



Psychology Scopes

Clinical Psychologist
Clinical Social Worker
Child Life Specialist
Speech Language Pathologist
Psychological Counsellor





Criteria for National Registration Clinical Psychologist

Criteria	The Clinical Psychologist
Definition	Clinical psychology practice is the professional application of clinical psychology theory and evidence based methods in assessment and treatment of psychological dysfunction and impairment including emotional and mental health disorders. Clinical psychologists are an integral member of interdisciplinary teams, providing comprehensive assessments and psychological treatment interventions.
Practice Settings	Clinical psychological services are provided in a variety of settings throughout the lifespan. These settings include, but are not limited to: Mental Health Primary Care Government Schools/Universities Medical Facilities Private Sector
Education	Master's Degree in Clinical Psychology
Scope of Practice	 The scope of clinical psychology practice involves but is not limited to: Clinical psychological assessments and diagnosis Clinical formulations and comprehensive written reports regarding assessments completed or tests administered The Formulation and implementation of psychological treatment plans based on evidence based theoretical frameworks Teaching and supervising more junior colleagues Developing psychologically minded services and supporting and supervising other members of the inter-disciplinary team in using psychologically based interventions. Individual therapy Family therapy Group therapy Psychological testing Education and training Program development Research
Licensure	The Clinical Psychologist must apply for certification through Qatar Council For Healthcare Practitioners (MOPH).





Experience	2 years post graduate clinical experience
Competency validation	Competency will be validated through the verification of education (degree), certificates and relevant clinical experience.
Other	(Refer to QCHP requirement for license Registration/Evaluation)
Requirement for	http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx
Evaluation &	
Registration	
Requirements for	Evidence of practice as a Clinical Psychologist in the period since obtaining last license.
License renewal	Evidence of engagement in regular professional clinical supervision.
	Evidence of maintained capability within the scope of practice for Clinical Psychology – CPD Portfolio.
	Proof of current employment in the respective field.
	Compliance with QCHP competency validation standards.
	(Refer to additional QCHP requirement for license Registration/Evaluation)
Note: Applicant with break from practice please see QCHP "Break from Practice Policy"	





Clinical Psychology Scope of Practice

INTRODUCTION

The clinical psychology scope of practice is based on a competency framework that comprises **professional ethics**, clinical practice, leadership and management, learning and management and research domains intrinsic to the role of the clinical psychologist. The scope also describes the professional roles and activities and practice settings for the clinical psychology profession. This document sets out the standards of proficiency required for safe and effective practice in the clinical psychology profession. They are the threshold standards necessary to protect members of the public. Once on the Qatar Ministry of Public Health for Health Professionals Register the licensed professional must continue to meet the standards of proficiency which relate to the areas in he/she works. Periodic updating of the scope of practice statement and standards of proficiency will be necessary as technology and perspective change.

Clinical Psychologist, as autonomous professionals, have the freedom to exercise their professional judgment and decision making, wherever they practice, so long as this is within the clinical psychologist's knowledge, competence and scope of practice. A licensed professional's scope of practice will change over time and the scope of a more experienced clinical psychologist may become narrower and more focused with increased specialization. A clinical psychologist's individual scope of practice may mean that she/he is able to continue to practice safely across the whole scope of the clinical psychology profession. However, as long as the professional practices safely and effectively within his/her individual scope and does not practice in areas she/he is no longer proficient to do so, no problems will arise. If a licensed professional moves outside of the traditional scope of practice of the clinical psychology profession such as occurs in extended scope practice the licensed professional is responsible for ensuring that this is within their knowledge, skills and expertise so that they continue to work safely, lawfully and effectively. The licensed professional must have evidence of advanced competencies in order to address responsibilities that extend beyond traditional boundaries of clinical psychology advanced practice.

STATEMENT OF PURPOSE:

The purpose of this document is to define clinical psychologists' scope of practice in Qatar to:

- (a) Describe the services offered by qualified clinical psychologists.
- (b) Define the professional accountability, required competencies, and scope of ethical and legal practice of the clinical psychologist in relation to patients, families, other members of the multidisciplinary team, community and society.
- (c) Serve as a reference for license regulating authorities and professionals governing healthcare.

DEFINITION OF CLINICAL PSYCHOLOGY:

Clinical Psychology is the study of the mind and behavior. The discipline embraces all aspects of the human experience — from the functions of the brain to the actions of nations, from child development to care for the aged. In every conceivable setting from scientific research centers to mental healthcare services, "the understanding of behavior" is the enterprise of psychologists. (APA)¹

Examples of the wide scope of services, clinical psychologist can help people include (BPS) 2,3:

- •Helping people to overcome depression, stress, trauma or phobias
- Easing the effects of parental divorce on children
- Speeding up recovery from brain injury





- •Helping to stop or prevent bullying at school or in the workplace
- Ensuring that school pupils and students are being taught in the most effective way
- Making sure that people are happy at work and perform to the best of their abilities
- •Helping the police, courts and prison service to perform more effectively
- •Helping athletes and sports people to perform better

PROFESSIONAL ROLES AND ACTIVITIES:

A Clinical Psychologist is a qualified health care professional who is responsible for assessment, intervention, program planning and implementation, regular review, discharge planning and carrying out related documentation using systematic clinical reasoning and decision making.

The clinical psychologist assumes responsibility for the delivery of all psychology services and for the safety and effectiveness of clinical psychology services provided. Clinical psychologists may practice at different levels of practice based on their competencies and job profiles^{4,5,6}.

Clinical Psychologist may work in the following and other specialty areas:

- Mental health
- Pediatrics- Developmental
- Geriatric/long term care
- Oncology and palliative care
- Community based rehabilitation
- Medical facilities
- Schools
- Home care
- Long term facility
- Trauma

Strategies/activities of clinical psychology practice include but are not limited to:

A Clinical Psychologist is a qualified professional with assessment, intervention, program planning and implementation skills necessary to caring out the following tasks:

- Provides specialist clinical psychological assessments and diagnosis for patients referred to the team
 based upon the appropriate use, interpretation and integration of complex psychological data from a
 variety of sources including psychological and neuropsychological tests, self-report measures, rating
 scales, direct and indirect structured observations and semi-structured interviews with patients, family
 members and others involved in the patient's care.
- Provides clinical formulations and comprehensive written reports regarding assessments completed or tests administered.
- Provides specialized clinical psychological input to the patients and families, including assessment results
 and proposed clinical psychological interventions for psychological, behavioral and learning challenges.
- Formulates and implements plans for the formal clinical psychological treatment and/or management
 of a psychological problems, based upon an appropriate conceptual framework of the problems, and
 employing methods of proven efficacy, across the full range of care settings.





- Implements a range of clinical psychological interventions, adjusting and refining psychological formulations drawing upon different explanatory models and maintaining a number of provisional hypotheses.
- Provide evidence-based interventions
- Evaluates and makes decisions about treatment options taking into account both theoretical and therapeutic models and highly complex factors concerning historical and developmental processes that have shaped the individual.
- Reviews relevant medical records to understand cases better.
- Provides specialist clinical psychological advice, guidance and consultation to other professionals contributing directly to patient's formulation, diagnosis and treatment plan.
- Keeps abreast with current literature.
- Provides individual, family and group therapy in variety of settings as needed. Makes sure that patient and family participation and input is integrated with the overall treatment plan.
- Maintains confidentiality with regards to information exchanged or received.
- Contribute to the development and articulation of best practices and standards of clinical psychology services
- Maintain the highest standards of clinical record keeping and report writing.

COMPETENCY FRAMEWORK

1 DOMAIN ONE: PROFESSIONAL AND ETHICAL PRACTICE

This domain defines the professional accountability and scope of ethical and legal practice of the clinical psychologist in relation to patients, families, other members of the multidisciplinary team, community and society.

1.1 Competency Standard 1.1: Accountability

Accepts accountability for own actions, and decision-making and for the related outcomes.

Performance criteria:

- 1.1.1 Works within the limits of own competence and the boundaries of personal and professional Scope of Practice.
- 1.1.2 Identifies opportunities for advocacy, health promotion and disease prevention.
- 1.1.3 Provides care without discrimination on any basis, with respect for the rights and dignity of all individuals.
- 1.1.4 Encourages and promotes appropriate stewardship of resources.
- 1.1.5 Avoids any activity that creates a conflict of interest or violates any Qatari laws and regulations.
- 1.1.6 Promotes the growth of the profession, and presents a positive image of Clinical Psychology to the community.

1.2 Competency Standard 1.2: Ethical Practice





Demonstrates integrity, accountability, honors the rights and dignity of all individuals, and pursues a quest for excellence in all professional activities that serve the best interests of the patient, society, and the profession.

Performance criteria:

- 1.2.1 Engages in ethical decision-making with respect to own professional responsibilities or where ethical issues affect healthcare delivery or clinical decision-making.
- 1.2.2 Acts as patient advocate, protecting the person's rights in accordance with Qatari law and organization specific terms and conditions.
- 1.2.3 Maintains patient confidentiality and makes every reasonable effort to ensure the security of written, verbal and electronic patient information.
- 1.2.4 Respects the patient's (including children and young people and their parents') right to be fully informed, establishing a context for self- determination, assent (children) and informed consent.
- 1.2.5 Acts sensitively and fairly giving due consideration to diversity, including cultural and religious beliefs, race, age, gender, physical and mental state, and other relevant factors.
- 1.2.6 Questions when appropriate, healthcare practice where the safety of others is at risk and where the quality of care warrants improvement; acts where the safety of care is compromised and where necessary, reports others who may be risking patient safety.
- 1.2.7 Demonstrates professional integrity and ethical conduct in matters where a conflict of interest could be construed, i.e. when advising on the use of drugs, products, devices or services (as per organizational approved policy and Code of Ethics and Professional Conduct for Psychologists*).
 *((Code of Ethics and Professional Conduct for Psychologists In State of Qatar must be developed))

1.3 Competency Standard 1.3: Legal Practice

Functions at all times in accordance with legislative, regulatory and policy guidelines relevant to clinical psychology practice in Qatar.

Performance criteria:

- 1.3.1 Practices in accordance with agreed policies and procedures that guide clinical psychology practice.
- 1.3.2 Practices in accordance with relevant State of Qatar laws and regulations that impact clinical psychology practice.
- 1.3.3 Maintains valid registration and licensure to practice in Qatar.
- 1.3.4 Recognizes and acts upon breaches of laws and regulations relating to the professional role and/or Code of Ethics and Professional Conduct for Clinical Psychologists*.
- 1.3.5 Maintains a professional portfolio including evidence of continued competence and improvement.

2 DOMAIN TWO: CLINICAL PRACTICE

As an autonomous healthcare profession, clinical psychology is practiced in partnership with members of the inter professional team, service users, support staff and others in order to deliver collaborative care across the healthcare continuum. Critical thinking, patient and environment assessment skills and evidence-based clinical practice guidelines enable clinical psychologists to autonomously develop and implement effective care plans, clinical psychology driven protocols, disease based clinical pathways and management programs.

2.1 Competency Standard 2.1: Provision of Care





Clinical Psychologists serve a diverse population and may function in one or more of a variety of activities. The practice of clinical psychology care includes but is not limited to assessment, program planning and intervention to allow service users to participate in everyday life activities and life roles.

Performance criteria:

- 2.1.1 Maintains the provision of clinical psychology care services that are safe, evidence based, preventative and restorative to the patient.
- 2.1.2 Keeps accurate, contemporaneous, comprehensive and legible records of patient care in accordance with applicable legislation, protocols and guidelines. This includes Qatar Ministry of Public Health requirements, Code of Ethics and Professional Conduct for Clinical Psychologists in Qatar and local guidance at a facility level.
- 2.1.3 Provides clinical psychology services including, but not limited to independent assessment and evaluation of patient needs and functional abilities using both standardized and non-standardized assessments.
- 2.1.4 Formulates and implements appropriate care plans based on assessment results, taking into account service users' values, beliefs and interests.
- 2.1.5 Implements appropriate action plans and interventions based on observed functional deficits, appropriate reporting or referral according to evidence based clinical care.
- 2.1.6 Evaluates intervention plans using recognized outcome measures and revise plans as necessary in conjunction with service users.
- 2.1.7 Provides health promotion and prevention activities as deemed clinically appropriate in order to remove barriers to independence, promote health and foster wellbeing.

2.2 Competency Standard 2.2: Patient Centered Care

The clinical psychologist is responsible for ensuring that the patient is at the center of all decisions about care wherever possible.

Performance criteria:

- 2.2.1 Understands the need to adopt an approach which centers on the patient and establishes appropriate professional relationships in order to motivate and involve the service user in meaningful occupation.
- 2.2.2 Uses formal (structured interview) or informal (conversational, narrative building) strategies to establish a comprehensive clinical psychological profile of the client. This should include an understanding of the values, beliefs and interests of the service user, their families and other appropriate parties.
- 2.2.3 Synthesizes information from the service users' clinical psychological narrative/profile in order to plan for future interventions and services.
- 2.2.4 Understands the need to provide service users and/or people authorized to act on their behalf with the information necessary to enable them to make informed decisions.
- 2.2.5 Provides appropriate education and training for patients, families and caregivers.
- 2.2.6 Works collaboratively with service users to set meaningful goals and outcome measures.
- 2.2.7 Uses approaches to intervention including creating or promoting, establishing or restoring, maintaining and modifying the skills, abilities and contexts that influence clinical psychological performance and engagement.





- 2.2.8 Understands the need to engage service users and care-givers in planning and assessing diagnostics, treatments and intervention in order to meet their occupational goals and needs.
- 2.2.9 Understands the therapeutic use of self, including one's personality, insights, perceptions, and judgments as part of the therapeutic process.

2.3 Competency Standard 2.3: Evidence-Based Practice

Integrates best available evidence, clinical audit and research into practice to ensure quality of provision.

Performance Criteria:

- 2.3.1 Utilizes current evidence-base, including recent research findings, and best available evidence to guide clinical psychology practice.
- 2.3.2 Incorporates credible critically appraised evidence into clinical psychology practice and when initiating change in practice.
- 2.3.3 Participates in the formulation of evidence-based practice based on best available credible research and/or national and international professional consensus, guidance and audit.
- 2.3.4 Gathers and uses information, including qualitative and quantitative data in order to evaluate outcomes for services users engaged in clinical psychology care.
- 2.3.5 Is aware of the role of audit and review in quality improvement and quality assurance.
- 2.3.6 Evaluates the efficacy and effectiveness of both new and established interventions and technologies using recognized outcome measures.
- 2.3.7 Participates in generating new evidence to improve quality of care through research, clinical audit and quality improvement programs.

2.4 Competency Standard 2.4: Communication and Teamwork

Uses communication skills to ensure that other members of the health care team, the patient and their family are and remain fully informed.

