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المجلس القطري للخصصات الصحية
Qatar Council for Healthcare Practitioners
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Psychology Scopes

Clinical Psychologist
Clinical Social Worker
Child Life Specialist
Speech Language Pathologist
Psychological Counsellor
Audiology Technologist
Audiology Technician
Assistant Psychologist



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: <ul style="list-style-type: none">• 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: <ul style="list-style-type: none">• 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.



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Other Requirement for Evaluation & Registration	<i>(Refer to QCHP requirement for license Registration/Evaluation)</i> http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx
Requirements for License renewal	Evidence of practice as a Clinical Psychologist in the period since obtaining last license. 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. <i>(Refer to additional QCHP requirement for license Registration/Evaluation)</i>
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



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- 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 carrying 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.



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- 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 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 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 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 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.



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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-help-you/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	<p>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.</p>
Practice Settings	<p>Clinical Social Workers provide services in a wide variety of settings, which may include but are not exclusive to:</p> <ul style="list-style-type: none">• 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	<p>Bachelor Degree OR Entry level Master Degree in Social Work.</p>
Scope of Practice	<p>The Scope of Clinical Social Work practice involves but is not limited to:</p> <ul style="list-style-type: none">• 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...)	<ul style="list-style-type: none">• 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 <p>For more detailed scope of practice please refer to Clinical Social Work scope of practice attached.</p>
Licensure	The Clinical Social Worker must apply for Licensure through Qatar Council For Healthcare Practitioners (QCHP).
Experience	<ul style="list-style-type: none">• 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	<ul style="list-style-type: none">• Proposed competencies must meet entry to practice criteria according to the proposed scope of practice and competency requirement.
Other Requirement for Evaluation & Registration	<i>(Refer to QCHP requirements for license Registration/Evaluation)</i> http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx
Requirements for License Renewal	<i>(Refer to QCHP requirements for license Registration/Evaluation)</i> http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx
Note: Applicants with a break from practice please see QCHP “Break from Practice Policy”.	



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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 compromised 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 DOMAIN TWO: Clinical Practice

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 Competency Standard : Patient Centered Care

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.

Performance Criteria

- 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 in social work interventions.
- 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

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.



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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: <ul style="list-style-type: none">• 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	<ul style="list-style-type: none">• 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. <p>AND</p> <ul style="list-style-type: none">• Successful completion of the Child Life Council Certification (CCLS) exam (available worldwide) resulting in a current CCLS credential. <p>OR</p> <ul style="list-style-type: none">• Current Registration as a Hospital/Health Care Play Specialist (UK, NZ)
Scope of Practice	<p>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.</p> <p>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,</p> <p>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.</p> <p>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</p>



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	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	<i>(Refer to QCHP requirements for license Registration/Evaluation)</i> http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx
Requirements for License renewal	<i>(Refer to QCHP requirements for license Registration/Evaluation)</i> http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx
Note: Applicant with break from practice please see QCHP “Break from Practice Policy”	



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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.



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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

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

- 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 Works 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 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 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.

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 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.



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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.



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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	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: <ul style="list-style-type: none">· 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. <u>OR</u> 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: <ul style="list-style-type: none">• Screening and Evaluation of the patients before initiating Speech-Language Pathology treatment.



Criteria	Speech Language Pathologist
Scope of Practice (Cont'd...)	<ul style="list-style-type: none">• 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. <p>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.</p>
Licensure	The speech Language Pathologist must apply for Licensure through Qatar Council For Healthcare Practitioners (QCHP) and other specialty organization.
Experience	<ul style="list-style-type: none">• 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	<ul style="list-style-type: none">• 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	<p>(Refer to QCHP requirements for license Registration/Evaluation) http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx</p>
Requirements for License Renewal	<p>(Refer to QCHP requirements for license Registration/Evaluation) http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx</p>
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);



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- 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 an 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 pathologists-driven 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.
- 2.2.2 Making service delivery decisions (e.g., admission/eligibility, frequency, duration, location, and 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.

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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	<ul style="list-style-type: none">• Mental Health• Primary Care• Medical Facilities (Hospitals, Clinics)• Schools, Universities and Special Needs Centers• Governmental & Private Sector organizations• Psychological Counselling centers (under development)
Education	<ul style="list-style-type: none">• 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	<p>The scope of Psychological Counselor specialty involves :</p> <ul style="list-style-type: none">• 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 <p>The scope of Psychological Counselor services also includes:</p> <ul style="list-style-type: none">• Counseling sessions• Assessment & Psychological Benchmarking• Psychological Counseling programs to adjust behavior and understandings of different age groups• Professional and self-development counseling programs



	<p>The Services which are not in the Scope of the Psychological Counselling</p> <ol style="list-style-type: none">1. Independent Psychological Testing (cognitive, intellectual, neuropsychological)2. Treatment of Severe/Serious mental illness3. 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	<ul style="list-style-type: none">• 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	<p>(Refer to QCHP requirement for license Registration & licensing) http://www.qchp.org.qa/en/Documents/Guidelines%20for%20Allied%20Healthcare%20Practitioners.pdf</p>
Requirements for License renewal	<p>(Refer to additional QCHP requirement for license Registration/Evaluation) http://www.qchp.org.qa/en/Documents/Guidelines%20for%20Allied%20Healthcare%20Practitioners.pdf</p>

Psychological Counselor Scope of Practice

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.



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التسجيل والترخيص
Registration & Licensing



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 practice.
- 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.

2 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 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 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.



