the evidence you select accurately reflects your practice.

A list of examples of evidence are listed in the MSAT under each indicator. Only one example of evidence is needed for each indicator. If the indicator does not easily lend itself to a tangible piece of evidence that can be uploaded, then a comment in your MSAT on how you have understood and complied with the indicator is sufficient. The comment must be informative enough for your mentor to be able to assign you a rating for the indicator.

SECURITY OF PERSONAL HEALTH INFORMATION (PHI) IN THE MSAT

Evidence files uploaded to the MSAT may include the personal health information of patients. The Information and Privacy Commissioner of Ontario (IPC) defines personal health information (PHI) as¹:

"identifying information" about an individual, whether oral or recorded if the information:

- relates to the individual's physical or mental condition, including family medical history
- relates to the provision of health care to the individual
- is a plan of service for the individual
- relates to payments, or eligibility for health care, or for coverage for health care
- is the individual's health number
- identifies a health care provider or a substitute decision-maker for the individual

Although the MSAT is secure, you must still take precaution to ensure that evidence you upload to the online tool remains secure.

Suggestions for Keeping your MSAT Secure:

- Always log out of your MSAT
- Never share your MSAT login information. Your mentor will have their own login.
- If you are saving information to a desktop or any other device before uploading, ensure that the information is deleted from the desktop immediately
- As an extra precaution, you may redact personal health information from your evidence files before you upload them to your MSAT

Evidence files uploaded into the MSAT will automatically be deleted when you complete your mentorship period and your mentorship reports have been submitted to the College.

Note: If you change jobs or change mentors during your mentorship, you will be required to delete evidence files that contain identifying patient information from the MSAT before you continue with your mentorship.

¹ From *Frequently Asked Questions, Personal Health Information and Protection Act, The Information and Privacy Commissioner of Ontario, 2015*

HOW TO FORMULATE LEARNING GOALS

In the second half of your mentorship period (i.e., months 4 to 6) you will finalize and work towards accomplishing a minimum of 3 learning goals.

You may choose to have more, but you are required to formulate and complete at least 3 learning goals.

Learning goals are finalized mid-way through your mentorship period because by this time the following will be true:

- You will be well into the mentoring process
- you will have some work experience
- You and your mentor will have completed a midterm assessment on the professional practice standards and indicators for each category
- Based on all of the above you will be better able to identify areas you wish to focus on for additional learning

Your learning goals will relate primarily to the practice standards in the MSAT and your current practice as an initial registrant of the College (i.e., the beginning stages of your career).

If you assign yourself or receive a “needs work” rating from your mentor for any indicator, that indicator will populate automatically in the Learning Goals section of the MSAT. You must formulate goals related to those indicators. The MSAT also has “red flag” indicators, which must be prioritized for your learning goals if you receive a rating of “needs work” on any of them.

If you receive a rating of “meets the standard” for every indicator, you are still required to develop three learning goals that relate to your professional practice in general.

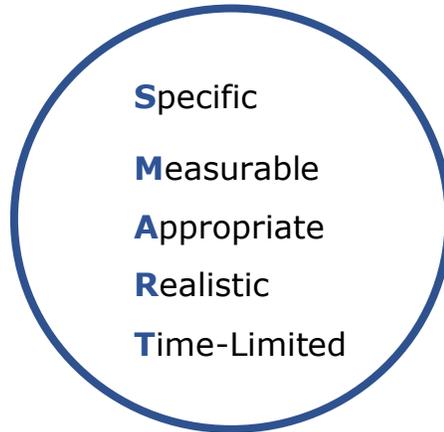
GUIDELINES FOR LEARNING GOALS

Learning goals should be formulated so that they:

1. Address information that you need to learn in order to comply with the College’s professional practice standards.
2. Define and specify the information to be learned and incorporate the purpose of the learning.
3. Include sufficient detail to determine if the learning objective was met.
4. Relate to your current clinical practice.
5. Refer to a learning activity.

SMART" GOALS

The College recommends the **SMART goal methodology** as best practice. You are encouraged to create learning goals that are:



1. SPECIFIC GOALS

Clearly define what is to be learned and the purpose for your learning.

The pulldown menus in the Learning Goals section of the MSAT give you choices to help you develop a specific goal statement that articulates what you want to learn and why you want to learn it:

- To learn more about ... in order to ...
- To acquire knowledge of ... to provide ...
- To further knowledge of ... to ensure ...
- To keep current with ... to improve ...