Performance Criteria:

- 2.4.1 Establishes relationships of trust, respect, honesty and empathy.
- 2.4.2 Gathers information about disease, but also about a patient's beliefs, concerns, expectations and illness experience.
- 2.4.3 Seeks out and synthesizes relevant information from other sources, such as patient's family, caregivers and other professionals.
- 2.4.4 Delivers information to patients and their families, colleagues, and other members of the healthcare team, in a way that is understandable, and that encourages discussion and participation in decisionmaking.
- 2.4.5 Demonstrates cultural competence across all patient groups.
- 2.4.6 Consistently and clearly communicates relevant, accurate and comprehensive information in verbal, written and electronic forms in a timely manner to ensure the delivery of safe, competent and ethical care.
- 2.4.7 Understands how communication affects engagement of service users.
- 2.4.8 Able to modify means of communication to take into account important variables such as age, capacity, learning and physical ability.





- 2.4.9 Shows awareness of verbal and non-verbal communication and how this can be affected by factors such as age, culture, ethnicity, gender, socio-economic status and spiritual or religious beliefs.
- 2.4.10 Participates in building consensus and or resolving conflict in the context of patient care and the multi-professional team.
- 2.4.11 Engages proactively in teamwork and the team-building processes.
- 2.4.12 Works effectively with other professionals to prevent, negotiate and resolve inter-professional conflict.

3 DOMAIN THREE: LEADERSHIP AND MANAGEMENT

Exhibits leadership qualities required for the provision of safe, effective clinical psychology care. This domain includes concordance with the Code of Ethics and Professional Conduct and the healthcare organization's Code of Behavior as the operating frameworks.

3.1 Competency Standard 3.1: Leadership

Exhibits leadership qualities and manages clinical psychology care safely, efficiently and ethically.

Performance Criteria:

- 3.1.1 Applies clinical reasoning, critical thinking and problem solving skills in the provision, management and evaluation of care.
- 3.1.2 Manages self, and where appropriate assists others, to ensure effective workload prioritization and time management.
- 3.1.3 Provides feedback, offers suggestions for change and deals effectively with the impact of change on own practice, the team and/or on the organization.
- 3.1.4 Advocates for, and contributes to the creation and maintenance of a positive working environment and team working.
- 3.1.5 Participates in the mentorship and coaching of others maximizing the effectiveness of clinical psychology interventions, the provision of quality health care and the profession.
- 3.1.6 Acts as a role model for colleagues, students and other members of the healthcare care team by treating all with respect, trust and dignity.
- 3.1.7 Fosters the advancement of clinical psychology autonomy and accountability.
- 3.1.8 Promotes and maintains a positive image of clinical psychology.
- 3.1.9 Assumes leadership responsibilities, as appropriate, in the delivery of clinical psychology care.

3.2 Competency Standard 3.2: Quality Improvement and Safety

Ensures clinical psychology practice meets organizational quality and safety standards and guidelines and participates in continuous quality improvement.

Performance criteria:

- 3.2.1 Practices in accordance with approved quality standards and guidelines reflecting recognized evidence based best practice.
- 3.2.2 Seeks evidence from a wide range of credible sources to maintain, extend and evaluate the quality of psychological care.
- 3.2.3 Acts immediately and appropriately in accordance with the national and/or institutional disaster plan as needed participating in triage and coordination of care for patients.
- 3.2.4 Implements quality assurance and risk management strategies.





- 3.2.5 Ensures a safe environment by identifying actual and potential risks and takes timely action to meet national legislation and workplace health and safety principles.
- 3.2.6 Acknowledges limitations in knowledge, judgment and/or skills, and functions within those limitations.
- 3.2.7 Recognizes less than optimum or unsafe practice in self and others and intervenes, records and reports, and acts to access and/or provides support to ensure remediation of deficiencies.
- 3.2.8 Participates in ongoing quality improvement and risk management initiatives.
- 3.2.9 Adheres to and implements infection control policies and procedures.
- 3.2.10 Communicates and records safety concerns to the relevant authority and documents response.

3.3 Competency Standard 3.3: Delegation and Supervision

Delegates and provides supervision to team members according to their competence and scope of practice.

Performance Criteria:

- 3.3.1 Delegates to others, activities commensurate with their abilities and scope of practice.
- 3.3.2 Uses a range of supportive strategies when supervising aspects of care delegated to others.
- 3.3.3 Maintains accountability and responsibility when delegating aspects of care to others.

4 <u>DOMAIN FOUR: EDUCATION, LEARNING AND DEVELOPMENT</u>

4.1 Competency Standard 4.1: Education and Facilitation

Demonstrates commitment to the development of other members in the healthcare team, as well as patients, families, community and society.

Performance criteria:

- 4.1.1 Shares and disseminates professional knowledge and research findings with others.
- 4.1.2 Acts as a resource person for others.
- 4.1.3 Contributes to the formal and informal education and professional development of students and colleagues facilitating and where appropriate coordinating learning opportunities.
- 4.1.4 Acts as an effective preceptor and/or mentor as assigned, undertaking appropriate preparation and updating to undertake the roles.
- 4.1.5 Takes opportunities to learn together with others in order to contribute to health care improvement.

4.2 Competency Standard 4.2: Lifelong learning

Assumes responsibility for own professional development through lifelong learning to ensure continued competence and performance improvement.

Performance criteria:

- 4.2.1 Undertakes regular self-assessment and reviews own practice through reflection, peer review, competency assessment, critical examination and evaluation.
- 4.2.2 Instigates planned updating knowledge and skills for safe, person-centered, evidence-based practice.
- 4.2.3 Actively engages in ongoing professional development and performance improvement of self and others.





- 4.2.4 Maintains a record of learning and professional development activities and accreditation commensurate with the Ministry of Public Health continuing professional development standards.
- 4.2.5 Understands the value of case discussion, clinical supervision and other methods of reflecting and reviewing practice.

4.3 Competency Standard 4.3: Promotion of health and patient education

Enable and provide information on maintaining and optimizing health and maximizing self-care to service users as appropriate.

Performance criteria:

- 4.3.1 Takes part in health promotion, patient education and illness prevention initiatives and contributes to their evaluation.
- 4.3.2 Applies knowledge of resources available for health promotion and health education.
- 4.3.3 Acts to empower the individual, family and community to adopt healthy lifestyles and concord with self-management of ill-health to promote wellbeing.
- 4.3.4 Provides relevant health information and patient education to individuals, families and communities to assist in achieving optimal health and rehabilitation.
- 4.3.5 Demonstrates understanding of traditional healing practices within an individual's, family and/or community's health belief systems and incorporates appropriately and/or provides education if adversely effecting optimum health.
- 4.3.6 Recognizes the potential for patient education and teaching for health and wellbeing in clinical psychology interventions.
- 4.3.7 Applies knowledge of a variety of teaching and learning strategies with individuals, families and communities to effect and evaluate learning and concordance with treatment and advice.

5 DOMAIN FIVE: RESEARCH AND IMPROVEMENT

This domain articulates the requirement that the clinical psychologist should practice incorporating best available evidence to provide quality health care and contribute to the creation and/or implementation of knowledge through active participation.

5.1 Competency Standard 5.2: Using data and information systems

Uses data systems to enhance the quality and delivery of patient care.

Performance Criteria:

- 5.1.1 Demonstrates information technology skills needed to inform and provide optimum healthcare and accurately document outcomes of interventions.
- 5.1.2 Understands how to use technology and data to assist in problem identification and identification of deficiencies that can be remediated to enable improvements in patient care.
- 5.1.3 Analyses data accurately and comprehensively leading to appropriate interpretation of findings and development of implementation plans.
- 5.1.4 Recognizes the need to manage records and all other information in accordance with applicable legislation, protocols and guidelines.

5.2 Competency Standard 5.3: Research Participation





Uses research, evaluation, service improvement and audit findings to enhance the quality of patient care and protect the rights of those participating.

Performance Criteria:

- 5.2.1 Participates in activities that disseminate research findings such as publications, journal clubs, grand rounds and presentations.
- 5.2.2 Promotes research, evaluation, service improvement initiatives and audit, designed to improve healthcare practice and disseminate findings to colleagues, patients, families, communities, and society.

Undertakes appropriate development to ensure competency to recruit, ensure informed consent is obtained, support involvement, facilitate, monitor and where appropriate advocate withdrawal of individuals participating in clinical research and evaluation.

References:

- 1. American Psychological Association (APA) "How does the APA define 'psychology'?" Available at: http://www.apa.org/support/about-apa.aspx?item=7 (Accessed 11 March 2016)
- 2. British Psychological Association. http://www.bps.org.uk/psychology-public/how-can-psychology-helpyou/how-can-psychology-help-you
- 3. Health and Care Professions Council (HCPC) 2013. Standards of Proficiency. Psychologists. HCPC, London. UK
- 4. Scopes of Practice and Qualifications for psychologist registered in New Zealand. New Zealand Psychologist Board 2012
- 5. Regulations defining the scope of the profession of psychology. Department of Health South Africa 2011
- 6. Guidelines for Psychological Practice in Health Care Delivery Systems. American Psychological Association. American Psychologist. January 2013





Criteria for National Registration – Clinical Social Worker

Criteria	Clinical Social Worker
Definition	Clinical social work practice is the professional application of social work theory and evidence based methods in treatment and prevention of psychosocial dysfunction, disability, or impairment, including emotional and mental disorders. Clinical Social work shares with all Social Work practice the goal of enhancement and maintenance of biopsychosocial functioning of individuals, families, and small groups. Clinical Social Workers are integral members within multidisciplinary team, collaborating to achieve comprehensive patient care, provide diagnostic assessment, guidance, teaching, Supportive counseling and opportunities to promote improved health outcomes for patients and their families.
Practice Settings	Clinical Social Workers provide services in a wide variety of settings, which may include but are not exclusive to: • Health care settings (e.g., hospitals, medical rehabilitation facilities, long-term care facilities, home health agencies, clinics, neonatal intensive care units, behavioral/mental health facilities); • Early intervention settings, and day care centers in healthcare settings; • Individuals' homes and community residences; • Mental Health; • Research facilities in Social and Medical setting. • Schools and Special Needs Centers
Education	Bachelor Degree OR Entry level Master Degree in Social Work.
Scope of Practice	The Scope of Clinical Social Work practice involves but is not limited to: Psychosocial assessment and diagnosis Safety & Risk Assessment and intervention Social Support Information and Referral Services Education and training Supportive Counseling Group Therapy program development and facilitation Program Development Research





Criteria	Clinical Social Worker
Scope of Practice (Cont'd)	 Mediating Familial Conflict Treatment, Discharge and future planning Disaster Management Crisis Intervention Plan, develop, and evaluate social programs Monitor, analyze, and evaluate public and social policies Coordinating and prioritizing available resources For more detailed scope of practice please refer to Clinical Social Work scope of practice attached.
Licensure	The Clinical Social Worker must apply for Licensure through Qatar Council For Healthcare Practitioners (QCHP).
Experience	 Bachelor of Social Work graduates must have 3 years of post-graduate experience in a social work setting, minimally, 2years of which must be in a healthcare setting Master in Social Work (MSW) graduates must have two years post-graduate experience in a Social Work setting. National staff who are fresh graduate must undergo one year of internship- program to be eligible for Clinical Social Work license.
Competency validation	Proposed competencies must meet entry to practice criteria according to the proposed scope of practice and competency requirement.
Other Requirement for Evaluation & Registration	(Refer to QCHP requirements for license Registration/Evaluation) http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx
Requirements for License Renewal	(Refer to QCHP requirements for license Registration/Evaluation) http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx
Note: Applicants	with a break from practice please see QCHP "Break from Practice Policy".





CLINICAL SOCIAL WORKER – SCOPE OF PRACTICE AND COMPETENCY FRAMEWORK

INTRODUCTION

The Clinical Social Work scope of practice is based on a competency framework that comprises **professional ethics, clinical practice, leadership and management, learning and management** and **research** domains intrinsic to the role of the Clinical Social Worker. They are the threshold standards necessary to protect members of the public. The scope also describes the professional roles and activities and practice settings for the Clinical Social Work profession. This document sets out to detail the standards of proficiency required for safe and effective practice in the Clinical Social Work profession. Once on the Qatar Supreme Council of Health Professional Register the licensed professional must continue to meet the standards of proficiency which relate to the areas in which he/she works. Periodic updating of the scope of practice statement and standards of proficiency will be necessary as technology, research outcomes, and perspectives change.

Clinical Social Workers may exercise their professional judgment and decision making, wherever they practice, so long as this is within the social worker's knowledge, competence and scope of practice. A licensed professional scope of practice may change over time and the scope of a more experienced social worker may become narrower and more focused with increased specialization. The licensed Social Work professional must have evidence of advanced competencies in order to address responsibilities that extend beyond traditional boundaries of social work advanced practice. The National Social worker graduates who are not competitive with the required experience will undergo one year internship program before they are awarded with clinical social work license. The internship program will focus on patient assessment, policy, procedure, job description, national law, counseling etc.

STATEMENT OF PURPOSE:

The purpose of this document is to define the scope of Clinical Social Worker's practice in Qatar:

- (a) Describe the services offered by a qualified Clinical Social worker.
- (b) Define the professional accountability, required competencies, and scope of ethical and legal practice of the Clinical Social Worker in relation to patients, families, other members of the multidisciplinary team, community and society.
- (c) Serve as a reference for license regulating authorities and professionals governing healthcare.

DEFINITION OF CLINICAL SOCIAL WORK:

Clinical Social Work is an advanced practice of social work. Clinical Social Workers typically work in a hospital, outpatient clinic, community health agency, skilled nursing facility or long-term care facility. Clinical Social Workers have a Bachelor Degree or Master Degree in Social Work and professional experience working with patient families with complex medical and biopsychosocial needs.

Clinical Social Workers may undertake micro-level roles in casework, Supportive counseling, advocacy, community engagement and development and psychosocial interventions to address issues for both the individual and family. Clinical Social Workers also perform macro-level practice in areas such as policy development, education and research particularly around social issues and challenges of individuals, families, and marginalized populations the society.

PROFESSIONAL ROLES AND ACTIVITIES:

Clinical Social Work practice extends to individuals, families, and groups from diverse linguistic and cultural backgrounds. Services are provided by applying the best available research evidence, using expert clinical judgments, and considering clients' individual preferences and values. Clinical Social Workers provide clinical services that include the following:





Functions

The Scope of **Clinical** Social Work practice involves but is not limited to:

- Psychosocial assessment and diagnosis
- Safety and Risk Assessment and intervention
- Information and Referral Services
- Education and Training
- Supportive counseling
- Group Therapy Program development and facilitation
- Research
- Mediating Familial Conflict
- Treatment, Discharge and future planning
- Social Support
- Disaster Management
- Crisis Intervention
- Plan, develop, and evaluate social programs
- Monitor, analyze, and evaluate public and social policies
- Coordinating and prioritizing available resources

1. DOMAIN ONE: PROFESSIONAL AND ETHICAL PRACTICE

This domain defines the professional accountability and scope of ethical and legal practice of the Clinical Social Worker in relation to patients, families, other members of the multidisciplinary team, communities and society.

1.1 Competency Standard : Accountability

Accepts accountability for own actions, and decision-making and for the related outcomes.