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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.cpcarpc.ca> <http://www.cpcarpc.ca>



Criteria	Audiology Technologist
Definition	The Audiology Technologist is an individual who holds a current, valid license, certification or registration issued under a national authority or board that authorizes them to practice audiology and use the title Audiology Technologist and meets the educational criteria outlined herein.
Practice Settings	Audiology Technologist work in numerous settings, such as hospitals, clinics, schools and private practice.
Education	Bachelor's Degree in Audiology - Or Bachelor of Science in a health-related field + 1 year Diploma in Audiology - Or Entry level Masters in Audiology - Or Bachelors in Speech Language Pathology + Masters in Audiology.
Scope of Practice	Audiology Technologists are professionals engaged in autonomous practice to promote healthy hearing, communication competency, and quality of life for persons of all ages. The practice of audiology includes both the prevention of and assessment of auditory and vestibular impairments as well as the habilitation/rehabilitation and maintenance of persons with these impairments. The overall goal of the provision of audiology services should be to optimize and enhance the ability of an individual to hear, as well as to communicate in his/her every day or natural environment. Audiology Technologist are also involved in advocacy, consultation, education and research.
Experience	For overseas candidates: Two (2) years clinical experience as an Audiology Technologist. New graduates from a recognized academic program for Qatari Nationals and long term residents as per QCHP Circular No.1/2016.
Competency Validation	Competency will be validated through the verification of education (degree), certificates and relevant clinical experience.
Other Requirements for Evaluation & Registration	<i>(Refer to QCHP requirements for license Registration/Evaluation)</i> http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx
Note: Applicants with break from practice please see QCHP's "Break from Practice Policy"	

Audiology Technologist Scope of Practice

INTRODUCTION

The Audiology Technologist scope of practice is based on a competency framework that comprises ethics, clinical practice, leadership and management, learning and management and research domains intrinsic to the role of the Audiology Technologist. The scope also describes the professional roles and activities and practice settings for the audiology profession. This document sets out the standards of proficiency required for safe and effective practice in the audiology profession. They are the threshold standards necessary to protect members of the public. Once on the Qatar Supreme Council 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.

Audiology Technologists provide comprehensive diagnostic and treatment/rehabilitative auditory and vestibular services to diverse populations. These services are provided to individuals across the entire age span from birth through adulthood to individuals from diverse language, ethnic, cultural, and socioeconomic backgrounds and to individuals who have multiple disabilities. Practice activities related to emerging clinical, technological, and scientific developments are not precluded from consideration as part of the scope of practice of an audiology technologist. Such innovations and advances will result in the periodic revision and updating of this document. It is also recognized that specialty areas identified within the scope of practice will vary among the individual providers. Defining the scope of practice of audiology technologists is not meant to exclude other appropriately credentialed postgraduate professionals from rendering services in common practice areas.

STATEMENT OF PURPOSE:

The purpose of this document is to define the Audiology Technologist's scope of practice in Qatar to:

- (a) Describe the services offered by qualified Audiology Technologists.
- (b) Define the professional accountability, required competencies, and scope of ethical and legal practice of the Audiology Technologist 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.



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DEFINITION OF AUDIOLOGY

The practice of audiology includes both the prevention of and assessment of auditory and vestibular impairments as well as the habilitation/rehabilitation and maintenance of persons with these impairments. The overall goal of is to optimize and enhance the ability of an individual to hear, as well as to communicate in his/her every day or natural environment. In addition, Audiology Technologists provide comprehensive services to individuals with normal hearing who interact with persons with a hearing impairment.

PROFESSIONAL ROLES AND ACTIVITIES:

Audiology Technologists are professionals engaged in autonomous practice to promote healthy hearing, communication competency, and quality of life for persons of all ages through the prevention, identification, assessment, and rehabilitation of hearing, auditory function, balance, and other related systems. They facilitate prevention through the fitting of hearing protective devices, education programs for industry and the public, hearing screening/conservation programs, and research. The Audiology Technologist is the professional responsible for the identification of impairments and dysfunction of the auditory, balance, and other related systems. Their unique education and training provides them with the skills to assess and diagnose dysfunction in hearing, auditory function, balance, and related disorders. The delivery of audiologic (re)habilitation services includes not only the selecting, fitting, and dispensing of hearing aids and other hearing assistive devices, but also the assessment and follow-up services for persons with cochlear implants. The Audiology Technologist providing audiologic (re)habilitation does so through a comprehensive program of therapeutic services, devices, counseling, and other management strategies. Functional diagnosis of vestibular disorders and management of balance rehabilitation is another aspect of the professional responsibilities of the Audiology Technologist. Audiology Technologists also engage in research pertinent to all of these domains. Audiology Technologists serve a diverse population and may function in one or more of a variety of activities. The practice of audiology includes prevention, identification, assessment, rehabilitation, advocacy, consultation, education, research and administration.

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

- Promotion of hearing wellness, prevention of hearing loss and protection of hearing function by designing, implementing, and coordinating occupational, school, and community hearing conservation and identification programs
- Provision of comprehensive audiologic rehabilitation services, including rehabilitation for persons with hearing loss, balance or other auditory dysfunction, including but not exclusive to speech reading, auditory training, communication strategies, manual communication and counseling for psychosocial adjustment for persons with hearing loss or other auditory dysfunction and their families/caregivers
- Supervision, implementation, and follow-up of newborn and school hearing screening programs.
- Assessment and non-medical management of tinnitus and hyperacusis using biofeedback, behavioral management, masking, hearing aids, education, and counseling
- Advocacy for communication needs of all individuals that may include advocating for the rights/funding of services for those with hearing loss, auditory or vestibular disorders
- Consultation to educators as members of interdisciplinary teams about communication management, educational implications of hearing loss and other auditory dysfunction, educational programming, classroom acoustics, and large-area amplification systems for children with hearing loss and other auditory dysfunction



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- Consultation about accessibility to individuals, public and private agencies, and governmental bodies, or as an expert witness regarding legal interpretations of audiology findings, effects of hearing loss and other auditory dysfunction, balance system impairments and relevant noise-related considerations
- Training, education, supervision, and administration for audiology graduate education programs and other professionals

COMPETENCY FRAMEWORK

1 DOMAIN ONE: PROFESSIONAL AND ETHICAL PRACTICE

This domain defines the professional accountability and scope of ethical and legal practice of the Audiology Technologist 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 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 Audiology 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
- 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 (as per organizational approved policy and code of ethics and professional conduct for Audiology Technologists*)

*((Code of Ethics and Professional Conduct for Audiology Technologists in the 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 Audiology Technologist practice in Qatar.