Examples of **Specific** Learning goals

<p>Vague: "To learn more about stuttering"</p>	<p>Specific: "To learn about a range of stuttering treatment procedures for children by attending a case conference on April 5th in order to improve the effectiveness of stuttering intervention I use in the school setting."</p>
<p>Vague: "To learn more about teaching and patient counseling"</p>	<p>Specific: "To further knowledge about adult learning styles by reading a book chapter on adult learning by September 3rd to ensure I incorporate the most effective method of conveying information to my adult patients."</p>

2. MEASURABLE GOALS

Effective continuing education requires that you return to your learning goals at the end of the mentorship period to measure the effectiveness of your goal and learning. The MSAT provides you with two forms of measurement:

1. PROGRESS TO MEETING MY GOAL
2. IMPACT ON MY PRACTICE

As you reflect on the learning you have done during the mentorship period you can determine whether you have made progress to meeting your goal by selecting from the pull-down menu:

None Minimal Moderate Significant

You can also measure if the learning has had an impact on your role or responsibilities by selecting:

None Minimal Moderate Significant

Devise goals that allow you to clearly judge how much progress you have made. You may decide to adjust your goal to make it more easily measurable, or to create a new goal that is more relevant in your current clinical practice situation.

3. APPROPRIATE GOALS

Appropriate goals relate to your area of practice and are attainable. There should be a clear relationship between your goals and the area in which you work, be it clinical, educational, research, or a combination. Practice-driven goals will improve your quality of service to the public.

Your goals should challenge you to learn something specific and important to your practice. Avoid ambiguity, which often makes goals too ambitious and impossible to achieve.

Examples of **Appropriate** Learning Goals

Vague: "To learn more about Autism"	Clear: "To learn more about behaviour modification techniques with Autism Spectrum Disorder by reading the article by Smith & Smith by May 2 nd and discussing it with my mentor to improve my therapy approach with patients who exhibit negative behaviours."
Vague: "To learn more about single-sided hearing loss"	Clear: "To further knowledge in inferential statistics by watching a webinar on December 9 th in order to judge the effectiveness of CROS hearing aid fitting methods that I currently use for patients with single-sided hearing loss."

4. REALISTIC GOALS

It's important to develop goals that you can achieve by the end of your mentorship period. To make a goal more realistic you may have to break it down into smaller chunks or milestones. You can always carry-on with goals that have several milestones to be accomplished after your mentorship period.

When considering if a learning goal is realistic ask yourself three things:

- 1) Can I achieve this goal in the next 3 months?
- 2) Does this enhance my learning at my current career-stage?
- 3) Is it in my area of practice?

Examples of **Realistic** Goals

<p>Vague: "To keep current with stroke research"</p>	<p>Clear: "To further my knowledge in the latest evidence-based research on dysphagia screening by reading the article by Smith et al., 2020 by the end of April to ensure that I am using the most effective dysphagia screening tool for stroke patients."</p>
<p>Vague: "To keep current with research on dementia and hearing loss"</p>	<p>Clear: To learn more about mild cognitive impairment and untreated hearing loss by reading the articles by Lin et al., 2019 and discussing the major findings with my colleagues at our meeting in Feb. in order to improve my counseling approach with patients and families".</p>

5. TIME-LIMITED GOALS

You have until the end of your mentorship to achieve three learning goals. Your goals should push you to do better and learn something in the process, but not be a stressful or unachievable endeavor.

If you feel that you still need further learning in order to meet a goal, you can carry that goal over to the next year when you will be a General registrant of CASLPO.

However, keep in mind that you must accomplish at least three goals during your mentorship period and prioritize and meet the red flag indicators by the end of your mentorship.

LEARNING ACTIVITIES

In the months leading up to your final evaluation with your mentor, you will engage in learning activities to achieve your learning goals.

Learning activities must fall into one of the following headings:

1. **Courses Taken** – Any type of workshop, distance education initiatives (such as web-based e-learning), lecture, or in-service education.
2. **Self-Study** – Any type of goal-directed self-study that involves new learning such as reading, material review, research article or chapter reviews, reading CASLPO documents. These learning activities must:
 - a. Be related to the learning goal; and
 - b. Be specified in the learning activity portion of the MSAT
3. **Clinical Guidance Activities** – This includes study groups, discussion with colleagues about clinical practice matters.
4. **Contributions to the Profession** – Committee work, such as professional association committee activity, involvement in clinical research projects, presentations given.