Performance criteria:

- 1.1.1 Works within the limits of own competence and the boundaries of the Scope of Practice.
- 1.1.2 Identifies opportunities for advocacy, health promotion and disease prevention.
- 1.1.3 Provides care without discriminate, on any basis, with respect for the rights and dignity of all individuals, groups and populations
- 1.1.4 Encourages and promotes appropriate stewardship of resources.
- 1.1.5 Avoids any activity that creates a conflict of interest or violates any Qatari laws, customs and/or regulations.
- 1.1.6 Promotes advancement of the profession, and presents a positive image of Clinical Social Work to the community.

1.2 Competency Standard: Ethical Practice

Demonstrates integrity and accountability by honoring the rights and dignity of all individuals. Pursues a quest for excellence in all professional activities that serve the best interests of the patient, their family and community and the social work profession.





Performance criteria:

- 1.2.1 Engages in ethical decision-making with respect to own professional responsibilities or where ethical issues affect healthcare delivery or clinical decision-making.
- 1.2.2 Acts as patient advocate protecting the person's rights in accordance with Qatari law and organization specific terms and conditions.
- 1.2.3 Maintains patient confidentiality and makes every reasonable effort to ensure the security of written, verbal and electronic patient information.
- 1.2.4 Respects the patient's (including children, young people and their families') right to be fully informed.
- 1.2.5 Acts sensitively and fairly giving due consideration to diversity, including cultural and religious beliefs, race, age, gender, physical and mental state, and other relevant factors.
- 1.2.6 Questions when appropriate, healthcare practice where the safety of others is at risk and where the quality of care warrants improvement. Acts where the safety of care is compromised and when necessary report individuals or systems that may risk patient safety.
- 1.2.7 Uses every resource, including referral when appropriate, to ensure that comprehensive service is provided.
- 1.2.8 Clinical Social Workers shall not discontinue service to those they are serving without providing reasonable notice and efforts to transfer care to another professional.
- 1.2.9 Demonstrates adherence to National code of conduct for healthcare practitioners and ethical standards to ensure good quality interactions with patients, family members and other stakeholders.
- 1.2.10 Adheres to the principles of privacy, confidentiality, demonstrates responsible use of information in professional work, and seeks guidance when in an ethically comprised position.

1.3 Competency Standard: Legal Practice

Functions at all times in accordance with legislative, regulatory and policy guidelines relevant to Clinical Social Work practice.

Performance criteria:

- 1.3.1 Practices in accordance with agreed policies and procedures that guide Clinical Social Work practice.
- 1.3.2 Practices in accordance with relevant laws and regulations that govern Clinical Social Work practice.
- 1.3.3 Maintains valid registration and licensure to practice in Qatar.
- 1.3.4 Recognizes and acts upon breaches of laws and regulations relating to the professional role and/or National Code of Conduct for healthcare practitioners and Ethics for Clinical Social Workers.
- 1.3.5 Maintains a professional portfolio including evidence of continued competence and improvement.
- 1.3.6 Maintains a professional portfolio including evidence of continued competence and improvement.

2 <u>DOMAIN TWO: Clinical Practice</u>

As a healthcare professional, Clinical Social Work is an autonomous profession; that is, Clinical Social Work services must be supervised by master or doctorate prepared social work professionals.

A Clinical Social Worker typically works within a multidisciplinary team of professionals.

2.1 Competency Standard: Provision of Care





The professional roles and activities in Clinical Social Work include clinical/educational services (diagnosis, assessment, planning, and treatment), prevention and advocacy, education, administration, and research).

The practice of Clinical Social Work practice involves but is not limited to:

- 2.1.1 Maintains the provision of Social Work practices that are safe, preventative, and restorative to the patient.
- 2.1.2 Keeps accurate, current, comprehensive and legible records of patient care in accordance with applicable legislation, protocols and guidelines.
- 2.1.3 Provides Social Work services including, but not limited to independent assessment and evaluation of patient needs and functional abilities using both standardized and non-standardized assessments.
- 2.1.4 Formulates and implements appropriate care plans based on assessment results, taking into account individual and family values, beliefs and interests.
- 2.1.5 Implements appropriate action plans and interventions based on assessment of needs and initiates appropriate reporting or referral according to evidence based clinical care guidelines.
- 2.1.6 Evaluates intervention plans using validated outcome measures and revise plans as necessary in collaboration with service users.
- 2.1.7 Provides health promotion and disease prevention information as clinically indicated in order to reduce barriers to independence, promote health and foster wellbeing.

2.2 <u>Competency Standard : Patient Centered Care</u>

The Clinical Social Worker is responsible for ensuring that the patient and family are at the center of all decisions about care wherever possible.

Performance criteria:

Understands the need to adopt a patient and family centered approach to practice by establishing respectful and appropriate professional relationships

- **2.2.1** Uses formal (structured interview) or informal (conversational, narrative building) strategies to establish a comprehensive assessment of needs. This should include an understanding of the values, beliefs and interests of the individual, their family and other involved parties.
- **2.2.2** Synthesizes information from the patient families' bio-psychosocial narrative/profile in order to plan for future interventions and services.
- **2.2.3** Understands the need of patients, families and/or people authorized to act on their behalf, to be provided information necessary to enable them to make informed decisions.
- **2.2.4** Offers appropriate education and training for individual's families and caregivers.
- **2.2.5** Works collaboratively with patients and their families to set reasonable and meaningful goals.
- **2.2.6** Understands the value to engage individuals and care-givers in planning and assessing diagnostic, treatments and intervention in order to meet their treatment goals and needs.
- **2.2.7** Understands the supportive use of self, including one's personal bias, insights, perceptions, and judgments as part of the supportive process.





2.3 Competency Standard : Evidence-Based Practice

Integrates evidence and research findings into practice.

Performance Criteria:

- 2.3.1 Utilizes current evidence-based measures, including recent research findings, to guide Social Work practice.
- 2.3.2 Incorporates validated and critically appraised evidence when initiating change in social work practice
- 2.3.3 Formulates and utilizes validated, evidence-based practice from best available credible research and/or national and international professional consensus, guidance and audit.
- 2.3.4 Gathers and uses information, including qualitative and quantitative data, in order to evaluate outcomes for individuals and groups engaged in Social Work intervention.
- 2.3.5 Is aware of the role of audit and review in quality improvement and quality assurance.
- 2.3.6 Evaluates the efficacy and effectiveness of both new and established interventions and technologies using recognized outcome measures.
- 2.3.7 Participates in generating evidence to improve quality of care through research, clinical audit and quality improvement programs.

2.4 Competency Standard : Communication and Teamwork

Uses communication skills to ensure that other members of the health care team, the patient and their family are and remain fully informed.

Performance Criteria:

- 2.4.1 Establishes relationships of trust, respect, honesty and empathy.
- 2.4.2 Gathers information about medical condition(s), but also about a patient's beliefs, concerns, expectations and health experiences.
- 2.4.3 Seeks out and synthesizes relevant information from other credible sources, such as patient's family, caregivers and other professionals.
- 2.4.4 Delivers information to patients and their families, colleagues, and other members of the healthcare team, in a way that is understandable, and that encourages discussion and participation in decision-making.
- 2.4.5 Demonstrates cultural awareness across all patient groups.
- 2.4.6 Consistently and clearly communicates relevant, accurate and comprehensive information in verbal, written and electronic forms in a timely manner to ensure the delivery of safe, comprehensive and ethical care.
- 2.4.7 Engages in teamwork and the team-building processes. Participates in building consensus and or resolving conflict in the context of patient care
- 2.4.8 Works effectively with other professionals to prevent, negotiate and resolve inter-professional conflict.
- 2.4.9 Treats colleagues with respect and avoids unwarranted negative criticism of colleagues with clients or with other professionals. Resolves disagreements through appropriate channels when a team decision raises ethical concerns.
- 2.4.10 Maintains effective community liaisons with referral agencies and enhances partnership arrangements with relevant stakeholders in order to ensure continuity of care.





- 2.4.11 Assists multidisciplinary team to engage patients, their family, and other supports in setting personally relevant treatment goals.
- 2.4.12 Ensures continuous flow of information that connects the patient/family with caregivers along the continuum of care.
- 2.4.13 Understands the important role continuity plays in the patient's overall care and rehabilitation.
- 2.4.14 Contributes to the ongoing development of the quality of social work interventions, engaging with the multidisciplinary team and facilitating team-work based, holistic patient care provision that promotes patient safety and quality of health care

3 **DOMAIN THREE: Leadership and Management**

Exhibits leadership qualities required for the provision of safe, effective Clinical Social Work practice. This domain includes compliance with the QCHP National Code of Ethics for healthcare practitioners.

3.1 Competency Standard: Leadership

Exhibits leadership qualities and manages Social Work practice safely, efficiently and ethically.

<u>Performance Criteria</u>

- 3.1.1. Engages in evidence-based practice, evaluates practice systematically and participates in audit procedures.
- 3.1.2 Evaluates intervention plans using recognized outcome measures and revises plans as necessary.
- 3.1.3 Applies clinical reasoning, critical thinking and problem solving skills in the provision, management and evaluation of patient and family care.
- 3.1.4 Manages self, and where appropriate assists others, to ensure effective workload prioritization and time management.
- 3.1.5 Provides feedback and offers suggestions to improve the patient experience and health outcomes. , Effectively integrates change in own practice, the team and/or the organization.
- 3.1.6 Advocates for, and contributes to the creation and maintenance of a positive working environment and team working.
- 3.1.7 Participates in the mentorship and coaching of other professionals to maximize the effectiveness of Social Work interventions, the provision of quality health care and promotion of the social work profession.
- 3.1.8 Acts as a role model for colleagues, students and other members of the healthcare care team by treating all with respect, trust and dignity.
- 3.1.9 Fosters the advancement of Social Work autonomy, professionalism, and accountability.
- 3.1.10 Promotes and maintains a positive image of the Social Work profession.
- 3.1.11 Assumes leadership responsibilities, as appropriate, in the delivery of Social Work practice.

3.2 Competency Standard : Quality Improvement and Safety

Ensures Clinical Social Work practice meets organizational quality and safety standards and guidelines and participates in continuous quality improvement.

Performance criteria:

3.2.1 Practices in accordance with approved quality standards and guidelines reflecting recognized evidence based best practice.





- 3.2.2 Seeks evidence from a wide range of credible sources to maintain, enhance and evaluate the quality of care.
- 3.2.3 Acts immediately and appropriately in accordance with the national and/or institutional disaster plan as needed participating in triage and coordination of care for patients.
- 3.2.4 Implements quality assurance and risk management strategies.
- 3.2.5 Ensures a safe environment by identifying actual and potential risks and takes timely action to meet national legislation and workplace health and safety principles.
- 3.2.6 Acknowledges own limitations in knowledge, judgment and/or skills, and functions within those limitations.
- 3.2.7 Recognizes less than optimum or unsafe practice in self and others by providing timely interventions Acts, records and reports, unsafe practice to ensure remediation of deficiencies.
- 3.2.8 Participates in ongoing quality improvement and risk management initiatives.
- 3.2.9 Adheres to and implements infection control policies and procedures.
- 3.2.10 Recognizes the need to monitor and evaluate the quality of service and the value of contributing to the generation of data for quality assurance and improvement programs
- 3.2.11 Participates in the performance improvement processes aimed to improve patient outcomes and accepts accountability.
- 3.2.12 Assists and participates in the implementation of ongoing corporate, department and unit performance improvement initiatives. Maintains an effective audit trail and work towards continual improvement
- 3.2.13 Is aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures.

3.3 Competency Standard : Delegation and Supervision

Delegates and provides supervision to team members according to their competence and scope of practice.

Performance Criteria:

- 3.3.1 Delegates to others, activities commensurate with their abilities and scope of practice
- 3.3.2 Uses a range of supportive strategies when supervising aspects of care delegated to others.
- 3.3.3 Maintains accountability and responsibility when delegating aspects of care to others.

4 DOMAIN FOUR: Education, learning and development

4.1 Competency Standard : Education and Facilitation

Demonstrates a commitment to the development of professionals within academic and healthcare systems.

Performance criteria:

- 4.1.1 Shares and disseminates professional knowledge and research findings.
- 4.1.2 Acts as a resource person
- 4.1.3 Contributes to the formal and informal education and professional development of students and colleagues by facilitating, and where appropriate, coordinating learning opportunities.
- 4.1.4 Acts as an effective preceptor and/or mentor as assigned, undertaking appropriate preparation and updating to undertake the roles.
- 4.1.5 Takes opportunities to learn together with others in order to contribute to health care improvement and outcomes.

4.2 Competency Standard: Lifelong Learning





Assumes responsibility for own professional development through lifelong learning to ensure continued competence and performance improvement.

Performance criteria:

- 4.2.1 Undertakes regular self-assessment and reviews own practice through reflection, peer review, competency assessment, critical examination and evaluation.
- 4.2.2 Motivated to enhance knowledge and skills for safe, client -centered, evidence-based practice.
- 4.2.3 Actively engages in ongoing professional development and performance improvement of self and others.
- 4.2.4 Participates in supervision, teaching, staff development activities and functions as an instructor in the Social Work student clinical practicum program.
- 4.2.5 Maintains a record of learning, professional development activities, and accreditation commensurate with the QCHP continuing professional development standards
- 4.2.6 Understands the value of case discussion, clinical supervision and other methods of reflecting and reviewing practice.

4.3 Competency Standard : Promotion of Health and Patient Education

Will enable and provide information on maintaining and optimizing health and maximizing self-care.

Performance criteria:

- 4.3.1 Takes part in health promotion, patient education and illness prevention initiatives and contributes to their evaluation.
- 4.3.2 Applies knowledge of resources available for health promotion and health education.
- 4.3.3 Acts to empower the individual, family and community to adopt healthy lifestyles and concord with self-management of medical needs to promote wellbeing.
- 4.3.4 Provides relevant health information and patient education to individuals, families and key stakeholders involved with patient families necessary to achieve optimal health.
- 4.3.5 Demonstrates understanding of traditional healing practices within an individual's family and/or community's health belief systems. Tries to incorporate medically advisable treatment and/or provides education if healing practice adversely impacts optimum health.
 Recognizes the potential for patient education and teaching for health and wellbeing and incorporates
- 4.3.6 Applies knowledge of a variety of teaching and learning strategies with individuals, families and communities to effect and evaluate learning in accordance with treatment and advice.

5 DOMAIN FIVE: RESEARCH AND IMPROVEMENT

in social work interventions.

This domain articulates the requirement of Clinical Social Work practice that incorporates best available evidence to provide quality health care and contribute to the creation and/or implementation of knowledge through active participation.

5.1 Competency Standard: Using data and information systems

Uses organization approved data systems to enhance the quality and delivery of patient care.

Performance Criteria:





- 5.1.1 Acquires the information technology skills needed to inform and provide optimum psychosocial and medical care; accurately document outcomes of interventions.
- 5.1.2 Understands how to use technology and data to assist in problem and deficiency identification that can be remediated to enable improvements in patient care.
- 5.1.3 Analyses data accurately and comprehensively leading to appropriate interpretation of findings and development of implementation plans.
- 5.1.4 Recognizes the need to manage records and all other information in accordance with applicable legislation, protocols and guidelines.

5.2 Competency Standard : Research Participation

Uses research, evaluation, service improvement and audit findings to enhance the quality of patient care and protect the rights of those participating.