Performance criteria:

- 1.3.1 Practices in accordance with agreed policies and procedures that guide Audiology Technologist practice.
- 1.3.2 Practices in accordance with relevant laws and regulations that govern Audiology Technologist 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 Audiology Technologists*.
- 1.3.5 Maintains a professional portfolio including evidence of continued competence and improvement.

2 DOMAIN TWO: CLINICAL PRACTICE

As a healthcare profession, Audiology Technologists practice autonomously. Critical thinking, patient/environment assessment skills, and evidence-based clinical practice guidelines enable Audiology Technologists to develop and implement effective care plans, audiology protocols, clinical pathways and management programs. Refer to Appendix one for a detailed list of foundation competencies required for Audiology Technologists.

2.1 Competency Standard 2.1: Provision of Care

The Audiology Technologist collects and interprets information, makes appropriate clinical decisions, and carries out diagnostic and therapeutic interventions.

Performance criteria

- 2.1.1 Maintains the provision of audiology services that are safe, preventive 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 Supreme Council for Health requirements, Code of Ethics and Professional Conduct for Audiology Technologists* in Qatar and local guidance at a facility level.
- 2.1.3 Development of a culturally appropriate, audiologic rehabilitative management plan
- 2.1.4 Promotion of hearing wellness, as well as the prevention of hearing loss and protection of hearing function by designing, implementing, and coordinating universal newborn hearing screening, school screening, community hearing, and occupational conservation and identification programs



2.2 Competency Standard 2.2: Patient Centered Care

The Audiology Technologist is responsible for ensuring that the service user is at the center of all decisions about care wherever possible.

- 2.2.1 Understands the need to adopt an approach which centers on the service user to enable them to make informed decisions.
- 2.2.2 Uses formal (structured interview) or informal (conversational, narrative building) strategies to establish a comprehensive 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' profile in order to assist in planning for future interventions and services.
- 2.2.4 Provides appropriate education and training for service users, families and caregivers.
- 2.2.5 Demonstrating appropriate conduct (e.g., respecting and maintaining confidentiality of patients or clients, maintaining a professional demeanor, evaluating own performance and recognizing own professional limitations).
- 2.2.6 Using appropriate oral and written language and communicating in the language in which the patient or client is being served and maintaining accurate documentation.
- 2.2.7 Identifying environmental factors that may impact on or interfere with the provision of services and taking action to remove these factors whenever possible.
- 2.2.8 Being adaptable, respecting and being sensitive to individuals of various cultural backgrounds, abilities, socioeconomic and educational status, religious affiliation, etc.
- 2.2.9 Accurately selects, conducts and interprets a range of tests to assess hearing thresholds, auditory neural function, balance and related systems including developmentally appropriate behavioural tests of hearing for children.
- 2.2.10 The provision of comprehensive intervention services (treatment) to individuals with hearing loss, balance disorders, and other auditory dysfunction
- 2.2.11 Evaluation, selection, verification, validation, and dispensing of hearing aids, sensory aids, hearing assistive devices, alerting systems, and captioning devices, and educating the consumer and family/caregivers in the use of and adjustment to such technology and ability to recommend appropriate environmental modifications and strategies for enhanced listening
- 2.2.12 Demonstrates an understanding of post-operative management of cochlear implant recipients, including device programming, re/habilitation, and outcome assessment.
- 2.2.13 Demonstrates an understanding of the effects of hearing loss on development in children, with particular attention to speech perception, speech and language development and communication
- 2.2.14 An understanding of the psychosocial impact of hearing loss on the individual and their family and familiarity with effective counselling techniques for working with hearing impaired patients and their families



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-based knowledge, including research findings, to guide audiology practice.
- 2.3.2 Incorporates credible critically appraised evidence into audiology 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 to enhance audiology interventions and inform care delivery.
- 2.3.5 Critically evaluates research, audit and practice development findings that underpin audiology practice.
- 2.3.6 Promotes dissemination, use, monitoring and review of professional standards and best practice guidelines.

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.
- 2.4.11 Engages 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 audiology care. This domain includes concordance with the healthcare organization's Code of Behaviors as the operating framework.

3.1 Competency Standard 3.1: Leadership

Exhibits leadership qualities and manages audiology 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 audiology 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 audiology autonomy and accountability.
- 3.1.8 Promotes and maintains a positive image of audiology.
- 3.1.9 Assumes leadership responsibilities, as appropriate, in the delivery of audiology care.

3.2 Competency Standard 3.2: Quality Improvement and Safety

Ensures audiology 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 audiology 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 any 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 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.
- 4.1.6 Demonstrates an understanding of organizational issues in audiology practice including models of practice, workplace values, management structures
- 4.1.7 Demonstrates familiarity with audiology professional associations relevant to international practice
- 4.1.8 An understanding of national and international scope of practice in audiology

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 knowledge of prescriptive methods and non-prescriptive methods, technological advances and features in hearing aids
- 4.2.5 Maintains a record of learning and professional development activities and accreditation.
- 4.2.6 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.

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 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 audiology interventions.
- 4.3.7 Applies knowledge of a variety of teaching and learning strategies with individuals, families and communities.

5 DOMAIN FIVE: RESEARCH AND IMPROVEMENT

This domain articulates the requirement that Audiology Technologist should practice incorporating equipment systems and 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 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.



