Introduction

This *Treatment Plan & Evaluation of Care Standard of Practice* outlines expectations for registrants in preparing treatment plans and evaluating client care as outlined in the *College of Audiologists and Speech-Language Pathologists of Manitoba (CASLPM) General Regulations Section 5.3*.

Standard

CASLPM registrants design treatment plans and evaluate care in a manner that respects the client, using evidence-informed and culturally appropriate methods that are responsive to the client's needs, goals, and circumstances.

Demonstrating the Standard

Registrants will:

- Conduct appropriate, comprehensive assessments using current research, professional guidelines, and best available evidence.
- Prepare client treatment plans by actively involving the client, substitute decision maker, or any other person the client wishes to be involved.
- Obtain and document informed consent for intervention, recognizing the client's right to ask questions, refuse services, or withdraw consent at any time.
- Design treatment plans that are consistent with current evidence, professional standards, and the registrant's scope of practice, competence, and clinical judgment.
- Prepare individualized and measurable treatment plans based on assessment, the client's needs and goals for treatment, and with respect for the client's culture, preferences, and values.
- Ensure treatment plans are clearly explained using communication strategies appropriate to the client's communication abilities, health literacy, and cultural and linguistic needs while respecting the client's privacy and confidentiality.
- Respect the client's culture, language, values, beliefs, preferences, and social context, and adapt approaches as needed.
- Ensure evaluation tools for virtual use are equivalent to in-person care.
- Interpret evaluation findings using clinical expertise and evidence integrating clinical expertise and client values.
- Regularly review and revise treatment plans in response to the client's progress, changing needs, or evolving goals using objective and subjective outcome measures. Consider alternative or complementary approaches when appropriate.
- Re-evaluate when the client's condition changes, progress is not expected, or new information becomes available.

Approved by CASLPM Council as a Standard of Practice on May 2, 2026

- Modify or discontinue treatment when it is ineffective, no longer clinically indicated, or outside scope of competence.
- Work collaboratively with health care professionals and others in the provision of client care to provide comprehensive care and avoid duplication of services.
- Document treatment plans, goal-setting processes, client consent, and ongoing progress in a clear, accurate, and timely manner.

Appendix A

College of Audiologists and Speech-Language Pathologist General Regulation 192/2013

"Treatment plans

5.3(1) A member must prepare a client's treatment plan

(a) by involving the client, any representative of the client, and any other person the client wishes to involve; and

(b) as circumstances require, by working collaboratively with other health care professionals and others who provide care to the client to provide comprehensive care and avoid duplication of services.

5.3(2) The treatment plan must

(a) be based on the member's assessment of the client;

(b) respond to the client's needs and goals for treatment; and

(c) respect the client's culture, preferences and values."