Performance Criteria:

- 5.2.1 Participates in activities that disseminate research findings such as publications, journal clubs, grand rounds and presentations.
- 5.2.2 Promotes research, evaluation, service improvement initiatives and audit, designed to improve healthcare practice and disseminate findings to colleagues, patients, families, communities, and society.
- 5.2.3 Undertakes appropriate development to ensure competency to recruit, ensure informed consent is obtained, support involvement, facilitate, monitor and where appropriate advocate withdrawal of individuals participating in clinical research and evaluation.





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Criteria for National Registration – Child Life Specialist

Criteria	Child Life Specialist
Definition	The Child Life Specialist is an individual who holds a current valid certification or registration issued under a national authority or board that authorizes them to practice their profession and use the title Child Life Specialist.
Practice Settings	 Child Life Specialist services are provided in a variety of settings in which children and families experience hospitalization/healthcare and/or other life challenging events. These settings include, but are not limited to: Inpatient facilities (e.g. hospitals, rehabilitation centers, psychiatric hospitals, community and specialty focused hospitals). Outpatient settings (e.g., hospitals, clinics, medical and therapy offices, dental clinics, private practice clinics). Home and community settings (e.g., schools, recreational and disease specific camps, home care, group homes, early intervention centers, hospice and end-of life settings, community mental health facilities, residential care & community outreach services. Research facilities.
Education	 Bachelor Degree or higher in Child Life, Child Development, Education (early childhood-secondary), Expressive Therapies (art, music, play), Social Work/Care, Recreational Therapy, or related area. AND Successful completion of the Child Life Council Certification (CCLS) exam (available worldwide) resulting in a current CCLS credential. OR Current Registration as a Hospital/Health Care Play Specialist (UK, NZ)
Scope of Practice	A Child Life Specialist is a trained, qualified health care professional, who helps children and families cope with the stress and uncertainty of illness, injury, disability, and hospitalization. To achieve these goals, the Child Life Specialist is responsible for assessment, intervention, program planning and implementation, regular review, and carrying out related documentation using systematic clinical reasoning and decision making. Child Life Specialists are child development experts who, work to ensure that life remains as normal as possible for children in health care settings and other challenging environments. They promote effective coping through play, age-appropriate medical preparation and education, and self-expression activities, As advocates of family-centered care, Child Life Specialists work in partnership with doctors, nurses, social workers and others to meet the unique emotional, developmental and cultural needs of each child and family. The Child Life Specialist assumes responsibility for the delivery, safety and effectiveness of Child Life Services provided. Child Life Specialists may practice at different levels based on their competencies and job profiles. Please refer to the <i>Child Life Specialist Scope of Practice</i> Document for further information.





Licensure	The Child Life Specialist must apply for licensure through Qatar Council For Healthcare Practitioners (SCH).	
Experience	Overseas candidates: Two years (2) of experience as a certified Child Life Specialist or registered Hospital/Health Care Play Specialist. Qatari Nationals and Permanent Residents: Evidence of clinical practice or equivalent internship program in the field of Child Life.	
Competency validation	Competency will be validated through CCLS exam resulting in award of Child Life Specialist (CCLS) credential (internationally available exam/credential) or through Hospital/Health Care Play Specialist Registration requirements of the UK and NZ professional organizations	
Others Requirement for Evaluation & Registration	(Refer to QCHP requirements for license Registration/Evaluation) http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx	
Requirements for License renewal	(Refer to QCHP requirements for license Registration/Evaluation) http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx	
Note: Applicant with break from practice please see QCHP "Break from Practice Policy"		





Child Life Specialist Scope of Practice

INTRODUCTION

The Child Life Specialist scope of practice is based on a competency framework that comprises professional ethics, clinical practice, leadership and management, learning and management and research domains intrinsic to the role of the Child Life Specialist. The scope also describes the professional roles and activities and practice settings for the Child Life Specialist profession. This document sets out the standards of proficiency required for safe and effective practice in the Child Life Specialist profession. They are the threshold standards necessary to protect members of the public. Once on the Qatar Council for Health Care Practitioners (QCHP) register the licensed professional must continue to meet the standards of proficiency which relate to the areas in he/she works. Periodic updating of the scope of practice statement and standards of proficiency will be necessary as technology and perspective change.

Child Life Specialists, as autonomous professionals, have the freedom to exercise their professional judgement and decision making, wherever they practice, so long as this is within the specialist's knowledge, competence and scope of practice. A licensed professional's scope of practice will change over time and the scope of a more experienced Child Life Specialist may become narrower and more focused with increased specialization. If a licensed professional moves outside of the traditional scope of practice of the Child Life Specialist profession such as occurs in extended scope practice the licensed professional is responsible for ensuring that this is within their knowledge, skills and expertise so that they continue to work safely, lawfully and effectively. The licensed professional must have evidence of advanced competencies in order to address responsibilities that extend beyond traditional boundaries of Child Life Specialist advanced practice.

STATEMENT OF PURPOSE:

The purpose of this document is to define Child Life Specialists' scope of practice in Qatar to:

- (a) Describe the services offered by qualified Child Life Specialists.
- (b) Define the professional accountability, required competencies, and scope of ethical and legal practice of the Child Life Specialist in relation to patients, families, other members of the multidisciplinary team, community and society.
- (c) Serve as a reference for license regulating authorities and professionals governing healthcare.

DEFINITION OF CHILD LIFE SERVICES:

Child Life services support the psychosocial needs of children and families experiencing hospitalization, illness, injury, and other potentially traumatic life events.

Child life services should be delivered as part of an integrated patient- and family-centered model of care and included as a quality indicator in the delivery of services for children and families in health care settings. The provision of child life services is a quality benchmark of an integrated patient- and family-centered health care system, a recommended component of medical education, and an indicator of excellence in pediatric care.

Child Life Specialists are part of an interdisciplinary, patient- and family-centered model of care, collaborating with the family, physicians, advance practice providers, nurses, social workers, and other members of the health care team to develop a comprehensive plan of care. Child life contributions to this plan are based on the patient's and family's psychosocial needs, culture, and responses to the health care experience.

Child life services also contribute to an organization's efforts to meet the standards set forth by The Joint Commission with regard to effective communication, patient- and family-centered care, age-specific competencies,





and cultural competence. The Child Life Specialist's psychosocial and developmental expertise and their keen awareness of the benefits of patient- and family-centered care provide a useful perspective at the systems level.

PROFESSIONAL ROLES AND ACTIVITIES:

A Child Life Specialist is a trained qualified health care professionals who help children and families cope with the stress and uncertainty of illness, injury, disability, and hospitalization. To achieve these goals, the Child Life Specialist is responsible for assessment, intervention, program planning and implementation, regular review, and carrying out related documentation using systematic clinical reasoning and decision making.

Child life specialists are child development experts who work to ensure that life remains as normal as possible for children in health care settings and other challenging environments. They promote effective coping through play, self-expression activities, and age-appropriate medical preparation and education. As advocates of family-centered care, child life specialists work in partnership with doctors, nurses, social workers and others to meet the unique emotional, developmental and cultural needs of each child and family.

The Child Life Specialist assumes responsibility for the delivery of all Child Life Specialist services and for the safety and effectiveness of Child Life Specialist services provided. Child Life Specialists may practice at different levels of practice based on their competencies and job profiles.

Child Life Specialist may work in the following and other specialty areas:

- Pediatrics –both in- and out-patient settings, within all specialties
- Perioperative areas
- Palliative care and bereavement
- Mental health
- Special and Developmental Needs
- Dental Clinics
- Primary Care clinics
- Emergency and Trauma
- Intensive care
- Long-term Rehabilitation settings
- Community based rehabilitation
- School
- Home care
- Children of adult patients
- Private Practice

<u>Strategies/activities of Child Life Specialist practice include but are not limited to:</u>

- Uses developmentally appropriate play as a primary tool in assessing and meeting psychosocial needs.
- Apply the cyclical process of assessment, plan, intervention, and evaluation of child life care.
- Support the central role of the family, valuing strengths and needs in implementing child life services.
- Assess responses to stress; plan, implement and evaluate care accordingly.
- Facilitate opportunities for play to decrease distress and increase effective coping.
- Introduce and facilitate rehearsal of techniques to aid immediate and long term coping, with consideration for the unique needs of the individual and family, such as coping style, previous experience, developmental level, culture, spirituality, family situation and emotional state.
- Facilitate mastery of potentially stressful experiences.





- Utilize and teach appropriate psychological/non-pharmacological pain management strategies.
- Empower and support patients and families to effectively self-advocate as well as advocate on behalf of those who cannot do so.
- Establish and maintain a therapeutic and healing environment.
- Plan and implement varied developmentally supportive activities.
- Utilize effective communication skills in the process of supporting children and families.
- Assess knowledge level, misconceptions, previous experience, and unique sociocultural and learning needs.
- Determine realistic goals and objectives for learning in collaboration with family members and professionals, and identify an action plan to achieve these goals.
- Use accurate and developmentally appropriate teaching aids and techniques so that knowledge is increased and emotional needs are supported.
- Recognize verbal and non-verbal cues and adapt teaching accordingly.
- Use minimally threatening, developmentally supportive language.
- Describe sensory information, sequence, timing and duration of events.
- Facilitate planning, rehearsal and implementation of coping strategies.
- Provide input about facility design to promote orientation, comfort, healing, security and normalization.
- (CLC, 2010)

COMPETENCY FRAMEWORK

1 DOMAIN ONE: PROFESSIONAL AND ETHICAL PRACTICE

This domain defines the professional accountability and scope of ethical and legal practice of the Child Life Specialist in relation to patients, families, other members of the multidisciplinary team, community and society.

1.1 Competency Standard 1.1: Accountability

Accepts accountability for own actions, and decision-making and for the related outcomes.

Performance criteria:

- 1.1.1 Works within the limits of own competence and the boundaries of personal and professional Scope of Practice.
- 1.1.2 Identifies opportunities for advocacy, health promotion and disease prevention.
- 1.1.3 Provides care without discrimination on any basis, with respect for the rights and dignity of all individuals.
- 1.1.4 Encourages and promotes appropriate stewardship of resources.
- 1.1.5 Avoids any activity that creates a conflict of interest or violates any Qatari laws and regulations.
- 1.1.6 Promotes the growth of the profession, and presents a positive image of Child Life Specialist to the community.

1.2 Competency Standard 1.2: Ethical Practice

Demonstrates integrity, accountability, honors the rights and dignity of all individuals, and pursues a quest for excellence in all professional activities that serve the best interests of the patient, society, and the profession.





Performance criteria:

- 1.2.1 Engages in ethical decision-making with respect to own professional responsibilities or where ethical issues affect healthcare delivery or clinical decision-making.
- 1.2.2 Acts as patient advocate protecting the person's rights in accordance with Qatari law and organization specific terms and conditions.
- 1.2.3 Maintains patient confidentiality and makes every reasonable effort to ensure the security of written, verbal and electronic patient information.
- 1.2.4 Respects the patient's (including children and young people and their parents') right to be fully informed, establishing a context for self- determination, assent (children) and informed consent.
- 1.3.5 Acts sensitively and fairly giving due consideration to diversity, including cultural and religious beliefs, race, age, gender, physical and mental state, and other relevant factors.
- 1.3.6 Questions when appropriate, healthcare practice where the safety of others is at risk and where the quality of care warrants improvement; acts where the safety of care is compromised and where necessary reports others who may be risking patient safety.
- 1.3.7 Demonstrates professional integrity and ethical conduct in matters where a conflict of interest could be construed, i.e. when advising on the use of drugs, products, devices or services (as per organizational approved policy)

1.3 Competency Standard 1.3: Legal Practice

Functions at all times in accordance with legislative, regulatory and policy guidelines relevant to Child Life Specialist practice in Qatar.

Performance criteria:

- 1.3.1 Practices in accordance with agreed policies and procedures that guide Child Life Specialist practice.
- 1.3.2 Practices in accordance with relevant State of Qatar laws and regulations that impact Child Life Specialist practice.
- 1.3.3 Maintains valid registration and licensure to practice in Qatar.
- 1.3.4 Recognizes and acts upon breaches of laws and regulations relating to the professional role.
- 1.3.5 Maintains a professional portfolio including evidence of continued competence and improvement.

2 DOMAIN TWO: CLINICAL PRACTICE

As an autonomous healthcare profession, Child Life Specialist is practiced in partnership with members of the inter-professional team, service users, support staff and others in order to deliver collaborative care across the healthcare continuum. Critical thinking, patient and environment assessment skills and evidence-based clinical practice guidelines enable Child Life Specialists to autonomously develop and implement effective care plans, Child Life Specialist driven protocols, disease based clinical pathways and management programs.

2.1 Competency Standard 2.1: Provision of Care

Child Life Specialists serve a diverse population and may function in one or more of a variety of activities. The practice of Child Life Specialist care includes but is not limited to assessment, program planning and intervention to allow service users to participate in everyday life activities and life roles.





Performance criteria:

- 2.1.1 Maintains the provision of Child Life Specialist care services that are safe, aseptic, preventative and restorative to the patient.
- 2.1.2 Keeps accurate, contemporaneous, comprehensive and legible records of patient care in accordance with applicable legislation, protocols and guidelines. This includes Qatar Council for Health Care Practitioners requirements and local guidance at a facility level.
- 2.1.3 Provides Child Life Specialist services including, but not limited to independent assessment and evaluation of patient needs and coping using both standardized and non-standardized assessments.
- 2.1.4 Formulates and implements appropriate care plans based on assessment results, taking into account service users' values, beliefs and interests.
- 2.1.5 Implements appropriate action plans and interventions based on observed developmental stage and understanding, appropriate reporting or referral according to evidence based clinical care guidelines.
- 2.1.6 Evaluates intervention plans using recognized outcome measures and revise plans as necessary in conjunction with service users.
- 2.1.7 Provides health promotion and prevention activities as deemed clinically appropriate in order to remove barriers to independence, promote health and foster wellbeing.

2.2 Competency Standard 2.2: Patient Centered Care

The Child Life Specialist is responsible for ensuring that the service user is at the center of all decisions about care wherever possible.

Performance criteria:

- **2.2.1** Understands the need to adopt an approach which centers on the service user and establishes appropriate professional relationships in order to motivate and involve the service user in meaningful occupation.
- **2.2.2** Uses formal (structured interview) or informal (conversational, narrative building) strategies to establish a comprehensive occupational profile of the client. This should include an understanding of the values, beliefs and interests of the service user, their families and other appropriate parties.
- **2.2.3** Synthesizes information from the service users' occupational narrative/profile in order to plan for future interventions and services.
- **2.2.4** Understands the need to provide service users and/or people authorized to act on their behalf with the information necessary to enable them to make informed decisions.
- **2.2.5** Provides appropriate education and training for service users, families and caregivers.
- **2.2.6** Woks collaboratively with service users to set meaningful goals and outcome measures.
- 2.2.7 Uses creative approaches to intervention to support typical child development, positive coping skills, compliance with the medical regime, and engagement.
- **2.2.8** Understands the need to engage service users and care-givers in planning and assessing diagnostics, treatments and intervention in order to meet their psychosocial goals and needs.
- **2.2.9** Understands the therapeutic use of self, including one's personality, insights, perceptions, and judgments as part of the therapeutic process.