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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 Demonstrates an understanding of the role of research in clinical practice and the ethical and practical implications of conducting research in the health professions
- 5.2.2 Demonstrates an understanding of the fundamental research processes involved in planning, conducting, and disseminating the results of a research project
- 5.2.3 Demonstrates an understanding of the principles of experimental design and quantitative and qualitative research methodology
- 5.2.4 Critically evaluates published research for scientific validity and clinical applicability
- 5.2.5 Participates in activities that disseminate research findings such as publications, journal clubs, grand rounds and presentations.
- 5.2.6 Promotes research, evaluation, service improvement initiatives and audit, designed to improve healthcare practice and disseminate findings to colleagues, patients, families, communities, and society.
- 5.2.7 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.



Appendix 1 - Foundations of Audiology

1. An understanding of the principles, methods and applications of acoustics as related to audiology
2. An understanding of the principles, methods and applications of psychoacoustics as related to audiology
3. An understanding of the anatomy and physiology of the peripheral auditory system
4. An understanding of the principles and clinical applications of acoustic phonetics
5. An understanding of the anatomy and physiology of the central auditory system
6. An understanding of the anatomy and physiology of the vestibular system
7. An understanding of the anatomy and physiology of the speech production and speech reception systems
8. An understanding of genetics, embryology and development of the peripheral auditory, central auditory and vestibular systems
9. An understanding of the mechanisms of disease and injury
10. An understanding of the pathology and clinical course of common syndromes/ diseases/injuries involving the peripheral auditory, central auditory and vestibular systems
11. An understanding of common diseases/injuries of the speech production and reception systems
12. An understanding of the medical treatment of common diseases/injuries of the peripheral auditory, central auditory and vestibular systems
13. An understanding of common diseases/injuries of the speech production and reception systems
14. An understanding of the medical treatment of common diseases/injuries of the peripheral auditory, central auditory and vestibular systems
15. An understanding of the principles of primary health care and the social determinants of health
16. Familiarity with the normal course of development of audition
17. Familiarity with the normal course of development of speech and language skills
18. Familiarity with the normal processes of communication and auditory behavior over the lifespan
19. Familiarity with basic epidemiological terms and reports epidemiological information about tinnitus and hearing loss
20. An understanding of health care and education delivery systems

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American Speech-Language-Hearing Association. (2004). Scope of practice in audiology [Scope of Practice]. Available from www.asha.org/policy.

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Criteria	Audiology Technician
Definition	The Audiology Technician is a healthcare practitioner who, after appropriate training and demonstration of competency, performs delegated tasks that are prescribed, directed, and supervised by a certified and/or licensed audiology technologist. Audiology Technicians will recognize their own limits of competence and levels of responsibility and accountability at all times within the approved scope of practice.
Practice Settings	Audiology Technicians work in numerous settings, such as hospitals, clinics, schools and private practice.
Education	Diploma in Audiology (minimum 1 year)
Scope of Practice	The audiology technician works with hearing impaired adults and children who have routine (non-complex) hearing pathologies or disabilities. Audiology technicians can be utilized successfully in supporting the delivery of high quality audiological services in Qatar. An audiology technologist should supervise the tasks of an audiology technician wherein the highest standard of client care must always be paramount. Audiology technicians are of considerable value to an organization to support audiological service delivery. The scope of practice of the audiology technician is to enable the audiology technologist to perform the complex, evaluative, diagnostic, management and treatment services, for which they are appropriately trained. The key responsibility of the Audiology Technician is Basic Audiology Assessment that includes Otoscopy, Pure tone Audiometry, Tympanometry and Otoacoustic Emission testing
Experience	For overseas candidates: One year clinical experience as an Audiology Technician New graduates from a recognized academic program for Qatari Nationals and long term residents as per QCHP Circular No.1/2016.
Competency Validation	Competency will be validated through the verification of education certificates and course transcripts reflecting the core competencies and clinical practicum required by Audiology Technicians and relevant clinical experience.
Other Requirements for Evaluation & Registration	<i>(Refer to QCHP requirements for license Registration/Evaluation)</i> http://www.qchp.org.qa/en/Pages/HowToRegisterToPracticeInQatar.aspx
Note: Applicants with break from practice please see QCHP "Break from Practice Policy"	



Audiology Technician Scope of Practice

INTRODUCTION

The Audiology technician Scope of Practice is based on a competency framework that comprises ethics, clinical practice, leadership and management, learning and management and research domains intrinsic to the role of the audiology technician. The scope also describes the professional roles and activities and practice settings for the audiology technician profession. This document sets out the standards of proficiency required for safe and effective practice for audiology technicians. They are the threshold standards necessary to protect members of the public. Once on the Qatar Supreme Council 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 audiology technician works with hearing impaired adults and children who have routine (non-complex) hearing pathologies or disabilities. The scope of practice of the assistant is to enable the Audiology Technologist to perform the complex, evaluative, diagnostic, management and treatment services, for which Audiology Technologists are appropriately trained. Audiology technicians can be utilized successfully in supporting the delivery of high quality audiological services in Qatar. An Audiology Technologist should supervise the tasks of an audiology technician wherein the highest standard of client care must always be paramount. Audiology technicians are of considerable value to an organization to support audiological service delivery.

STATEMENT OF PURPOSE:

The purpose of this document is to define the Audiology technician's scope of practice in Qatar to:

- (a) Describe the services offered by Audiology technicians
- (b) Define the professional accountability, scope of ethical and legal practice of the Audiology technician 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 AUDIOLOGY TECHNICIAN

The audiology technician is a healthcare practitioner who, after appropriate training and demonstration of competency, performs delegated tasks that are prescribed, directed, and supervised by a certified and/or licensed Audiology Technologist. Audiology technicians will recognize their own limits of competence and levels of responsibility and accountability at all times within the approved scope of practice. They will maintain their personal competence and work as a reflective practitioner in order to deliver high quality client care.