The learning goals section of the MSAT includes an area for you to describe your learning activities. You can also upload documentation of the learning activity, for example, a certificate you received after attending a course or webinar.

Based on the learning activities you complete you will indicate your progress to meet a specific learning goal and the impact of the learning activity on your practice. Progress and impact are a way of measuring your goals, and you indicate progress and impact using the following scale:

None Minimal Moderate Significant

There is no requirement that your progress and impact ratings be at any specific level; there is no right answer. It may be difficult, at this stage, for you to anticipate the progress and impact of your learning on your clinical practice. However, evaluating the effectiveness of your learning will help you determine if your goals and learning activities were successful or not. This can also help you determine if you need to change your plan for learning or if you need to carry a learning goal forward.

Learning goals define the learning. Learning activities provide the means to meet your learning goals.

EXAMPLES OF LEARNING ACTIVITIES THAT SHOULD NOT BE INCLUDED:

- Setting up an office
- Writing advertisements for private practice
- Sending letters to potential referral sources and patients

- Using volunteers to help with record management and filing
- Using specific equipment or therapy and testing procedures
- Increasing compliance with documentation requirements
- Administrative staff meetings that do not involve an educational component
- Any team building activities or social activities that do not involve clinical or professional practice (e.g., yoga courses for personal relaxation)

CHAPTER 4: UNUSUAL CIRCUMSTANCES IN MENTORSHIP

Circumstances may arise during your mentorship period that result in unusual or atypical situations. This chapter includes information on what to consider, and in some cases what to do, when circumstances arise during your mentorship that are unusual.

EXTENDING YOUR MENTORSHIP PERIOD

Your mentorship period is calculated to be six months from the start date you indicate on your mentorship contract. The 6-month period for mentorship is a legislated requirement ([ONTARIO REGULATION 21/12](#)).

Your mentorship cannot be shorter than 6 months, but it may be extended.

If you work part-time, for example, you may find that you will need more time to complete the requirements for mentorship, including your 48 hours of mentored guidance and 500 hours of patient care.

The College encourages you to complete your mentorship within the allotted 6-month period. However, your mentorship may be extended for up to 24 months from the date you became initially registered.

A mentorship extension must be requested in writing.

If you require an extension, fill out a Mentorship Extension Request Form and e-mail it to mentorship@caslpo.com **at least 30 days before** the scheduled end of your mentorship period. The College will follow-up with you regarding your request. Extension request forms are in the MSAT under "Mentee Resources".

CHANGING JOBS DURING THE MENTORSHIP PERIOD

The College recommends that you attempt to find a job that will provide a mentor and sufficient working hours to complete the mentorship requirement in one practice setting in 6-months. However, it is understood that this situation is sometimes challenging to arrange.

What to do if you change jobs during your mentorship period:

1. Inform your mentor when you have accepted a new position.

2. Determine if the mentoring process can continue with your current designated mentor. Your designated mentor at the time of the job change can continue mentoring you, if this is agreeable to you, your mentor and your new employer.
3. If it is not feasible to continue with the same mentor, then your mentorship contract will be discontinued. You must find a new mentor and submit a new mentorship contract to the College within 30 days of starting your new position.

You must inform your new employer that you are required to complete your mentorship as an initial registrant of the College and that you cannot practice as an SLP or audiologist without a mentor in place.

4. If you change mentors due to a change in employment the College will require a written statement sent to mentorship@caslpo.com from your first mentor about the progress of your mentorship prior to approving a new mentorship contract.

Depending on how far along you are with your mentorship, the written statement from your mentor may be your midterm evaluation report submitted through the MSAT. If your mentor is not in a position to complete your midterm report, then they may provide a written statement of your progress that must include:

- a) The number of months/weeks of mentorship completed
- b) The number of mentored hours completed
- c) The number of patient care hours completed so far during your mentorship
- d) A brief statement regarding the progress of your mentorship period

The College will review the information provided to determine the number of hours and weeks of mentorship left to complete to satisfy CASLPO's requirements. The College will also facilitate the new mentor's access to the MSAT and help determine if any of your uploaded evidence of compliance in the MSAT must be removed for patient confidentiality before you continue with your mentorship in a new employment setting.