2.3 Competency Standard 2.3: Evidence-Based Practice

Integrates best available evidence, clinical audit and research into practice to ensure quality of provision.

Performance Criteria:

- 2.3.1 Utilizes current evidence-base, including recent research findings, and best available evidence to guide Child Life Specialist practice.
- 2.3.2 Incorporates credible critically appraised evidence into Child Life Specialist practice and when initiating change in practice.
- 2.3.3 Participates in the formulation of evidence-based practice based on best available credible research and/or national and international professional consensus, guidance and audit.
- 2.3.4 Gathers and uses information, including qualitative and quantitative data in order to evaluate outcomes for services users engaged in Child Life Specialist care.
- 2.3.5 Is aware of the role of audit and review in quality improvement and quality assurance.
- 2.3.6 Evaluates the efficacy and effectiveness of both new and established interventions and technologies using recognized outcome measures.
- 2.3.7 Participates in generating new evidence to improve quality of care through research, clinical audit and quality improvement programs.

2.4 Competency Standard 2.4: Communication and Teamwork

Uses communication skills to ensure that other members of the health care team, the patient and their family are and remain fully informed.

Performance Criteria:

- 2.4.1 Establishes relationships of trust, respect, honesty and empathy.
- 2.4.2 Gathers information about disease, but also about a patient's beliefs, concerns, expectations and illness experience.
- 2.4.3 Seeks out and synthesizes relevant information from other sources, such as patient's family, caregivers and other professionals.
- 2.4.4 Delivers information to patients and their families, colleagues, and other members of the healthcare team, in a way that is understandable, and that encourages discussion and participation in decisionmaking.
- 2.4.5 Demonstrates cultural competence across all patient groups.
- 2.4.6 Consistently and clearly communicates relevant, accurate and comprehensive information in verbal, written and electronic forms in a timely manner to ensure the delivery of safe, competent and ethical care.
- 2.4.7 Understands how communication affects engagement of service users.
- 2.4.8 Able to modify means of communication to take into account important variables such as age, capacity, learning and physical ability.
- 2.4.9 Shows awareness of verbal and non-verbal communication and how this can be affected by factors such as age, culture, ethnicity, gender, socio-economic status and spiritual or religious beliefs.
- 2.4.10 Participates in building consensus and or resolving conflict in the context of patient care and the multi-professional team.





- 2.4.11 Engages proactively in teamwork and the team-building processes.
- 2.4.12 Works effectively with other professionals to prevent, negotiate and resolve inter-professional conflict.

3 **DOMAIN THREE: LEADERSHIP AND MANAGEMENT**

Exhibits leadership qualities required for the provision of safe, effective Child Life Specialist care. This domain includes concordance with the healthcare organization's Code of Behavior and Code of Ethics as the operating frameworks

3.1 Competency Standard 3.1: Leadership

Exhibits leadership qualities and manages Child Life Specialist care safely, efficiently and ethically.

<u>Performance Criter</u>ia:

- 3.1.1 Applies clinical reasoning, critical thinking and problem solving skills in the provision, management and evaluation of care.
- 3.1.2 Manages self, and where appropriate assists others, to ensure effective workload prioritization and time management.
- 3.1.3 Provides feedback, offers suggestions for change and deals effectively with the impact of change on own practice, the team and/or on the organization.
- 3.1.4 Advocates for, and contributes to the creation and maintenance of a positive working environment and team working.
- 3.1.5 Participates in the mentorship and coaching of others maximizing the effectiveness of Child Life Specialist interventions, the provision of quality health care and the profession.
- 3.1.6 Acts as a role model for colleagues, students and other members of the healthcare care team by treating all with respect, trust and dignity.
- 3.1.7 Fosters the advancement of Child Life Specialist autonomy and accountability.
- 3.1.8 Promotes and maintains a positive image of Child Life Specialist.
- 3.1.9 Assumes leadership responsibilities, as appropriate, in the delivery of Child Life Specialist care.

3.2 Competency Standard 3.2: Quality Improvement and Safety

Ensures Child Life Specialist practice meets organizational quality and safety standards and guidelines and participates in continuous quality improvement.

Performance criteria:

- 3.2.1 Practices in accordance with approved quality standards and guidelines reflecting recognized evidence based best practice.
- 3.2.2 Seeks evidence from a wide range of credible sources to maintain, extend and evaluate the quality of occupational care.
- 3.2.3 Acts immediately and appropriately in accordance with the national and/or institutional disaster plan as needed participating in triage and coordination of care for patients.
- 3.2.4 Implements quality assurance and risk management strategies.





- 3.2.5 Ensures a safe environment by identifying actual and potential risks and takes timely action to meet national legislation and workplace health and safety principles.
- 3.2.6 Acknowledges limitations in knowledge, judgment and/or skills, and functions within those limitations.
- 3.2.7 Recognizes less than optimum or unsafe practice in self and others and intervenes, records and reports, and acts to access and/or provides support to ensure remediation of deficiencies.
- 3.2.8 Participates in ongoing quality improvement and risk management initiatives.
- 3.2.9 Adheres to and implements infection control policies and procedures.
- 3.2.10 Communicates and records safety concerns to the relevant authority and documents response.

3.3 Competency Standard 3.3: Delegation and Supervision

Delegates and provides supervision to team members according to their competence and scope of practice.

Performance Criteria:

- 3.3.1 Delegates to others, activities commensurate with their abilities and scope of practice.
- 3.3.2 Uses a range of supportive strategies when supervising aspects of care delegated to others.
- 3.3.3 Maintains accountability and responsibility when delegating aspects of care to others.

4 DOMAIN FOUR: EDUCATION, LEARNING AND DEVELOPMENT

4.1 Competency Standard 4.1: Education and Facilitation

Demonstrates commitment to the development of other members in the healthcare team, as well as patients, families, community and society.

Performance criteria:

- 4.1.1 Shares and disseminates professional knowledge and research findings with others.
- 4.1.2 Acts as a resource person for others.
- 4.1.3 Contributes to the formal and informal education and professional development of students and colleagues facilitating and where appropriate coordinating learning opportunities.
- 4.1.4 Acts as an effective preceptor and/or mentor as assigned, undertaking appropriate preparation and updating to undertake the roles.
- 4.1.5 Takes opportunities to learn together with others in order to contribute to health care improvement.

4.2 Competency Standard 4.2: Lifelong learning

Assumes responsibility for own professional development through lifelong learning to ensure continued competence and performance improvement.

Performance criteria:

- 4.2.1 Undertakes regular self-assessment and reviews own practice through reflection, peer review, competency assessment, critical examination and evaluation.
- 4.2.2 Instigates planned updating knowledge and skills for safe, person-centered, evidence-based practice.
- 4.2.3 Actively engages in ongoing professional development and performance improvement of self and others.





- 4.2.4 Maintains a record of learning and professional development activities and accreditation commensurate with the QCHP continuing professional development standards
- 4.2.5 Understands the value of case discussion, clinical supervision and other methods of reflecting and reviewing practice.

4.3 Competency Standard 4.3: Promotion of health and patient education

Enable and provide information on maintaining and optimizing health and maximizing self-care to service users as appropriate.

Performance criteria:

- 4.3.1 Takes part in health promotion, patient education and illness prevention initiatives and contributes to their evaluation.
- 4.3.2 Applies knowledge of resources available for health promotion and health education.
- 4.3.3 Acts to empower the individual, family and community to adopt healthy lifestyles and concord with self-management of ill-health to promote wellbeing.
- 4.3.4 Provides relevant health information and patient education to individuals, families and communities to assist in achieving optimal health and rehabilitation.
- 4.3.5 Demonstrates understanding of traditional healing practices within an individual's, family and/or community's health belief systems and incorporates appropriately and/or provides education if adversely effecting optimum health.
- 4.3.6 Recognizes the potential for patient education and teaching for health and wellbeing in Child Life Specialist interventions.
- 4.3.7 Applies knowledge of a variety of teaching and learning strategies with individuals, families and communities to effect and evaluate learning and concordance with treatment and advice.

5 DOMAIN FIVE: RESEARCH AND IMPROVEMENT

This domain articulates the requirement that the Child Life Specialist should practice incorporating best available evidence to provide quality health care and contribute to the creation and/or implementation of knowledge through active participation.

5.1 Competency Standard 5.1: Using data and information systems

Uses data systems to enhance the quality and delivery of patient care.

Performance Criteria:

- 5.1.1 Demonstrates information technology skills needed to inform and provide optimum healthcare and accurately document outcomes of interventions.
- 5.1.2 Understands how to use technology and data to assist in problem identification and identification of deficiencies that can be remediated to enable improvements in patient care.
- 5.1.3 Analyses data accurately and comprehensively leading to appropriate interpretation of findings and development of implementation plans.
- 5.1.4 Recognizes the need to manage records and all other information in accordance with applicable legislation, protocols and guidelines.





5.2 Competency Standard 5.2: Research Participation

Uses research, evaluation, service improvement and audit findings to enhance the quality of patient care and protect the rights of those participating.

Performance Criteria:

- 5.2.1 Participates in activities that disseminate research findings such as publications, journal clubs, grand rounds and presentations.
- 5.2.2 Promotes research, evaluation, service improvement initiatives and audit, designed to improve healthcare practice and disseminate findings to colleagues, patients, families, communities, and society.
- 5.2.3 Undertakes appropriate development to ensure competency to recruit, ensure informed consent is obtained, support involvement, facilitate, monitor and where appropriate advocate withdrawal of individuals participating in clinical research and evaluation.

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Criteria for National Registration – Speech Language Pathologist

Criteria idi National Registration – Speech Language Pathologist		
Criteria	Speech Language Pathologist	
Definition	A speech-language pathologist is responsible for the diagnosis, prognosis, prescription, and remediation of speech, language, and swallowing disorders. A speech-language pathologist evaluates and treats children and adults who have difficulty in speaking, listening, reading, writing, and/or swallowing. The overall objective of speech-language pathology services is to optimize individuals' ability to communicate and swallow, thereby improving quality of life. As primary care providers for communication and swallowing disorders, speech language pathologists are autonomous professionals; that is, their services are not prescribed or supervised by another professional	
Practice Settings	Speech-language pathologists provide services in a wide variety of settings, which may include but are not exclusive to:	
	 Health care settings (e.g., hospitals, medical rehabilitation facilities, long-term care facilities, home health agencies, clinics, neonatal intensive care units, behavioral/mental health facilities); Public and private schools; 	
	Early intervention settings, preschools, and day care centers;	
	Private practice settings; Universities and university clinics;	
	· Individuals' homes and community residences;	
	· Supported and competitive employment settings;	
	Mental Health; Community agencies and institutions;	
	· Correctional institutions;	
	· Research facilities;	
	· Corporate and industrial settings.	
Education	Initial Requirements for Registration & Licensure for credentials obtained:	
	-Bachelor degree in Speech- Language Pathology/communication disorders sciences.	
	OR Entry level Master in Speech & Language Pathology from accredited college or university	
Scope of Practice	Speech-Language Pathology practice endorses adherence to standards of practice and supports the delivery of effective and efficient care, by individuals who have specialized knowledge, judgment and skills by using systematic and ethical approaches.	
	The Scope of Speech-Language Pathology practice involves but is not limited to: • Screening and Evaluation of the patients before initiating Speech-Language Pathology treatment.	





Criteria	Speech Language Pathologist	
Scope of Practice (Cont'd)	 Development and implementation of a speech, language and swallowing therapy plan of care based on the evaluation of each patient's condition. Re-evaluation including an onsite re-examination of the patient and a review of plan of care with appropriate continuation, revision, or termination of treatment. Documentation of speech, language and swallowing therapy services of the initial examination and evaluation, the plan of care, documentation of each treatment session, re-evaluations, any patient conferences/meetings and discharge summary. Speech Language Pathologists may complete additional post-registration training to be allowed to perform endoscopic evaluations of swallowing. A Speech Language Pathologist may only perform endoscopic evaluations of swallowing if he/she has completed training which Qatar Council For Healthcare Practitioners (QCHP) has approved and have a mark or 'annotation' on their license to show that they have completed that training. Grand-fathered Speech Language Pathologists cannot be authorized to perform endoscopic evaluations of swallowing. 	
Licensure	The speech Language Pathologist must apply for Licensure through Qatar Council For Healthcare Practitioners (QCHP) and other specialty organization.	
Experience	 Completion of mandatory training program or internship program in health care institution within state of Qatar for nationals and residents. 2 year experience in the field of speech-language pathology for overseas candidates. Newly graduates from a recognized academic program for Qatari Nationals and long term residents as per QCHP Circular No.1/2016. 	
Competency validation	 New graduate/ or Speech Language Pathologist with less than 2 years' experience successfully complete a formal internship program at a healthcare institution (signed by a designated authority or accrediting body) Proposed competencies must meet entry to practice criteria according to the proposed scope of practice and competency requirement. 	
Other Requirement for Evaluation & Registration	(Refer to QCHP requirements for license Registration/Evaluation) http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx	
Requirements for License Renewal	(Refer to QCHP requirements for license Registration/Evaluation) http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx	
Note: Applicants with a break from practice please see QCHP "Break from Practice Policy".		





SPEECH LANGUAGE PATHOLOGIST – SCOPE OF PRACTICE AND COMPETENCY FRAMEWORK

INTRODUCTION

The speech-Language Pathology Scope of Practice is based on a competency framework that comprises professional ethics, clinical practice, leadership and management, learning and development, and research intrinsic to the role of the Speech-Language Pathologist. The Scope also describes the qualifications of the Speech-Language Pathologist, professional roles and activities, and practice settings.

STATEMENT OF PURPOSE:

The purpose of this document is to define Speech-Language Pathologists' scope of practice in Qatar to:

- (a) Describe the services offered by qualified Speech-Language Pathologists.
- (b) Define the professional accountability, required competencies, and scope of ethical and legal practice of the Speech-Language Pathologist in relation to patients, families, other members of the multidisciplinary team, community and society.
- (c) Serve as a reference for license regulating authorities and professionals governing healthcare.

DEFINITION OF SPEECH THERAPY:

A speech-language pathologist is responsible for the diagnosis, prognosis, prescription, and remediation of speech, language, and swallowing disorders. A speech-language pathologist evaluates and treats children and adults who have difficulty speaking, listening, reading, writing, and/or swallowing. The overall objective of speech-language pathology services is to optimize individuals' ability to communicate and swallow, thereby improving quality of life. As primary care providers for communication and swallowing disorders, speech-language pathologists are autonomous professionals; that is, their services are not prescribed or supervised by another professional.