PROFESSIONAL ROLES AND ACTIVITIES:

The scope of practice assigned to an audiology assistant will be based on their training, supervision and practice setting.

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

- Hearing screening and basic test measures such as otoscopy, immittance, otoacoustic emissions, pure tone air and bone conduction and basic speech testing.
- Assisting patients or clients in completing case history and other relevant forms.
- Reporting and documenting patient or client information, observations regarding behaviors and ability to perform tasks to the supervising Audiology Technologist.
- Assisting the Audiology Technologist with testing difficult-to-test patients or clients, electrophysiological assessments and vestibular testing.
- Assisting the Audiology Technologist with preparing materials and performing clerical duties.
- Conducting electro-acoustic analysis of hearing aids and FM systems.



- Providing minor maintenance, repairs, listening checks and troubleshooting hearing aids, FM systems and other assistive listening devices.
- Demonstrating and orienting patients to hearing aids, assistive listening and alerting devices.
- Making earmold impressions and making earmold modifications and shell modifications.
- Educating patients or clients regarding hearing protection devices (e.g., earplugs), prevention of noise-induced hearing loss and proper ear hygiene.
- Assisting with departmental operations, e.g., scheduling appointments, preparing charts, collecting data, documentation, safety procedures (including infection prevention and control), maintaining supplies and equipment
- Maintaining, troubleshooting and performing basic calibration checks of equipment.
- Assisting the Audiology Technologist with research projects, in-service training and family or community education.
- Selecting, program and evaluate hearing aid systems in established adult patients who attend hearing aid repair clinics
- Assisting the Audiology Technologist in communicating with patients or clients when there are language differences and the audiology assistant is competent in the patient or client's language.
- Assisting the Audiology Technologist in the installation of sound field amplification systems (e.g., classrooms, meeting rooms).
- Teaching courses within an audiology assistant educational program as long as the course content is related to professional roles, responsibilities and issues of audiology assistants. The course content must be approved by an Audiology Technologist involved in the training program.
- Assisting with student training and practicums.

Audiology technicians may work in the following areas:

- pediatric / adult audiology
- private practice
- medical settings such as hospitals and physicians' offices
- community and university hearing and speech centers
- industry
- the military
- various state agencies
- home health
- long-term care and intermediate care facilities
- school systems

COMPETENCY FRAMEWORK

1. DOMAIN ONE: PROFESSIONAL AND ETHICAL PRACTICE

This domain defines the professional accountability and scope of ethical and legal practice of the Audiology technician 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, for 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 audiology 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
- 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.

1.3 Competency Standard 1.3: Legal Practice

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



Performance criteria:

- 1.3.1 Practices in accordance with agreed policies and procedures that guide Audiology technician practice.
- 1.3.2 Practices in accordance with relevant laws and regulations that govern Audiology technician 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 for Audiology technicians.
- 1.3.5 Maintains a professional portfolio including evidence of continued competence and improvement.

2. DOMAIN TWO: Clinical Practice

As a healthcare profession, audiology technicians practice under the supervision of the Audiology Technologist.

2.1 Competency Standard 2.1 Provision of Care

Audiology technicians serve a diverse population and may function in one or more of a variety of activities.

- 2.1.1 Assist in the provision of audiology services that are safe, preventive, and restorative to the patient.
- 2.1.2 Assist in the development of a culturally appropriate, audiologic rehabilitative management plan
- 2.1.3 Keeps accurate, contemporaneous, comprehensive and legible records of patient care in accordance with applicable legislation, protocols and guidelines. This includes Qatar Supreme Council for Health requirements and local guidance at a facility level.

2.2 Competency Standard 2.2 Patient Centered Care

The audiology technician is responsible for ensuring that the service user is at the center of all decisions about care wherever possible.

- 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 meaningfully
- 2.2.2 Uses formal (structured interview) or informal (conversational, narrative building) strategies to establish a comprehensive 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' profile in order to assist in planning 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. Selecting, preparing and presenting materials consistent with the program designed by the supervising Audiology Technologist.
- 2.2.6 Responding effectively to attitudes and behaviors of patients or clients and their caregivers.
- 2.2.7 Relating to and interacting positively with supervisors, colleagues and the population being served.
- 2.2.8 Being able to work under both direct and indirect supervision and seeking advice from a supervising Audiology Technologist when necessary.
- 2.2.9 Demonstrating appropriate conduct (e.g., respecting and maintaining confidentiality of patients or clients, maintaining a professional demeanor, evaluating own performance and recognizing own professional limitations).



- 2.2.10 Maintaining accurate documentation.
- 2.2.11 Using appropriate oral and written language and communicating in the language in which the patient or client is being served.
- 2.2.12 Identifying environmental factors that may impact on or interfere with the provision of services and taking action to remove these factors whenever possible.
- 2.2.13 Being adaptable, respecting and being sensitive to individuals of various cultural backgrounds, abilities, socioeconomic and educational status, religious affiliation, etc.

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-based knowledge, including research findings, to guide audiology practice.
- 2.3.2 Incorporates credible critically appraised evidence into audiology 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 Critically evaluates research, audit and practice development findings that underpin audiology practice.
- 2.3.5 Promotes dissemination, use, monitoring and review of professional standards and best practice guidelines.

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.
- 2.4.11 Engages in teamwork and the team-building processes.



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- 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 audiology care. This domain includes concordance with the healthcare organization's Code of Behaviors as the operating framework.

3.1 Competency Standard 3.1: Leadership

Exhibits leadership qualities and manages patient care safely, efficiently and ethically.