5. Update your practice location information in the CASLPO registrant portal.

CHANGING MENTORS

Situations may arise where you need to change mentors during your mentorship period. This could occur, for example, if your designated mentor goes on leave, or if your mentor for some other reason cannot continue with mentoring.

What to do if you change mentors during your mentorship period:

1. Speak to your employer about securing a new mentor

2. If your employer cannot provide a new mentor, contact the College
3. If the new mentor is an SLP or audiologist who is outside your primary employment setting, then your employer will need to understand the requirements of the mentorship and allow the new mentor to view your patient records, or maybe visit you on site, for your midterm and/or final evaluation. ([See Chapter 2, section on Distance Mentoring](#))
4. Once you have secured a new mentor, e-mail mentorship@caslpo.com with your new proposed mentor's name and CASLPO registration number.
5. When your new mentor has been approved by CASLPO, update your mentorship contract with the new mentor's information and submit it to the College. Remember that your new mentor must meet the [criteria for mentors specified in Chapter 2](#).
6. When your new contract has been submitted, the College will grant your new mentor access to the online Mentorship Self-Assessment Tool (MSAT).

MULTIPLE JOBS DURING MENTORSHIP

The College recommends that you attempt to find a job that will provide a mentor and sufficient working hours to complete the mentorship requirements in 6-months in one setting. This provides consistency for you and your mentor. However, multiple jobs are becoming more common in some employment markets.

What to do if you have multiple jobs during your mentorship period:

1. Inform the College that you will have multiple jobs and update your practice locations in the registrant portal.
2. Inform your mentor that you will have multiple jobs
3. If you intend to count hours worked in a secondary employment setting towards your 500 hours of patient care, then you must keep track of your hours. Use the Patient Care Hours Tracking Form in your MSAT and do the following:
 - Document the number of patient care hours completed in each secondary employment setting
 - Document the name and contact information of a registrant of the College, or another professional, at the secondary employment setting who can verify that you have completed the hours
 - Provide this documentation to your designated mentor. Your mentor may choose to contact the other professionals to verify your hours before they complete your midterm and final evaluations.

You are required to have one designated mentor for your primary employment setting. Multiple mentors are not permitted. Your designated mentor must be aware of the work you are doing at additional employment settings.

Example: You work for a private practice as your primary employment and have a designated mentor for this setting. You decide to take on a second position with a school board part-time. You do not require a separate mentor for the school board setting. Your designated mentor at the private practice can discuss your work at the school board with you to ensure that you are meeting the practice standards of the College in each setting where you practice.

Your mentor does not need to have experience in every area of practice you may work in. They can still evaluate whether you meet the practice standards of the College based on the hours of guidance and feedback they will provide.

Your mentor is responsible for assessing your practice and submitting your midterm and final evaluation reports to the College. If you have multiple jobs, you must be prepared to provide your mentor with any information that is useful for a fair and accurate evaluation of your practice. This includes putting your mentor in contact with other professionals to discuss your work if required.

COLLABORATORS FOR MENTORED GUIDANCE

Your mentor is responsible for assessing if you meet practice standards and recommending you for General registration with the College. Therefore, it is preferred that your designated mentor provide all 48 hours of mentored guidance, which is approximately 2 hours per week.

The College acknowledges that in certain practice environments it may be difficult for one designated mentor to provide all 48 mentored guidance hours.

If your designated mentor is unable to provide you with 48 mentored guidance hours, your mentor may collaborate with other audiologists or SLPs to provide the guidance.

Collaborators for your mentored guidance hours are permitted under the following conditions:

- Collaborators for mentored guidance must be SLPs or audiologists who meet the [criteria](#) for mentors

- Your designated mentor must organize and coordinate the mentored guidance hours that you will receive from other College registrants, whether these hours will be at your primary employment setting or at a secondary employment setting.
- The name, registration number, and contact information of each registrant of the College who is a collaborator must be indicated on the Mentorship Collaborator Form and submitted with your mentorship contract.
- Your mentor must provide some if not most of the guidance. All 48 hours cannot be delegated to other College registrants.
- You must document the hours of guidance you receive from collaborators using the Mentored Guidance Hours Tracking form in your MSAT under “Mentee Resources”.
- Your mentor is responsible for consulting with the collaborators they have assigned to provide guidance before determining your ratings on the practice standards and submitting the midterm and final evaluation reports.

