



# MENTORSHIP GUIDANCE CONTRACT

SECTION 1 PRACTICE INFORMATION		
INITIAL PRACTICE REGISTRANT		
First Name <b>Jane</b>	Last Name <b>Doe</b>	
Res. Telephone <b>416-555-5555</b>	Bus. Telephone <b>416-777-7777</b>	CASLPO Reg. No. <b>9999</b>
Primary Employment Setting:		
<input type="checkbox"/> Acute Care Hospital <input type="checkbox"/> Industry <input type="checkbox"/> Private Practice <input checked="" type="checkbox"/> <b>Adult Rehabilitation Centre</b> <input type="checkbox"/> Public Health <input type="checkbox"/> Specialized Centre <input type="checkbox"/> Children's Treatment Centre <input type="checkbox"/> Preschool Service <input type="checkbox"/> Supportive Living <input type="checkbox"/> Education <input type="checkbox"/> Long-term Care <input type="checkbox"/> Other <i>(Please specify)</i> <input type="checkbox"/> Home Care/SHSS <input type="checkbox"/> Mental Health		
Client Age Range: <i>(Please check more than one if applicable)</i>		Hours of Employment Per Week:
<input type="checkbox"/> 0-5 years <input type="checkbox"/> 6-11 years <input type="checkbox"/> 12-17 years <input checked="" type="checkbox"/> <b>18-64 years</b> <input checked="" type="checkbox"/> <b>65 plus</b>		I work <u>  35  </u> hours a week.
MENTOR		
First Name <b>Joe</b>	Last Name <b>Smith</b>	
Res. Telephone <b>905-888-8888</b>	Bus. Telephone <b>905-222-2222</b>	CASLPO Reg. No. <b>9998</b>

SECTION 2 PROPOSED INITIAL PRACTICE PERIOD		
Contract Start Date:	Contract End Date:	Duration of Contract:
<b>01 / 01 / 09</b> <small>DD MM YY</small>	<b>15 / 07 / 09</b> <small>DD MM YY</small>	<input checked="" type="checkbox"/> <b>24 weeks</b> <input type="checkbox"/> Other <i>(please specify)</i> _____

SECTION 3 TIME ALLOCATION
Number of mentored hours per week or per month <i>(Please circle to indicate if guidance is provided weekly or monthly)</i>
The IPR will be mentored <u>  2  </u> <b>hours per week/</b> per month.

FOR OFFICE USE ONLY	
Approval:	Date Approved:
Interim Evaluation Report Due Date:	Final Evaluation Report Due Date:
_____ <small>DD MM YY</small>	_____ <small>DD MM YY</small>

## SECTION 4 METHOD OF GUIDANCE

*Check all that apply*

- Observation of Initial practice Registrant with clients
- Clinical management discussions
- Reviewing written reports
- Administrative management discussions
- Review of videotapes or audiotapes of sessions
- Telephone conferences
- Other (please specify): \_\_\_\_\_

## SECTION 5 METHOD OF FEEDBACK

*Check all that apply:*

- Face to Face Meetings
- Telephone Conferences
- Email
- Written Communication
- Other (please specify): \_\_\_\_\_

## SECTION 6 GUIDANCE PLAN

### Professional Practice Standard 1 – Management Practices

Audiologists and Speech-Language Pathologists manage their practice in an accountable manner

- 1.1 The Initial Practice Registrant (IPR) has the criteria to begin and end intervention
- 1.2 The IPR maintains records, which accurately reflect the services provided.
- 1.3 The IPR performs controlled acts according to preferred practice guidelines and position statements
- 1.4 The IPR is accountable for unregulated personnel providing intervention under his/her direction
- 1.5 The IPR ensures that all equipment used in his/her practice is in proper working order and calibrated as required
- 1.6 The IPR follows health and safety procedures and practices.

MANAGEMENT PRACTICES – INDIVIDUAL GOALS	APPROACH
<b>To learn more about office administrative procedures and clinical management.</b>	<b>I will:</b> <ul style="list-style-type: none"> <li>○ <b>Review employer guidelines.</b></li> <li>○ <b>Review CASLPO's proposed regulation for records</b></li> <li>○ <b>Review health and safety policies.</b></li> </ul>

**Professional Practice Standard 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.

- 2.1 The IPR practices within the limits of his/her individual competence.
- 2.2 The IPR continually acquires knowledge and skills necessary to provide high quality service
- 2.3 The IPR utilizes intervention procedures based on current knowledge in the field of audiology and/or speech-language pathology and consideration of available evidence-based techniques.
- 2.4 The IPR utilizes intervention procedures that are appropriate to the abilities of the patient/client
- 2.5 The IPR utilizes intervention procedures that are appropriate to the cultural/linguistic background of the patient/client.
- 2.6 The IPR monitors, evaluates and modifies his/her intervention procedures based on patient/client outcome.