Performance Criteria:

- 3.1.1 Applies clinical reasoning, critical thinking and problem solving skills in the provision 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 Acts as a role model for colleagues, students and other members of the healthcare care team by treating all with respect, trust and dignity.
- 3.1.6 Fosters the advancement of audiology and accountability.
- 3.1.7 Promotes and maintains a positive image of audiology.
- 3.1.8 Assumes leadership responsibilities, as appropriate, in the delivery of audiology care.

3.2 Competency Standard 3.2: Quality Improvement and Safety

Ensures audiology 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 audiology 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 any deficiencies.
- 3.2.8 Participates in ongoing quality improvement and risk management initiatives.



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- 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 junior audiology technicians 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.
- 3.3.3 Maintains accountability and responsibility at all times.

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 Acts as a resource person for others.
- 4.1.2 Contributes to the formal and informal education and professional development of students and colleagues facilitating and where appropriate
- 4.1.3 Takes opportunities to learn together with others in order to contribute to health care improvement.
- 4.1.4 Demonstrates an understanding of organisational issues in audiology practice including models of practice, workplace values, management structures
- 4.1.5 Demonstrates familiarity with audiology professional associations relevant to international practice
- 4.1.6 An understanding of national and international scope of practice in audiology and the roles of audiology technicians
- 4.1.7 Familiarity with audiology professional associations relevant to practice

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
- 4.2.4 Maintains a record of learning and professional development activities and accreditation.



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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.

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 Demonstrates understanding of traditional 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.

5 DOMAIN FIVE: RESEARCH AND IMPROVEMENT

This domain articulates the requirement that audiology technicians practice should incorporate equipment systems and 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 Acquires the information technology skills needed to inform and provide optimum healthcare care and documentation.
- 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.

5.2 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 An understanding of the role of research in clinical practice
- 5.2.2 Promotes research, evaluation, service improvement initiatives and audit and assists in dissemination third-party research in order to enhance audiology interventions and inform care delivery.



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Audiology Australia's Primary health care position statement
http://www.audiology.asn.au/pdf/policy/Audiology_Australia_Primary_Health_Care_Position_Statement.pdf
Audiology Australia's Code of Ethics, Code of Conduct and Professional and Clinical Practice Standards.
<http://www.audiology.asn.au/>



Criteria	Assistant Psychologist
Definition	The Assistant Psychologist is a collaborative and supportive member of a mental health team. Their duties may include direct patient work, research data collection, education, and clinical case management. Assistant Psychologists cannot call themselves psychologists or practice independently, including offering any kind of therapeutic services without supervision. This is an entry level position in the mental health field and the Assistant Psychologist will typically aid clinical psychologists, psychological counsellors, and physicians in clinical work and research.
Practice Settings	<ul style="list-style-type: none">• Mental Health• Primary Care• Medical and Research Facilities (Hospitals, Clinics, Clinical Research Labs)• Schools, Universities, Rehabilitation and Special Needs Centers• Governmental & Private Sector organizations
Education	<ul style="list-style-type: none">• Bachelor's Degree in Psychology, or any mental health related field, OR• Bachelor's Degree in a health-related field, including coursework on human behavior and development, OR• Current Enrollment in a Master's degree program in Psychology or a mental health related field, OR• Master's degree in Psychology or a mental health related field
Scope of Practice	An Assistant Psychologist is a healthcare professional who, under supervision, provides mental health assessment, diagnosis, treatment for adults and/or children with a broad range of mental health needs. The Assistant Psychologist provides psychological services as part of a multidisciplinary team, in order to aid Clinical Psychologists, Psychological Counsellors, and Physicians in mental health clinical care and research. The scope of the Assistant Psychologist includes: <ul style="list-style-type: none">• Case management• Administering psychological tests• Preparing intake summaries and treatment plans• Charting patient progress• Carrying out related documentation• Collecting human subjects' data for mental health-related research studies• Providing consultation to other care providers and health educators on matters relating to mental health• Individual counseling and psychotherapy• Group counseling and psychotherapy
Supervision	<ul style="list-style-type: none">• Assistant Psychologists may not practice independently and must have a designated supervisor who is licensed by DHP.



	<ul style="list-style-type: none">• Supervisor must be one of the following: A Doctoral-level Licensed Clinical Psychologist, a Doctoral-level Licensed Psychological Counsellor, or a Licensed Psychiatrist.• A single supervisor cannot supervise more than four (4) Assistant Psychologists simultaneously.• Supervisor must be employed in the same setting as the Assistant Psychologist.
Licensure	The Assistant Psychologist must apply for certification through Department of Healthcare Professions (MOPH).
Experience	<p>For overseas candidates: A minimum of 2 years post-graduation or certification of supervised experience working as a Assistant Psychologist or in the same field.</p> <p>For Qatar Universities' Graduates, Qatari Nationals, or Residents' offspring / spouses who are graduated abroad: Minimum 3 months of supervised internship experience working in a mental health clinic, hospital, school, research lab, or private center (please refer to QCHP circular No. 1/2016.)</p>
Competency validation	Competency will be validated through the verification of education (degree), certificates and relevant clinical experience.
Other Requirement for Evaluation & Registration	<p>(Refer to DHP requirement for license Registration/Evaluation) http://www.qchp.org.qa/en/Documents/Guidelines%20for%20Allied%20Healthcare%20Practitioners.pdf</p>
Requirements for License renewal	<p>(Refer to additional DHP requirement for license Registration/Evaluation) http://www.qchp.org.qa/en/Documents/Guidelines%20for%20Allied%20Healthcare%20Practitioners.pdf</p>



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Assistant Psychologist Scope of Practice

INTRODUCTION

The Assistant Psychologist scope of practice is based on a competency framework that comprises **professional ethics, clinical practice, learning, leadership & management** and **research** domains intrinsic to the role of the Assistant Psychologist. The scope also describes the professional roles and activities and practice settings for the Assistant Psychologist profession. This document sets out the standards of proficiency required for safe and effective practice in the Assistant Psychologist 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 Assistant Psychologist is not an autonomous professional who is free to practice independently. The Assistant Psychologist will typically aid psychologists and physicians by preparing intakes, performing mental health assessments, assisting with research, and performing therapeutic interventions appropriate to their level of competence and knowledge under the supervision of a licensed independent clinician.