Example: Your primary employment setting is a hospital department that has multiple audiologists or SLPs working on the team. The clinic is very busy. There is limited time for report writing and planning. Your designated mentor finds it difficult to provide 2 hours per week of mentored guidance in this setting. Your mentor can request other audiologists or SLPs on the team to collaborate and provide a portion of your mentored guidance. This must be coordinated by your mentor and your mentor still must provide you with guidance. Your mentor will consult with the collaborators regarding your practice before evaluating you on practice standards in the MSAT and before submitting your mentorship reports to the College.

INDEPENDENT PRIVATE PRACTICE DURING MENTORSHIP

You must have proof of employment in Ontario and the name of your mentor in order to be initially registered with the College. Thus, sole or independent private practice cannot be your primary employment during the mentorship period.

The College recommends that you work within an established clinical setting during your mentorship period. Independent private practice is challenging. In established agencies, procedures and protocols are often in place that help you address and meet standards, both as an employee of the agency and as a registrant of CASLPO. In sole or independent private practice all the responsibilities fall on you alone.

The mentorship period is intended to be a time when you will receive support to ensure you meet the College’s practice standards. It is helpful for you to first have work experience and guidance from a mentor to build your professional skills and confidence before you engage in independent private practice.

If you wish to supplement your income during your mentorship period by engaging in a small amount of independent private practice, then you may do so but only in addition to your primary employment.

If you intend to work in independent private practice during the mentorship period, then you must ensure the following:

- Your mentor must agree to provide mentored guidance hours for the sole private practice setting.
- Your mentor must review patient records from the private practice setting for your midterm and final evaluation.
- You must develop learning goals during your mentorship related to meeting regulatory requirements in independent private practice. The College has several documents related to private practice that you must review.
- You must keep track of the patient care hours you provide in the private practice setting using the Patient Care Hours Tracking Form and provide this to your mentor for evaluation purposes.
- During your mentorship, the majority of your patient care hours must come from your primary employment setting. You must ensure that you are not providing more patient care hours in the sole private practice setting.

If you cannot be mentored for independent private practice, then you cannot engage in this type of work during your mentorship period.

LEAVE OF ABSENCE DURING MENTORSHIP

If for any reason you must take a leave of absence while you are in your mentorship period, the College advises that you do the following:

- Notify your mentor of the leave of absence
- E-mail mentorship@caslpo.com to notify the College of your leave of absence

CASLPO will consider mentorship extensions related to a leave of absence on a case-by-case basis.

RESOLVING CONFLICTS DURING MENTORSHIP

If a significant conflict occurs between you and your mentor, the College advises that you immediately attempt to resolve the conflict directly.

Suggested Steps to Attempt to Resolve Conflict:

1. Identify and define the issues
2. Identify common goals
3. Generate workable solutions
4. Choose and implement the best solution
5. Evaluate by follow-up.

If a direct attempt to resolve a conflict is ineffective, the next step is to turn to the third-party individual identified in your mentorship contract to assist with conflict resolution. If there is still no possible resolution, you and your mentor should contact the College together, as it may be necessary to discontinue the mentorship contract.

If the mentorship contract is discontinued and your employment will continue, it will be necessary for you to find a new mentor (see the section on [Changing Mentors](#) in this chapter).

If your employment situation changes then contact the College to discuss the next steps.

COMPENSATION FOR MENTORS

Employing organizations may choose to compensate mentors for taking on the mentoring role and responsibility. However, as an initial registrant (i.e., mentee), you are prohibited from compensating your mentor directly for mentorship, as this is a conflict of interest.

OTHER CHALLENGES ARISING DURING MENTORSHIP

If for any reason you or your mentor encounter any problems or obstacles to the successful completion of your mentorship period, we encourage you to contact the College as soon as possible for assistance. Don't wait until the end of your mentorship to address the issue.

AN UNSUCCESSFUL MENTORSHIP

In the event that you come to the end of your mentorship and your mentor does not recommend you for General Registration and has identified areas where you do not meet the standards of practice, the College may require you to do one or more of the following:

- Extend the mentorship period
- Repeat the mentorship period
- Find a new mentor
- Undergo additional assessment and provide evidence of your competence to practice
- Sign an Acknowledgement and Undertaking

CHAPTER 5: I'VE COMPLETED MY MENTORSHIP, WHAT'S NEXT?