PROFESSIONAL ROLES AND ACTIVITIES:

Speech-language pathologists serve individuals, families, and groups from diverse linguistic and cultural backgrounds. Services are provided based on applying the best available research evidence, using expert clinical judgments, and considering clients' individual preferences and values. Speech-language pathologist provides clinical services that include the following:

- Prevention and pre-referral
- Screening
- Assessment/evaluation
- Consultation
- Diagnosis
- Treatment, intervention, management
- Counseling
- Collaboration
- Documentation
- Referral

SLPs address typical and atypical communication and swallowing in the following areas:

- 1. Swallowing and Feeding (Dysphagia)
 - Oral, pharyngeal, laryngeal, esophageal





- Orofacial myology (including tongue thrust)
- Oral-motor functions
- 2. Speech sound production
 - Articulation
 - Apraxia of speech
 - Dysarthria
- 3. Resonance
 - Hyper nasality
 - Hypo nasality
- 4. Voice
 - Phonation quality
 - Pitch
 - Loudness
 - Respiration
- 5. Fluency
 - Stuttering
 - Cluttering
- 6. Language (comprehension and expression)
 - Phonology
 - Morphology
 - Syntax
 - Semantics
 - Pragmatics (language use, social aspects of communication)
 - Literacy (reading, writing, spelling)
 - Prelinguistic communication (e.g., joint attention, intentionality, communicative signaling)
 - Paralinguistic communication

7. Cognition

- Attention
- Memory
- Sequencing
- Problem solving
- Executive functioning

Potential etiologies of communication and swallowing disorders include:

- Neonatal problems (e.g., prematurity, low birth weight, substance exposure);
- Developmental disabilities (e.g., specific language impairment, Autism Spectrum Disorder (ASD), dyslexia, learning disabilities, attention deficit disorder);
- Auditory problems (e.g., hearing loss or deafness);
- Oral anomalies (e.g., cleft lip/palate, dental malocclusion, macroglossia, Oral motor dysfunction);
- Respiratory compromise (e.g., Broncho pulmonary dysplasia, chronic obstructive Pulmonary disease);
- Pharyngeal anomalies (e.g., upper airway obstruction, velopharyngeal Insufficiency/incompetence);
- Laryngeal anomalies (e.g., vocal fold pathology, tracheal stenosis, tracheostomy);
 Neurological disease/dysfunction (e.g., traumatic brain injury, cerebral palsy, cerebral vascular accident, dementia, Parkinson's disease, amyotrophic lateral sclerosis);





- Psychiatric disorder (e.g., psychosis, schizophrenia);
- Genetic disorders (e.g., Down syndrome, fragile X syndrome, Rett syndrome, Velocardiofacial syndrome

Speech Language Pathologists may complete additional post-registration training to be allowed to perform endoscopic evaluations of swallowing. A Speech Language Pathologist may only perform endoscopic evaluations of swallowing if he/she has completed training which Qatar Council For Healthcare Practitioners (QCHP) has approved and have a mark or 'annotation' on their license to show that they have completed that training. Grand-fathered Speech Language Pathologists cannot be authorized to perform endoscopic evaluations of swallowing.

1 DOMAIN ONE: PROFESSIONAL AND ETHICAL PRACTICE

This domain defines the professional accountability and scope of ethical and legal practice of the Speech-Language Pathologist in relation to patients, families, other members of the multidisciplinary team, community and society.

1.1 Competency Standard : Accountability

Accepts accountability for own actions, and decision-making and for the related outcomes.

Performance criteria:

- 1.1.1 Works within the limits of own competence and the boundaries of the Scope of Practice.
- 1.1.2 Identifies opportunities for advocacy, health promotion and disease prevention.
- 1.1.3 Provides care without discrimination on any basis, with respect for the rights and dignity of all individuals.
- 1.1.4 Encourages and promotes appropriate stewardship of resources.
- 1.1.5 Avoids any activity that creates a conflict of interest or violates any Qatari laws and regulations.
- 1.1.6 Promotes the growth of the profession, and presents a positive image of speech-language pathology to the community.

1.2 Competency Standard: Ethical Practice

Demonstrates integrity, accountability, honors the rights and dignity of all individuals, and pursues a quest for excellence in all professional activities that serve the best interests of the patient, society, and the profession.

Performance criteria:

- 1.2.1 Engages in ethical decision-making with respect to own professional responsibilities or where ethical issues affect healthcare delivery or clinical decision-making.
- 1.2.2 Acts as patient advocate protecting the person's rights in accordance with Qatari law and organization specific terms and conditions.
- 1.2.3 Maintains patient confidentiality and makes every reasonable effort to ensure the security of written, verbal and electronic patient information.
- 1.2.4 Respects the patient's (including children and young people and their parents') right to be fully informed, establishing a context for self-determination, assent (children) and informed consent.
- 1.2.5 Acts sensitively and fairly giving due consideration to diversity, including cultural and religious beliefs, race, age, gender, physical and mental state, and other relevant factors.





- 1.2.6 Demonstrates professional integrity and ethical conduct in matters where a conflict of interest could be construed, i.e. when advising on the use of drugs, products, devices or services (as per organizational approved policy and Code of Professional Conduct and Ethics for speech-Language Pathologists).
- 1.2.7 Questions when appropriate, healthcare practice where the safety of others is at risk and where the quality of care warrants improvement; acts where the safety of care is compromised and where necessary reports others who may be risking patient safety.
- 1.2.8 Individuals may practice by telecommunication (e.g., telehealth/e-health), where not prohibited by law.
- 1.2.9 Individuals shall use every resource, including referral when appropriate, to ensure that high-quality service is provided.
- 1.2.10 Individuals shall not misrepresent the credentials of assistants, technicians, support personnel, students, Clinical Fellows, or any others under their supervision, and they shall inform those they serve professionally of the name and professional credentials of persons providing services.
- 1.2.11 Individuals shall fully inform the persons they serve of the nature and possible effects of services rendered and products dispensed, and they shall inform participants in research about the possible effects of their participation in research conducted.
- 1.2.12 Individuals shall not guarantee the results of any treatment or procedure, directly or by implication; however, they may make a reasonable statement of prognosis.
- 1.2.13 Individuals shall enroll and include persons as participants in research or teaching demonstrations only if their participation is voluntary, without coercion, and with their informed consent.
- 1.2.14 Individuals shall not discontinue service to those they are serving without providing reasonable notice.

1.3 Competency Standard: Legal Practice

Functions at all times in accordance with legislative, regulatory and policy guidelines relevant to Speech therapy practice.

Performance criteria:

- 1.3.1 Practices in accordance with agreed policies and procedures that guide speech-language pathology practice.
- 1.3.2 Practices in accordance with relevant laws and regulations that govern speech-language pathology practice.
- 1.3.3 Maintains valid registration and licensure to practice in Qatar.
- 1.3.4 Recognizes and acts upon breaches of laws and regulations relating to the professional role and/or Professional Code of Conduct and Ethics for Speech-Language Pathologist.
- 1.3.5 Maintains a professional portfolio including evidence of continued competence and improvement.

2. DOMAIN TWO: Clinical Practice

As a healthcare profession, Speech-Language Pathology is autonomous profession; that is, the Speech-Language Pathology services are not prescribed or supervised by other professionals.

A speech-language pathologist is responsible for the diagnosis, prognosis, prescription, and remediation of speech, language, and swallowing disorders. A speech-language pathologist evaluates and treats children and adults who have difficulty speaking, listening, reading, writing, and/or swallowing. The overall objective of speech-language pathology services is to optimize individuals' ability to communicate and swallow, thereby improving quality of life. As primary care providers for communication and swallowing disorders, speech-language pathologists are autonomous professionals; that is, their services are not prescribed or supervised by another professional.





Critical thinking, patient/environment assessment skills, and evidence-based clinical practice guidelines enable speech-language pathologists to develop and implement effective care plans, speech-language pathologistsdriven protocols, evidence-based clinical pathways, and disease management programs.

2.1 Competency Standard : Provision of Care

The professional roles and activities in speech-language pathology include clinical/ educational services (diagnosis, assessment, planning, and treatment), prevention and advocacy, education, administration, and research).

Speech-Language Pathology is an autonomous profession providing services to individuals and population.

The practice of speech-language pathology care involves but is not limited to:

- 2.1.1 The provision of speech-language pathology clinical services that is safe, aseptic, preventive, and restorative to the patient.
- 2.1.2 The provision of speech-language pathology clinical services, including but not limited to, the administration of diagnostic and therapeutic agents and or interventions related to speech-language pathology clinical procedures necessary to implement a treatment, disease prevention, swallowing and communication rehabilitative or diagnostic regimen prescribed by a physician.
- 2.1.3 Observation and monitoring of signs and symptoms, general behavior, general physical response to speech-language pathology clinical treatment and diagnostic testing.
- 2.1.4 Determination and taking appropriate action when signs, symptoms, reactions, behavior or general response exhibits abnormal characteristics or undesirable effects.
- 2.1.5 Implementation of appropriate action plan and intervention based on observed abnormalities of appropriate reporting or referral, or speech-language pathology clinical protocols, or changes in treatment regimen.
- 2.1.6 The transcription and implementation of the written and verbal orders of a physician pertaining to the practice of speech-language pathologist.

2.2 Competency Standard : Patient Centered Care

The Speech-Language Pathologist collects and interprets information, makes appropriate clinical decisions, and carries out diagnostic and therapeutic interventions.

Performance criteria:

Speech-language pathologist is an autonomous professional who engages in clinical services, prevention, advocacy and education in the areas of communication and swallowing across the life span from infancy through geriatrics. Given the diversity of the client population, these activities are conducted in a manner that takes into consideration the impact of culture and linguistic exposure/acquisition and uses the best available evidence for practice to ensure optimal outcomes for persons with communication and/or swallowing disorders or differences. Below are specific and detailed examples of the clinical speech- language pathology services:

- 2.2.1 Using data to guide clinical decision making and determine the effectiveness of services.
- Making service delivery decisions (e.g., admission/eligibility, frequency, duration, location, and 2.2.2 discharge/dismissal) across the lifespan;
- 2.2.3 Determining appropriate context(s) for service delivery





- 2.2.4 Documenting provision of services in accordance with accepted procedures appropriate for the practice setting;
- 2.2.5 Collaborating with other professionals (e.g., identifying neonates and infants at risk for hearing loss, participating in palliative care teams, planning lessons with educators, serving on student assistance teams):
- 2.2.6 Providing intervention and support services for children and adults diagnosed with speech and language disorders;
- 2.2.7 Providing intervention and support services for children and adults diagnosed with auditory processing disorders;
- 2.2.8 Using instrumentation (e.g., video fluoroscopy or Modified barium swallow, electromyography, Stroboscopy, Nasendoscopy (FEES & FEEST)/While having access to MD at the same facility, Nasometry, computer technology, neuro muscular electrical stimulation (NMES) like: VitalStim, Guardian Therapy program) to assess, observe, collect data, and measure parameters of communication and swallowing or other upper aero digestive functions;
- 2.2.9 Counseling individuals, families, coworkers, educators, and other persons in the community regarding acceptance, adaptation, and decision making about communication and swallowing;
- 2.2.10 Facilitating the process of obtaining funding providing equipment and services.
- 2.2.11 Serving as a case manager, service delivery coordinators, and members of collaborative teams.
- 2.2.12 Providing referrals and information to other professionals, agencies, and/or consumer organizations;
- 2.2.13 Providing services to individuals with hearing loss and their families/caregivers (e.g., auditory training for children with cochlear implants and hearing aids)
- 2.2.14 Addressing behaviors (e.g., perseverative or disruptive actions) and environments (e.g., classroom seating, positioning for swallowing safety or attention, communication opportunities) that affect communication and swallowing;
- 2.2.15 Selecting, fitting, and establishing effective use of prosthetic/adaptive devices for communication and swallowing (e.g., tracheoesophageal prostheses, speaking valves, and electro larynx).
- 2.2.16 Providing services to modify or enhance communication performance (e.g., accent modification).
- 2.2.17 Assessment, selection, and development of multi-model augmentative and alternative communication systems and devices for individuals who are limited in their ability to communicate verbally, and provision of education and training in their use.

2.3 Competency Standard: Evidence-Based Practice

Integrates evidence and research findings into practice.

Performance Criteria:

- 2.3.1 Utilizes current evidence-based knowledge, including research findings, to guide speech-language pathology practice.
- 2.3.2 Incorporates credible critically appraised evidence into speech-language pathology practice and when initiating change.
- 2.3.3 Participates in the formulation of evidence-based practice based on best available credible research and/or national and international professional consensus, guidance and audit.
- 2.3.4 Disseminates personal or third-party research, practice development and audit findings with colleagues and peers in order enhance speech-language pathology interventions and inform care delivery.
- 2.3.5 Critically evaluates research, audit and practice development findings that underpin speech therapy practice.
- 2.3.6 Promotes dissemination, use, monitoring and review of professional standards and best practice guidelines.





2.4 Competency Standard : Communication and Teamwork

Uses communication skills to ensure that other members of the health care team, the patient and their family are and remain fully informed.

Performance Criteria:

- 2.4.1 Establishes relationships of trust, respect, honesty and empathy.
- 2.4.2 Gathers information about disease, but also about a patient's beliefs, concerns, expectations and illness experience.
- 2.4.3 Seeks out and synthesizes relevant information from other sources, such as patient's family, caregivers and other professionals.
- 2.4.4 Delivers information to patients and their families, colleagues, and other members of the healthcare team, in a way that is understandable, and that encourages discussion and participation in decision-making.
- 2.4.5 Demonstrates cultural competence across all patient groups.
- 2.4.6 Consistently and clearly communicates relevant, accurate and comprehensive information in verbal, written and electronic forms in a timely manner to ensure the delivery of safe, competent and ethical care
- 2.4.7 Participates in building consensus and or resolving conflict in the context of patient care.
- 2.4.8 Engages in teamwork and the team-building processes.
- 2.4.9 Works effectively with other professionals to prevent, negotiate and resolve inter-professional conflict.

3 **DOMAIN THREE: Leadership and Management**

Exhibits leadership qualities required for the provision of safe, effective speech-language pathology care. This domain includes concordance with the healthcare organization's Code of Behaviors as the operating framework.

3.1 Competency Standard : Leadership

3.1 Assure the quality of the Speech Language pathology practice.

Performance Criteria:

- 3.1.1 Engage in evidence-based practice, evaluate practice systematically and participate in audit procedures.
- 3.1.2 Gather information, including qualitative and quantitative data that helps to evaluate the responses of service users to their care
- 3.1.3 Be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
- 3.1.4 Maintain an effective audit trail and work towards continual improvement.
- 3.1.5 Understand and participate in quality assurance programs, where appropriate
- 3.1.6 Evaluate intervention plans using recognized outcome measures and revise the plans as necessary in conjunction with the service user
- 3.1.7 Recognize the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programs





3.2 Competency Standard : Quality Improvement and Safety

Ensures speech-language pathology practice meets organizational quality and safety standards and guidelines and participates in continuous quality improvement.