Although Assistant Psychologists may not practice by themselves, their work environments are very similar to those of clinical psychologists and psychological counsellors. Such assistants often are employed by private clinics, but may also find employment with government clinics, hospitals, rehabilitation centers, clinical research labs, schools for special needs individuals, or mental health in-patient facilities.

It is expected that licensed Assistant Psychologists will represent a varied range of skills, knowledge and expertise. For many individuals, this is an entry level position in the mental health field and a time for initial training under supervision. Others may be more senior in the field with considerable experience, and thus their skill set will be wider and with greater competency to perform certain tasks. For some individuals, this professional designation is also likely used during an interim period in which supervised work experience hours are obtained with the eventual goal of becoming a licensed independent practitioner with the designation of Psychological Counsellor or Clinical Psychologist, assuming the education and training requirements are met for those respective professions.

STATEMENT OF PURPOSE:

The purpose of this document is to define Assistant Psychologist scope of practice in Qatar to:

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

DEFINITION OF AN ASSISTANT PSYCHOLOGIST:

The Assistant Psychologist is an collaborative and supportive member of a mental health team. Their duties may include direct patient work, research data collection, education, and clinical case management. Assistant Psychologists cannot call themselves psychologists or practice independently, including offering any kind of therapeutic services without supervision. They must have a designated supervisor who is one of the following: A Doctoral-level Licensed Clinical Psychologist, a Doctoral-level Licensed Psychological Counsellor, or a Licensed Psychiatrist.

PROFESSIONAL ROLES AND ACTIVITIES:

An Assistant Psychologist is a health care professional who, under supervision, provides mental health assessment, diagnosis, treatment and crisis intervention services for adults and/or children who present themselves for psychiatric evaluation with a broad range of mental health needs. The Assistant Psychologist may also be responsible for implementing care as part of a multidisciplinary team, case management, administering psychological tests, preparing intake summaries and treatment plans, charting patient progress, carrying out related documentation, collecting human subjects' data for mental health-related research studies, and providing consultation to other care providers and health educators on matters relating to mental health, health psychology and behavioral medicine..

The Assistant Psychologist assumes responsibility for the ethical, safe, and effective delivery of all psychological services within his or her area of competence. An Assistant Psychologist may practice at different levels of service based on their competencies and job profiles.

Assistant Psychologists may work in the following practice settings:

- Mental Health
- Primary Care
- Medical and Research Facilities (Hospitals, Clinics, Clinical Research Labs)
- Schools, Universities, Rehabilitation and Special Needs Centers
- Governmental & Private Sector organizations

Activities of the Assistant Psychologist include but are not limited to:

- Research and clinical trials (literature search, study design, data collection, data analysis, data write-up)
- Case management (develop plans, identify & coordinate with service providers, monitor progress, provide support for caretakers)
- Assisting mental health teams in delivering training and support for other staff/individuals
- Seeking and acquiring specific information by reading notes, investigating histories, etc.
- Administrative work (filing cases, taking notes, taking meeting minutes, sending appointment letters, keeping detailed records of departmental work, monitoring and inputting data onto a spreadsheet, etc.)
- Administering and scoring of psychological (cognitive/psychometric) tests and report writing (any formal letters must be reviewed and co-signed by supervisor)
- [Behavioral] observation and monitoring, support in therapeutic activities, providing feedback about patient behavior and helping to develop and implement treatment plans
- Shadowing and assisting Clinical Psychologists, Psychological Counsellors, and Psychiatrists to carry out prescribed treatments and interventions; facilitating groups (patient or parent/caretaker sessions); and writing appropriate clinical documentation and reports
- Help in assessing patients and documenting care.
- Helping patients reintegrate into society and become self-sufficient



- For individuals with the relevant training and competency: Providing, under supervision, individual and group counseling and/or psychotherapy to children, adults, and families

COMPETENCY FRAMEWORK

1 DOMAIN ONE: PROFESSIONAL AND ETHICAL PRACTICE

This domain defines the professional accountability and scope of ethical and legal practice of the Assistant 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:

- 1.1.7 Works within the limits of own competence and the boundaries of personal and professional Scope of Practice.
- 1.1.8 Identifies opportunities for advocacy, health promotion and disease prevention.
- 1.1.9 Provides care without discrimination on any basis, with respect for the rights and dignity of all individuals.
- 1.1.10 Encourages and promotes appropriate stewardship of resources.
- 1.1.11 Avoids any activity that creates a conflict of interest or violates any Qatari laws and regulations.
- 1.1.12 Promotes the growth of the profession, and presents a positive image of Assistant Psychologists to the community.

1.3 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:

- 1.3.1 Engages in ethical decision-making with respect to own professional responsibilities or where ethical issues affect healthcare delivery, clinical decision-making, or research practices.
- 1.3.2 Acts as patient advocate, protecting the person's rights in accordance with Qatari law and organization specific terms and conditions.
- 1.3.3 Maintains patient confidentiality and makes every reasonable effort to ensure the security of written, verbal and electronic patient information.
- 1.3.4 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.
- 1.3.8 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.
- 1.3.9 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.