Successful completion of your mentorship means that the following has occurred:

- 1) You have completed at least 6-months of mentored practice
- 2) Your mentor has provided at least 48 hours of mentored guidance
- 3) You have provided at least 500 hours of patient care as defined in this Guide
- 4) You and your mentor have completed the Mentorship Self-Assessment Tool (MSAT) and all the required sections and components (e.g., record reviews, clinical reasoning tool and submission of the mentor reports)
- 5) Your mentor has recommended you for General Registration with CASLPO

You will be contacted by e-mail with the steps for obtaining your General certificate of registration when your final mentorship evaluation report has been approved by the College.

GENERAL REGISTRATION WITH CASLPO

When you have successfully completed your mentorship period, your registration status will be changed to "General" and you will receive an email notification from CASLPO. This is assuming that there are no unresolved terms, conditions or limitations on your Initial certificate of registration. If there are unresolved items then these may need to be completed before you are changed to "General" status.

MAINTAINING YOUR GENERAL REGISTRATION WITH CASLPO

Once you are registered as a General registrant with CASLPO, there are conditions that you must meet going forward to maintain your General status.

CONDITIONS OF GENERAL REGISTRATION:

1. A General Registrant shall provide **750 hours** of [patient care](#) or related work in audiology and/or speech-language pathology **during every three-year period** that begins on the day that the registrant is issued a General certificate of registration.
2. A General Registrant shall immediately inform the Registrar in writing in the event that he or she ceases to be a Canadian citizen or permanent resident of Canada or to have authorization under the *Immigration and Refugee Protection Act* (Canada) permitting the registrant to engage in the practice of the profession.

If a General registrant fails to meet the condition of providing 750 hours of patient care or related work in audiology or speech-language pathology, the Registrar may refer the registrant for a peer and practice assessment.

If a General registrant ceases to be a Canadian citizen or permanent resident of Canada, or to have authorization under the *Immigration and Refugee Protection Act (Canada)* permitting the registrant to engage in the practice of the profession, the Registrar may give the registrant notice of intention to suspend the registrant and may suspend the registrant's certificate of registration within 30 days after notice is given.

WALL CERTIFICATE AND REGISTRATION CARD

A wall certificate will be issued to you upon request when you have successfully completed your mentorship and your registration status as a General registrant has been confirmed. You may download an updated registration card from the registrant portal after your status has been changed to General.

QUALITY ASSURANCE (QA) PROGRAM REQUIREMENTS

When you become a General registrant on-going participation in CASLPO's Quality Assurance Program will be required.

Important aspects of CASLPO's Quality Assurance Program are:

1. The online Self-Assessment Tool (SAT), continuing education and Continuous Learning Activity Credits (CLACS), and
2. The [Peer Assessment Program](#).

THE GENERAL REGISTRANT SELF-ASSESSMENT TOOL (SAT)

The Self-Assessment Tool (SAT) for General and Academic registrants contains the same professional practice standards and behavioural indicators as the Mentorship Self-Assessment Tool (MSAT).

You are not required to fill out or submit the General registrant SAT to CASLPO during the same year that you completed your mentorship.

Between January 1st and January 31st of the year following your mentorship, you will be required to fill out and submit the following sections of the General registrant SAT:

- Practice Description
- Professional Practice Standards and Indicators
- A minimum of 3 learning goals

learning activities are not required, as those will occur throughout the ensuing year and will need to be reported the following year as Continuous Learning Activity Credits (CLACS)

PEER ASSESSMENT PROGRAM

General registrants are randomly selected for peer assessment each year. This is a process whereby a peer (audiologist or SLP) reviews your SAT with your evidence of compliance, learning goals and learning activities. The results of a peer assessment are reviewed by the Quality Assurance Committee.

Your mentorship period covers these facets so you will be familiar with the process if you are ever randomly selected by the College for peer assessment later in your career as a General registrant. Detailed information about CASLPO's Quality Assurance Program can be found on the College's website.

After you complete your mentorship you will not be selected for peer assessment for the first three years as a General registrant. Your name will go into the pool for random selection at the beginning of your fourth year of practice.