CLINICAL PRACTICES – IPR’S INDIVIDUAL GOALS	APPROACH
<p><b>To learn about a range of assessment and treatment procedures to improve my approach to fluency treatment.</b></p>	<p><b>I will:</b></p> <ul style="list-style-type: none"> <li>○ <b>Complete a web-based learning course</b></li> <li>○ <b>Complete a self-study program</b></li> </ul>

SAMPLE

**Professional Practice Standard 3 - Patient/Client Centred Practice**

Audiologists and Speech-Language Pathologists ensure that his/her patients/clients are treated with respect and are provided with sufficient information and opportunities to made informed decisions regarding intervention. In making clinical decisions, the patient/client's interest should be primary.

- 3.1 The IPR informs patients/clients of the benefits, limitations and potential risks of intervention
- 3.2 The IPR consults with a patient/client when establishing an intervention plan
- 3.3 The IPR sets intervention goals that describe realistic outcomes for patient/client.
- 3.4 The IPR respects each patient/client's decision to decline intervention
- 3.5 The IPR maintains patient/client confidentiality at all times.

PATIENT/CLIENT CENTRED PRACTICES – INDIVIDUAL GOALS	APPROACH
<p><b>To learn more about techniques to assist in maintaining client confidentiality in order to ensure that the sensitive nature of personal health information is respected.</b></p>	<p><b>I will:</b></p> <ul style="list-style-type: none"> <li>○ <b>Review PHIPA and PIPEDA guidelines.</b></li> <li>○ <b>Review resources provided by the Office of the Privacy Commissioner of Canada.</b></li> </ul>

PATIENT/CLIENT CENTRED PRACTICES – INDIVIDUAL GOALS CONTINUED...	APPROACH

**Professional Practice Standard 4 – Communication**

Audiologists and Speech-Language Pathologists communicate effectively and with sensitivity to the needs of his/her patients/clients.

- 4.1 The IPR communicates in a manner that facilitates patient/client comprehension and participation.
- 4.2 The IPR uses language that is appropriate to the age and cognitive abilities of the patient/client.
- 4.3 The IPR uses language that is appropriate to the linguistic and cultural background of the patient/client.
- 4.4 The IPR communicates constructively and effectively with his/her peers/team/co-workers.
- 4.5 The IPR communicates his/her professional credentials to his/her patients/clients and others

COMMUNICATION – IPR'S INDIVIDUAL GOALS	APPROACH
<b>To acquire knowledge about communication techniques in order to develop consultation skills to provide care where client perspective is reflected.</b>	<b>I will consult with my mentor and other colleagues</b>

**Professional Practice Standard 5 - Professional Accountability**

Audiologists and Speech-Language Pathologists are accountable and comply with legislation.

The IPR complies with Regulations, Preferred Practice Guidelines, Position Statements, Code of Ethics and Relevant Legislation.

PROFESSIONAL ACCOUNTABILITY – INDIVIDUAL GOALS	APPROACH
<b>To further knowledge of CASLPO's regulations, preferred practice guidelines, position statements, code of ethics and relevant legislation.</b>	<b>I will review the documents my desk reference</b>

## SECTION 7 INITIAL PRACTICE REGISTRANT'S DECLARATION

1. I understand that I will be assessed with respect to my compliance with the practice standards set out in the section 6 of the Mentorship Guidance Contract and will undertake to acquire the skills, knowledge and behaviour to demonstrate my competence to practice
2. I agree to comply with the regulations and policies associated with an Initial class certificate of registration.
3. I agree that I shall only practise under the mentorship of the person named in this contract.
4. I agree to obtain the approval of the College for any proposed changes to my mentorship guidance contract prior to the change occurring.
5. I agree to complete a Self Evaluation Form midway through the Initial Practice Period and review the results with my mentor.
6. I agree to collect evidence of compliance for my mentor's review.

*Jane Doe*

Signature of Initial Practice Registrant

*Dec 1, 2009*

Date

## SECTION 8 MENTOR'S DECLARATION

1. I agree that I will review the practice standards with the Initial Practice Registrant and identify the skills, knowledge and behaviour necessary with compliance the practice standards.
2. I agree to assess the Initial Practice Registrant to determine if they have the required skill, knowledge and behaviour to meet the practice standards and become a General member.
3. I agree to mentor the above named Initial Practice Registrant in accordance with the College regulations and policies regarding mentorship.
4. I agree to notify the College immediately if I am no longer able or willing to continue to fulfill my responsibilities as a mentor.
5. I agree to review the Initial Practice Registrant's progress and complete an interim evaluation report midway through the Initial Practice Period.
6. I agree to review the Initial Practice Registrant's progress and complete a final assessment report at the end to the Initial Practice Period.

*Joe Smith*

Signature of the Mentor

*Dec 1, 2009*

Date

## SECTION 9 INITIAL PRACTICE REGISTRANT AND MENTOR AGREEMENT

We agree to the following process:

1. To review the practice standards set out in the section 6 of the Mentorship Guidance Contract and identify areas requiring specific attention.
2. To develop an action plan to ensure that the Initial Practice Registrant gets advice and guidance in the areas of need to acquire the necessary skills, knowledge and behaviours for compliance.

*Joe Smith*

Signature of the Mentor

*Dec 1, 2009*

Date

*Jane Doe*

Signature of Initial Practice Registrant

*Dec. 1, 2009*

Date