Performance criteria:

- 3.2.1 Practices in accordance with approved quality standards and guidelines reflecting recognized evidence based best practice.
- 3.2.2 Seeks evidence from a wide range of credible sources to maintain, extend and evaluate the quality of care.
- 3.2.3 Acts immediately and appropriately in accordance with the national and/or institutional disaster plan as needed participating in triage and coordination of care for patients.
- 3.2.4 Implements quality assurance and risk management strategies.
- 3.2.5 Ensures a safe environment by identifying actual and potential risks and takes timely action to meet national legislation and workplace health and safety principles.
- 3.2.6 Acknowledges own limitations in knowledge, judgment and/or skills, and functions within those limitations.
- 3.2.7 Recognizes less than optimum or unsafe practice in self and others and intervenes, records and reports, and acts to access and/or provides support to ensure remediation of deficiencies.
- 3.2.8 Participates in ongoing quality improvement and risk management initiatives.
- 3.2.9 Adheres to and implements infection control policies and procedures.
- 3.2.10 Communicates and records safety concerns to the relevant authority and documents response.

3.3 Competency Standard : Delegation and Supervision

Delegates and provides supervision to team members according to their competence and scope of practice. **Performance Criteria:**

- 3.3.1 Delegates to others, activities commensurate with their abilities and scope of practice
- 3.3.2 Uses a range of supportive strategies when supervising aspects of care delegated to others.
- 3.3.3 Maintains accountability and responsibility when delegating aspects of care to others.

4 DOMAIN FOUR: Education, learning and development

4.1 Competency Standard : Education and Facilitation

Demonstrates commitment to the development of other members in the healthcare team, as well as patients, families, community and society.

Performance criteria:

- 4.1.1 Shares and disseminates professional knowledge and research findings with others.
- 4.1.2 Acts as a resource person for others.
- 4.1.3 Contributes to the formal and informal education and professional development of students and colleagues facilitating and where appropriate coordinating learning opportunities.
- 4.1.4 Acts as an effective preceptor and/or mentor as assigned, undertaking appropriate preparation and updating to undertake the roles.
- 4.1.5 Takes opportunities to learn together with others in order to contribute to health care improvement.





4.2 Competency Standard: Lifelong learning

Assumes responsibility for own professional development through lifelong learning to ensure continued competence and performance improvement.

Performance criteria:

- 4.2.1 Undertakes regular self-assessment and reviews own practice through reflection, peer review, competency assessment, critical examination and evaluation.
- 4.2.2 Instigates planned updating knowledge and skills for safe, person-centered, evidence-based practice.
- 4.2.3 Actively engages in ongoing professional development and performance improvement of self and others.
- 4.2.4 Maintains a record of learning and professional development activities and accreditation.

4.3 Competency Standard: Promotion of health and patient education

Will enable and provide information on maintaining and optimizing health and maximizing self-care.

Performance criteria:

- 4.3.1 Takes part in health promotion, patient education and illness prevention initiatives and contributes to their evaluation.
- 4.3.2 Applies knowledge of resources available for health promotion and health education.
- 4.3.3 Acts to empower the individual, family and community to adopt healthy lifestyles and concord with self-management of ill-health to promote wellbeing.
- 4.3.4 Provides relevant health information and patient education to individuals, families and communities to assist in achieving optimal health and rehabilitation.
- 4.3.5 Demonstrates understanding of traditional healing practices within an individual's, family and/or community's health belief systems and incorporates appropriately and/or provides education if adversely effecting optimum health.
- 4.3.6 Recognizes the potential for patient education and teaching for health and wellbeing in speech therapy interventions.
- 4.3.7 Applies knowledge of a variety of teaching and learning strategies with individuals, families and communities to effect and evaluate learning and concordance with treatment and advice.

5 DOMAIN FIVE: RESEARCH AND IMPROVEMENT

This domain articulates the requirement that the speech-language pathologist should practice incorporating best available evidence to provide quality health care and contribute to the creation and/or implementation of knowledge through active participation.

5.1 Competency Standard: Using data and information systems

Uses data systems to enhance the quality and delivery of patient care.

Performance Criteria:

5.1.1 Acquires the information technology skills needed to inform and provide optimum healthcare care and document accurately outcomes of interventions.





- 5.1.2 Understands how to use technology and data to assist in problem identification and identification of deficiencies that can be remediated to enable improvements in patient care.
- 5.1.3 Analyses data accurately and comprehensively leading to appropriate interpretation of findings and development of implementation plans.

5.2 Competency Standard : Research Participation

Uses research, evaluation, service improvement and audit findings to enhance the quality of patient care and protect the rights of those participating.

Performance Criteria:

- 5.2.1 Participates in activities that disseminate research findings such as publications, journal clubs, grand rounds and presentations.
- 5.2.2 Promotes research, evaluation, service improvement initiatives and audit, designed to improve healthcare practice and disseminate findings to colleagues, patients, families, communities, and society.
- 5.2.3 Undertakes appropriate development to ensure competency to recruit, ensure informed consent is obtained, support involvement, facilitate, monitor and where appropriate advocate withdrawal of individuals participating in clinical research and evaluation.

References

- 1. American Speech-Language-Hearing Association. (2005). Evidence-based practice in Communication disorders [Position statement]. Available from www.asha.org
- 2. American Speech-Language-Hearing Association. (2004). Scope of practice in audiology. Available from www.asha.org
- 3. World Health Organization. (2001). International classification of functioning, disability and health.
- 4. American Speech Language Hearing Association. http://www.asha.org/docs/html/SP2007-00283.html.
- 5. The Canadian Society of Speech therapists (2011). Levels of Practice. http://www.csrt.com/en/professional/levels_practice-nov25-2011.asp
- 6. The Canadian Society of Speech therapists. Standards of Practice. http://www.csrt.com/en/professional/standards practice.asp.
- 7. The Philippine Speech therapy Act of 2009, Implementing Rules and Regulations of R.A. No.10024 Republic of The Philippines , Professional Regulation Commission , Manila Philippines http://www.lawphil.net/statutes/repacts/ra2010/ra 10024 2010.html





Criteria	Psychological Counsellor
Definition	Psychological Counsellors work with individuals, couples, families, groups, and organizations; over a short or long term to help them bring about effective change or enhance their wellbeing. Psychological Counsellors may assess and treat mental and emotional disorders, including addictive disorders; employ psycho-educational techniques aimed at the prevention of such disorders; consult with and conduct research into more effective therapeutic treatment modalities. Psychological Counsellors may not prescribe drug therapies or dispense medication. Psychological Counsellors may not do independent psychological testing and will not provide care in cases of severe/serious mental illness or in psychiatric emergencies.
Practice Settings	 Mental Health Primary Care Medical Facilities (Hospitals, Clinics) Schools, Universities and Special Needs Centers Governmental & Private Sector organizations Psychological Counselling centers (under development)
Education	Master's or doctoral degree in Psychological counseling, Family Therapy, Mental health or any health related field from an accredited institution of higher education, including an internship and coursework on human behavior and development, effective counseling strategies, ethical practice, and other core knowledge areas.
Scope of Practice	 The scope of Psychological Counselor specialty involves: Individual counseling Group counseling Clinical Psychological counseling Childhood Psychological counseling Couples Psychological counseling Family Psychological counseling Specific group Psychological counseling Behavioral deviation Psychological counseling Managerial and professional Psychological counseling Educational level Psychological counseling Safety Psychological counseling The scope of Psychological Counselor services also includes: Counseling sessions Assessment & Psychological Benchmarking Psychological Counseling programs to adjust behavior and understandings of different age groups Professional and self-development counseling programs





	The Services which are not in the Scope of the Psychological Counselling 1. Independent Psychological Testing (cognitive, intellectual, neuropsychological) 2. Treatment of Severe/Serious mental illness 3. Psychiatric/Psychological emergencies. In case of psychiatric / psychological emergency, psychology counselor to refer the patient to appropriate facility. Some examples of Psychiatric/Psychological emergencies include but not limited to
	suicidality, eating disorder, risk of harm to the patient or others.
Licensure	The Psychological Counsellor must apply for registration& licensing through Qatar Council For Healthcare Practitioners (MOPH).
Experience	 For individuals whose terminal degree is a Master's degree: Completion of a minimum of 3,000 hours (usually 2 year equivalent) of post-master's degree supervised clinical experience For individuals whose terminal degree is a Doctoral degree: Completion of a minimum of 1500 hours (usually 1 year equivalent) of post-doctoral' s degree supervised clinical experience.
Competency validation	Competency will be validated through the verification of education (degree), certificates and relevant clinical experience.
Other Requirement for Evaluation & licensing	(Refer to QCHP requirement for license Registration & licensing) http://www.qchp.org.qa//en/Documents/Guidelines%20for%20Allied%20Healthcare%20Practitioners.pdf
Requirements for License renewal	(Refer to additional QCHP requirement for license Registration/Evaluation) http://www.qchp.org.qa//en/Documents/Guidelines%20for%20Allied%20Healthcare%20Practitioners.pdf





<u>Psychological Counselor Scope of Practice</u>

INTRODUCTION

The Psychological Counselor scope of practice is based on a competency framework that comprises **professional ethics, clinical practice, leadership, learning, management and research** domains intrinsic to the role of the Psychological Counselor. The scope also describes the professional roles and activities and practice settings for the Psychological Counselor profession. This document sets out the standards of proficiency required for safe and effective practice in the Psychological Counselor profession. They are the threshold standards necessary to protect members of the public. Once on the Qatar Ministry of Public Health for Health Professionals Register, the licensed professional must continue to meet the standards of proficiency which relate to the areas in he/she works. Periodic updating of the scope of practice statement and standards of proficiency will be necessary as technology and perspective change.

The Psychological Counselor, as an autonomous professional, has the freedom to exercise their professional judgment and decision making, wherever they practice, as long as this is within their knowledge, competence and scope of practice. A Psychological Counselor scope of practice may mean that she/he is able to continue to practice safely across the whole scope of the psychological counseling profession. However, as long as the professional practices safely and effectively within his/her individual scope and does not practice in areas she/he is no longer proficient to do so, no problems will arise. If a licensed professional moves outside of the traditional scope of practice of the Psychological Counselor profession such as occurs in extended scope practice, the licensed professional is responsible for ensuring that this is within their knowledge, skills and expertise so that they continue to work safely, lawfully and effectively. The licensed professional must have evidence of advanced competencies in order to address responsibilities that extend beyond traditional boundaries of psychological counselor advanced practice.

STATEMENT OF PURPOSE:

The purpose of this document is to define Psychological Counselor scope of practice in Qatar to:

- (a) Describe the services offered by a qualified Psychological Counselor.
- (b) Define the professional accountability, required competencies, and scope of ethical and legal practice of the Psychological Counselor in relation to patients, families, other members of the multidisciplinary team, community and society.
- (c) Serve as a reference for license regulating authorities and professionals governing healthcare.





DEFINITION OF PSYCHOLOGICAL COUNSELOR:

The Psychological Counselor works with individuals, couples, families, groups, and organizations; over a short or long term to help them bring about effective change or enhance their wellbeing. Psychological Counsellors may make an assessment and manage treatment within their purview mental and emotional disorders, including addictive disorders; employ psycho-educational techniques aimed at the prevention of such disorders; and conduct research into more effective therapeutic treatment modalities.

PROFESSIONAL ROLES AND ACTIVITIES:

A Psychological Counselor is a qualified health care professional who is responsible for assessment, intervention, program planning and implementation, regular review, and carrying out related documentation using systematic clinical reasoning and decision making.

The Psychological Counselor assumes responsibility for the ethical delivery of all psychological counseling services and for the safety and effectiveness of psychological counseling services provided. Psychological Counselor may practice at different levels of practice based on their competencies and job profiles.

Psychological Counselor may work in the following practice settings:

- Mental Health
- Primary Care
- Medical Facilities (Hospitals, Clinics)
- Schools, Universities and Special Needs Centers
- Governmental & Private Sector organizations
- Psychological Counselling centers (under development)

The scope of practice for psychological Counselor involves the following specialty:

1: Individual Counseling

Individual Counseling helps the individual to understand and address his/her personal, social and professional problems and to develop abilities in order to reach adaptation to the self and the environment through a life with minimal psychological disturbances or stress.

2: Group Counseling

A group of individuals share a common goal to develop their abilities, adapt to the environment and solve their problems to reach a sense of psychological satisfaction. Additionally, it may help solve general problems or behavioral or psychological disorders through collective support. Group Counseling helps individuals to experience new behaviors to improve collective communication, and to receive feedback. Moreover, the psychological counseling is directed towards treatment with an aim to help individuals by building relationships to achieve the best level of compatibility and psychological development in order to treat mental illness and behavioral disorders.





3: Psychological Counseling in Clinical Populations

This is a form of counseling that deals with the psychological illness and its related problems. This type of counselling aims to help the client or his/her representative to understand the situation by providing clinical assistance through assessment and intervention sessions. Collaboration between the client's psychiatrist and his/her counselor is crucial. The counselling here is based on therapeutic counselling programs aimed to reach the desired goal.

4: Childhood Psychological Counseling

It is a type of counselling which is based on the counsellor's cooperation with parents or interested parties.

It aims to help children develop psychologically, socialize properly and to solve their daily problems. Additionally, it helps the children achieve sound, integrated growth and to live in harmony with their societies. The most important problems during childhood are:

- Food disorders (rejection, lack of appetite, vomiting, over eating, and forcing children to eat).
- Speech disorders (stuttering delayed speech).
- Behavioral disorders (lying, theft, hyperactivity, dispersion of the intestine, fear, involuntary urination)
- Emotional development and well-being of children.
- Social and communication disorders

Social and communication disorders: Career Psychological Counseling

It is concerned with reducing the pressures of professional in-compatibility, overcoming work problems and achieving the highest levels of productivity. In addition, it aims to prepare the employee psychologically, socially and professionally, to make him/her able to carry out his/her duties, assume responsibilities and to work according to the principles of leadership and cooperation.

6: Couples Psychological Counseling

Providing counseling and psychological support sessions to the couples to reach a stable and successful relationship through the proper understanding and adaptation. Stability of the marriage relationship has a significant impact on building stronger families. In addition, it will reduce the potential divorce rates due to the emotional problems between the spouses. Psychological counseling is therefore a safe way to guide spouses on how to acquire communication skills, solve family problems and to reach healthy harmony.

7: Family Psychological Counseling

Helping family members (parents - children - relatives) to understand the family life along with its liabilities to achieve stability, family harmony and to solve family problems.





8: Specific Category Psychological Counseling

All specific groups that need counselling, guidance and psychological support includes talented people, chronic patients, special cases such as (prisoners and forensic specialty) people with hearing and sight impairment, learning disabilities, physical disabilities, the elderly, divorcees and widows.

9: Behavioral deviations Psychological Counseling

This type of counselling deals with behavioral deviations in individuals such as addiction and sexual anomalies.

10. Management, Educational, Safety Psychological Counselling

Psychological Services include but not limited to the following:

1. Counseling Sessions

Includes all types of counseling sessions for individuals, groups, couples and families based on their situations and outcomes.

2. Assessment & benchmarking Psychologically

Include all assessments that will identify the psychological and behavioral disorders in the individual which is determined by the specialist. The extent of growth and development will vary from individual to individual.

3. Psychological Counselling programs to develop behavior and awareness of different age groups

Counseling programs are designed to improve individual behavior and to develop and acquire proper skills, behaviors and knowledge.

4. Professional and self-development counseling programs

This program is structured to increase awareness and self-development of the individual or the group, which will positively reflect on his life and relationship with others.