1.4 Competency Standard 1.3: Legal Practice



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

Performance criteria:

- 1.3.6 Practices in accordance with agreed policies and procedures that guide practice for Assistant Psychologists.
- 1.3.7 Practices in accordance with relevant State of Qatar laws and regulations that impact practice for Assistant Psychologists..
- 1.3.8 Practices under supervision of a designated primary supervisor. Supervisor must be one of the following: A Doctoral-level Licensed Clinical Psychologist, a Doctoral-level Licensed Psychological Counsellor, or a Licensed Psychiatrist. A single supervisor cannot supervise more than four (4) Assistant Psychologists simultaneously. Supervisor must be employed in the same setting as the Assistant Psychologist.
- 1.3.9 Maintains valid registration and licensure to practice in Qatar.
- 1.3.10 Maintains a professional portfolio including evidence of continued competence and improvement.

2 DOMAIN TWO: CLINICAL PRACTICE

As a healthcare profession, psychological assistance is practiced in partnership with members of the interprofessional team, service users, support staff and others in order to deliver collaborative care across the healthcare continuum. Critical thinking, patient and environment assessment skills, evidence-based clinical practice guidelines, and ongoing consultation with supervisors enable Assistant Psychologists 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

Assistant Psychologists serve a diverse population and may function in one or more of a variety of activities. The practice of psychological assistance includes but is not limited to assessment, obtaining clinical history, and program planning and intervention to assist mental health teams in diagnosis and treatment planning.

Performance criteria:

- 2.1.1 Maintains the provision of psychological assistance 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 assistance services including, but not limited to independent assessment and evaluation of patient needs, strengths and weaknesses, and functional abilities using both standardized and non-standardized assessments within their purview and under supervision.
- 2.1.4 Formulates and implements appropriate care plans based on assessment results, under supervision.
- 2.1.5 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 Assistant 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 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 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.
- 2.2.4 Provides appropriate psychoeducation and training for patients, families and caregivers.
- 2.2.5 Understands the need to engage patient , families and caregivers in planning and assessing diagnostics, treatments and intervention in order to meet their goals and needs.
- 2.2.6 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 assistance practice.
- 2.3.2 Incorporates credible critically appraised evidence into psychological assistance 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 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:

- 2.4.13 Establishes relationships of trust, respect, honesty and empathy.
- 2.4.14 Gathers information about disease, but also about a patient's beliefs, concerns, expectations and illness experience.
- 2.4.15 Seeks out and synthesizes relevant information from other sources, such as patient's family, caregivers and other professionals.
- 2.4.16 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.
- 2.4.17 Demonstrates cultural competence across all patient groups.



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- 2.4.18 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.
- 2.4.19 Understands how communication affects engagement of service users.
- 2.4.20 Able to modify means of communication to take into account important variables such as age, capacity, learning and physical ability.
- 2.4.21 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.
- 2.4.22 Participates in building consensus and or resolving conflict in the context of patient care and the multi-professional team.
- 2.4.23 Engages proactively in teamwork and the team-building processes.
- 2.4.24 Works effectively with other professionals to prevent, negotiate and resolve inter-professional conflict.
- 2.4.25 Maintains open communication with supervisor to discuss ongoing care, challenging clinical cases, ethical dilemmas, and professional development.

3 DOMAIN THREE: LEADERSHIP AND MANAGEMENT

Exhibits leadership qualities required for the provision of safe, effective psychological 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 assistance care safely, efficiently and ethically.

Performance Criteria:

- 5.2.3 Applies clinical reasoning, critical thinking and problem solving skills in the provision, management and evaluation of care.
- 5.2.4 Manages self, and where appropriate assists others, to ensure effective workload prioritization and time management.
- 5.2.5 Provides feedback, offers suggestions for change and deals effectively with the impact of change on own practice, the team and/or on the organization.
- 5.2.6 Advocates for, and contributes to the creation and maintenance of a positive working environment and team working.
- 5.2.7 Participates in the mentorship and coaching of others maximizing the effectiveness of psychological assistance interventions, the provision of quality health care and the profession.
- 5.2.8 Acts as a role model for colleagues, students and other members of the healthcare care team by treating all with respect, trust and dignity.
- 5.2.9 Fosters the advancement of Assistant Psychologist's autonomy and accountability, where appropriate.
- 5.2.10 Promotes and maintains a positive image of Assistant Psychologists.
- 5.2.11 Assumes leadership responsibilities, as appropriate, in the delivery of psychological assistance care.

3.3 Competency Standard 3.2: Quality Improvement and Safety

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



Performance criteria:

- 5.3.1 Practices in accordance with approved quality standards and guidelines reflecting recognized evidence based best practice.
- 5.3.2 Seeks evidence from a wide range of credible sources to maintain, extend and evaluate the quality of psychological care.
- 5.3.3 Implements quality assurance and risk management strategies.
- 5.3.4 Ensures a safe environment by identifying actual and potential risks and takes timely action to meet national legislation and workplace health and safety principles.
- 5.3.5 Acknowledges limitations in knowledge, judgment and/or skills, and functions within those limitations, seeking supervision as needed.
- 5.3.6 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.
- 5.3.7 Participates in ongoing quality improvement and risk management initiatives.
- 5.3.8 Adheres to and implements infection control policies and procedures.
- 5.3.9 Communicates and records safety concerns to the relevant authority and documents response.

5.4 Competency Standard 3.3: Delegation and Supervision

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

Performance Criteria:

- 5.4.1 Delegates to others, activities commensurate with their abilities and scope of practice.
- 5.4.2 Uses a range of supportive strategies when supervising aspects of care delegated to others.
- 5.4.3 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.



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- 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.

5 DOMAIN FIVE: RESEARCH AND IMPROVEMENT

This domain articulates the requirement that the Assistant 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.
- 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:

- Canadian Psychological Association, Regulatory Requirements for Registration in Psychology:

<https://cpa.ca/documents/PSWAIT%20Report.PDF>



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https://www.psychology.ca.gov/applicants/psychological_assistant.shtml
- The British Psychological Society:
<https://www.bps.org.uk/public/become-psychologist/related-roles-and-careers>