- Assessment & Psychological Benchmarking
- Psychological Counselling programs to adjust behavior and understandings of different age groups
- Professional and self-development counselling programs





COMPETENCY FRAMEWORK

1 DOMAIN ONE: PROFESSIONAL AND ETHICAL PRACTICE

This domain defines the professional accountability and scope of ethical and legal practice of the psychological counselor in relation to patients, families, other members of the multidisciplinary team, community and society.

1.1 Competency Standard 1.1: Accountability

Accepts accountability for own actions, and decision-making and for the related outcomes.

Performance criteria:

- 1.1.1 Works within the limits of own competence and the boundaries of personal and professional Scope of Practice.
- 1.1.2 Identifies opportunities for advocacy, health promotion and disease prevention.
- 1.1.3 Provides care without discrimination on any basis, with respect for the rights and dignity of all individuals.
- 1.1.4 Encourages and promotes appropriate stewardship of resources.
- 1.1.5 Avoids any activity that creates a conflict of interest or violates any Qatari laws and regulations.
- 1.1.6 Promotes the growth of the profession, and presents a positive image of psychological Counselor to the community.

1.2 Competency Standard 1.2: Ethical Practice

Demonstrates integrity, accountability, honors the rights and dignity of all individuals, and pursues a quest for excellence in all professional activities that serve the best interests of the patient, society, and the profession.

Performance criteria:

- 1.2.1 Engages in ethical decision-making with respect to own professional responsibilities or where ethical issues affect healthcare delivery or clinical decision-making.
- 1.2.2 Acts as patient advocate, protecting the person's rights in accordance with Qatari law and organization specific terms and conditions.
- 1.2.3 Maintains patient confidentiality and makes every reasonable effort to ensure the security of written, verbal and electronic patient information.
- 1.2.4 Respects the patient's (including children and young people and their parents') right to be fully informed, establishing a context for self- determination, assent (children) and informed consent.
- 1.2.5 Acts sensitively and fairly giving due consideration to diversity, including cultural and religious beliefs, race, age, gender, physical and mental state, and other relevant factors.
- 1.2.6 Questions when appropriate, healthcare practice where the safety of others is at risk and where the quality of care warrants improvement; acts where the safety of care is compromised and where necessary, reports others who may be risking patient safety.





1.3 Competency Standard 1.3: Legal Practice

Functions at all times in accordance with legislative, regulatory and policy guidelines relevant to clinical psychology practice in Qatar.

Performance criteria:

- 1.3.1 Practices in accordance with agreed policies and procedures that guide psychological counselor
- 1.3.2 Practices in accordance with relevant State of Qatar laws and regulations that impact psychological counselor practice.
- 1.3.3 Maintains valid registration and licensure to practice in Qatar.
- 1.3.4 Maintains a professional portfolio including evidence of continued competence and improvement.

DOMAIN TWO: CLINICAL PRACTICE

As an autonomous healthcare profession, psychological counselor is practiced in partnership with members of the inter-professional team, service users, support staff and others in order to deliver collaborative care across the healthcare continuum. Critical thinking, patient and environment assessment skills and evidence-based clinical practice guidelines enable psychological counselor to autonomously develop and implement effective care plans, psychological counselor driven protocols, disease based clinical pathways and management programs.

2.1 Competency Standard 2.1: Provision of Care

Psychological Counselor serves a diverse population and may function in one or more of a variety of activities. The practice of psychological counselor care includes but is not limited to assessment, program planning and intervention to allow service users to participate in everyday life activities and life roles.

Performance criteria:

- 2.1.1 Maintains the provision of psychological counselor care services that are safe, evidence based, preventative and restorative to the patient.
- 2.1.2 Keeps accurate, contemporaneous, comprehensive and legible records of patient care in accordance with applicable legislation, protocols and guidelines. This includes Qatar Ministry of Public Health requirements, Code of Ethics and Professional Conduct for mental health professionals in Qatar and local guidance at a facility level.
- 2.1.3 Provides Psychological Counselor services including, but not limited to independent assessment and evaluation of patient needs and functional abilities using both standardized and non-standardized assessments within their purview.
- 2.1.4 Formulates and implements appropriate care plans based on assessment results, taking into account service users' values, beliefs and interests.
- 2.1.5 Implements appropriate action plans and interventions based on observed functional deficits, appropriate reporting or referral according to evidence based clinical care.





- 2.1.6 Evaluates intervention plans using recognized outcome measures and revise plans as necessary in conjunction with service users.
- 2.1.7 Provides health promotion and prevention activities as deemed clinically appropriate in order to remove barriers to independence, promote health and foster wellbeing

2.2 Competency Standard 2.2: Patient Centered Care

The psychological counselor is responsible for ensuring that the patient is at the center of all decisions about care wherever possible.

Performance criteria:

- 2.2.1 Understands the need to adopt an approach which centers on the patient and establishes appropriate professional relationships in order to motivate and involve the service user in meaningful occupation.
- 2.2.2 Uses formal (structured interview) or informal (conversational, narrative building) strategies to establish a comprehensive psychological counseling profile of the client. This should include an understanding of the values, beliefs and interests of the service user, their families and other appropriate parties.
- 2.2.3 Synthesizes information from the service users' psychological counseling narrative/profile in order to plan for future interventions and services.
- 2.2.4 Understands the need to provide service users and/or people authorized to act on their behalf with the information necessary to enable them to make informed decisions.
- 2.2.5 Provides appropriate education and training for patients, families and caregivers.
- 2.2.6 Works collaboratively with patient and families to set meaningful goals and outcome measures.
- 2.2.7 Uses approaches to intervention including creating or promoting, establishing or restoring, maintaining and modifying the skills, abilities and contexts that influence psychological counseling performance and engagement.
- 2.2.8 Understands the need to engage patient, families and care-givers in planning and assessing diagnostics, treatments and intervention in order to meet their occupational goals and needs.
- 2.2.9 Understands the therapeutic use of self, including one's personality, insights, perceptions, and judgments as part of the therapeutic process.

2.3 Competency Standard 2.3: Evidence-Based Practice

Integrates best available evidence, clinical audit and research into practice to ensure quality of provision.

Performance Criteria:

- 2.3.1 Utilizes current evidence-base, including recent research findings, and best available evidence to guide psychological counselor practice.
- 2.3.2 Incorporates credible critically appraised evidence into psychological counselor practice and when initiating change in practice.
 - Participates in the formulation of evidence-based practice based on best available credible research and/or national and international professional consensus, guidance and audit.





- 2.3.3 Gathers and uses information, including qualitative and quantitative data in order to evaluate outcomes for services users engaged in psychological counselor care.
- 2.3.4 Is aware of the role of audit and review in quality improvement and quality assurance.
- 2.3.5 Evaluates the efficacy and effectiveness of both new and established interventions and technologies using recognized outcome measures.
- 2.3.6 Participates in generating new evidence to improve quality of care through research, clinical audit and quality improvement programs.

2.4 Competency Standard 2.4: Communication and Teamwork

Uses communication skills to ensure that other members of the health care team, the patient and their family are and remain fully informed.

Performance Criteria:

- 2.4.1 Establishes relationships of trust, respect, honesty and empathy.
- 2.4.2 Gathers information about disease, but also about a patient's beliefs, concerns, expectations and illness experience.
- 2.4.3 Seeks out and synthesizes relevant information from other sources, such as patient's family, caregivers and other professionals.
- 2.4.4 Delivers information to patients and their families, colleagues, and other members of the healthcare team, in a way that is understandable, and that encourages discussion and participation in decision-making.
- 2.4.5 Demonstrates cultural competence across all patient groups.
- 2.4.6 Consistently and clearly communicates relevant, accurate and comprehensive information in verbal, written and electronic forms in a timely manner to ensure the delivery of safe, competent and ethical care.
- 2.4.7 Understands how communication affects engagement of service users.
- 2.4.8 Able to modify means of communication to take into account important variables such as age, capacity, learning and physical ability.
- 2.4.9 Shows awareness of verbal and non-verbal communication and how this can be affected by factors such as age, culture, ethnicity, gender, socio-economic status and spiritual or religious beliefs.
- 2.4.10 Participates in building consensus and or resolving conflict in the context of patient care and the multiprofessional team.
- 2.4.11 Engages proactively in teamwork and the team-building processes.
- 2.4.12 Works effectively with other professionals to prevent, negotiate and resolve inter-professional conflict.

3 DOMAIN THREE: LEADERSHIP AND MANAGEMENT

Exhibits leadership qualities required for the provision of safe, effective clinical psychology care. This domain includes concordance with the Code of Ethics and Professional Conduct and the healthcare organization's Code of Behavior as the operating frameworks.





3.1 Competency Standard 3.1: Leadership

Exhibits leadership qualities and manages psychological counseling care safely, efficiently and ethically.

Performance Criteria:

- 3.1.1 Applies clinical reasoning, critical thinking and problem solving skills in the provision, management and evaluation of care.
- 3.1.2 Manages self, and where appropriate assists others, to ensure effective workload prioritization and time management.
- 3.1.3 Provides feedback, offers suggestions for change and deals effectively with the impact of change on own practice, the team and/or on the organization.
- 3.1.4 Advocates for, and contributes to the creation and maintenance of a positive working environment and team working.
- 3.1.5 Participates in the mentorship and coaching of others maximizing the effectiveness of psychological counseling interventions, the provision of quality health care and the profession.
- 3.1.6 Acts as a role model for colleagues, students and other members of the healthcare care team by treating all with respect, trust and dignity.
- 3.1.7 Fosters the advancement of psychological counseling autonomy and accountability.
- 3.1.8 Promotes and maintains a positive image of psychological counselor.
- 3.1.9 Assumes leadership responsibilities, as appropriate, in the delivery of psychological counseling care.

3.2 Competency Standard 3.2: Quality Improvement and Safety

Ensures psychological counselor practice meets organizational quality and safety standards and guidelines and participates in continuous quality improvement.

Performance criteria:

- 3.2.1 Practices in accordance with approved quality standards and guidelines reflecting recognized evidence based best practice.
- 3.2.2 Seeks evidence from a wide range of credible sources to maintain, extend and evaluate the quality of psychological counseling care.
- 3.2.3 Implements quality assurance and risk management strategies.
- 3.2.4 Ensures a safe environment by identifying actual and potential risks and takes timely action to meet national legislation and workplace health and safety principles.
- 3.2.5 Acknowledges limitations in knowledge, judgment and/or skills, and functions within those limitations.
- 3.2.6 Recognizes less than optimum or unsafe practice in self and others and intervenes, records and reports, and acts to access and/or provides support to ensure remediation of deficiencies.
- 3.2.7 Participates in ongoing quality improvement and risk management initiatives.
- 3.2.8 Adheres to and implements infection control policies and procedures.
- 3.2.9 Communicates and records safety concerns to the relevant authority and documents response.

3.3 Competency Standard 3.3: Delegation and Supervision

Delegates and provides supervision to team members according to their competence and scope of practice.





Performance Criteria:

- 3.1.1 Delegates to others, activities commensurate with their abilities and scope of practice.
- 3.1.2 Uses a range of supportive strategies when supervising aspects of care delegated to others.
- 3.1.3 Maintains accountability and responsibility when delegating aspects of care to others.

4 DOMAIN FOUR: EDUCATION, LEARNING AND DEVELOPMENT

4.1 Competency Standard 4.1: Education and Facilitation

Demonstrates commitment to the development of other members in the healthcare team, as well as patients, families, community and society.

Performance criteria:

- 4.1.1 Shares and disseminates professional knowledge and research findings with others.
- 4.1.2 Acts as a resource person for others.
- 4.1.3 Takes opportunities to learn together with others in order to contribute to health care improvement.

4.2 Competency Standard 4.2: Lifelong learning

Assumes responsibility for own professional development through lifelong learning to ensure continued competence and performance improvement.

Performance criteria:

- 4.2.1 Undertakes regular self-assessment and reviews own practice through reflection, peer review, competency assessment, critical examination and evaluation.
- 4.2.2 Instigates planned updating knowledge and skills for safe, person-centered, evidence-based practice.
- 4.2.3 Actively engages in ongoing professional development and performance improvement of self and others.
- 4.2.4 Maintains a record of learning and professional development activities and accreditation commensurate with the Ministry of Public Health continuing professional development standards.
- 4.2.5 Understands the value of case discussion, clinical supervision and other methods of reflecting and reviewing practice.

4.3 Competency Standard 4.3: Promotion of health and patient education

Enable and provide information on maintaining and optimizing health and maximizing self-care to service users as appropriate.

Performance criteria:

- 4.3.1 Takes part in health promotion, patient education and illness prevention initiatives and contributes to their evaluation.
- 4.3.2 Applies knowledge of resources available for health promotion and health education.





- 4.3.3 Acts to empower the individual, family and community to adopt healthy lifestyles and concord with self-management of ill-health to promote wellbeing.
- 4.3.4 Provides relevant health information and patient education to individuals, families and communities to assist in achieving optimal health and rehabilitation.
- 4.3.5 Demonstrates understanding of traditional healing practices within an individual's, family and/or community's health belief systems and incorporates appropriately and/or provides education if adversely effecting optimum health.
- 4.3.6 Recognizes the potential for patient education and teaching for health and wellbeing in psychological counselor interventions.
- 4.3.7 Applies knowledge of a variety of teaching and learning strategies with individuals, families and communities to effect and evaluate learning and concordance with treatment and advice.

5 DOMAIN FIVE: RESEARCH AND IMPROVEMENT

This domain articulates the requirement that the psychological counselor should practice incorporating best available evidence to provide quality health care and contribute to the creation and/or implementation of knowledge through active participation.

5.1 Competency Standard 5.2: Using data and information systems

Uses data systems to enhance the quality and delivery of patient care.

Performance Criteria:

- 5.1.1 Demonstrates information technology skills needed to inform and provide optimum healthcare and accurately document outcomes of interventions.
- 5.1.2 Understands how to use technology and data to assist in problem identification and identification of deficiencies that can be remediated to enable improvements in patient care.
- 5.1.3 Analyses data accurately and comprehensively leading to appropriate interpretation of findings and development of implementation plans.
- 5.1.4 Recognizes the need to manage records and all other information in accordance with applicable legislation, protocols and guidelines.

5.2 Competency Standard 5.3: Research Participation

Uses research, evaluation, service improvement and audit findings to enhance the quality of patient care and protect the rights of those participating. *Performance Criteria:*

- 5.2.1 Participates in activities that disseminate research findings such as publications, journal clubs, grand rounds and presentations.
- 5.2.2 Promotes research, evaluation, service improvement initiatives and audit, designed to improve healthcare practice and disseminate findings to colleagues, patients, families, communities, and society.





References:

- American Psychological Association: www.apa.org/ed/accreditation
- National Board For Clinical Counseling: http://www.nbcc.org/Certification-Licensure
- Canadian Counseling and Psychotherapy Association (CCPA):
 - http://www.ccpa-accp.ca/en/memberbenefits/certification
- Canadian Professional Counselors Association (CPCA):

http://www.cpca-rpc.ca http://www.cpca-rpc.ca