

## Speech-Language and Audiology Canada

# CODE OF ETHICS

### INTRODUCTION AND BACKGROUND

Ethics refers to the moral principles that govern a person's or group's behaviour.

Speech-Language and Audiology Canada (SAC) members and associates shall abide by the Code of Ethics, bylaws and policies of the association.

In the case that an SAC member's or associate's practice is governed by a regulatory body, the member or associate must abide first and foremost by the ethical standards and professional conduct requirements of their regulatory body.

Any action that violates the spirit and purpose of the SAC Code of Ethics is considered unethical.

For definitions, see Appendix 1.

SAC developed its Code of Ethics in accordance with the following principles of biomedical ethics (Beauchamp and Childress, 2001):

- 1. Respect for autonomy:** enabling individuals to make reasoned, informed choices.
- 2. Beneficence:** balancing the benefits of intervention against the risks and costs. The member or associate should act in a way that benefits the patient or client.
- 3. Non-maleficence:** avoiding the causation of harm. If intervention involves even minimal harm, the harm should not be disproportionate to the benefits of intervention.
- 4. Justice:** ensuring that patients or clients in similar situations are treated in a similar manner.

## OBJECTIVES

SAC's Code of Ethics sets forth the fundamental principles, values and standards essential to the responsible practice of speech-language pathology and audiology. The underlying values of the Code form the rationale for ethical standards and provide the basis for ethical practice and decision-making. The applicable standards within the Code guide members and associates in maintaining professionally acceptable behaviour in their practice.

The Code provides guidance; it cannot offer definitive resolution to all ethical questions that may arise during professional practice. Failure to specify any particular responsibilities of practice in this Code does not negate the existence of these responsibilities or practices.

## SAC MEMBERS AND ASSOCIATES HOLD THESE VALUES:

### Integrity

Members and associates recognize and adhere to the principles of truth, accountability, objectivity and accuracy in all of their relationships and activities. They ensure that spoken and written communications are true, accurate and clear in representing their qualifications, professional affiliations, education, experience and competence.

### Professionalism

Members and associates support and enhance the reputation of their profession by participating in and accepting self-regulation of their profession, honouring contractual agreements and complying with federal, provincial, territorial, municipal and other relevant laws. Members and associates seek to advance the quality and provision of professional services through advocacy, public education and respectful acknowledgement of their colleagues' achievements, knowledge and skills. Members and associates familiarize themselves with and apply SAC's Code of Ethics to all of their professional activities and relationships. Members and associates work collaboratively with members of both their own profession and other professions in the interest of delivering the best quality of care. Members and associates practice their professions according to established business ethics and practices.

## Caring and Respect

Members and associates value the well-being of others. The autonomy, welfare and dignity of those they serve professionally are paramount. The provision of professional services takes priority over members and associates' personal interests, aims and opinions. Members and associates demonstrate respect, acceptance and compassion toward all of their patients or clients, colleagues and others, regardless of race, national or ethnic origin, religion, sexual orientation, gender, age or physical or mental ability. Members and associates limit prognostic statements so that they reflect relevant patient or client clinical indicators without guaranteeing results of any intervention, procedure or product, either directly or by implication.

## High Standards and Continuing Competency

Members and associates practice within their scope of competence and seek to enhance and maintain their professional skills through professional development. Members and associates strive to provide professional services and information supported by current scientific and professional research.

## STANDARDS

### 1. Professional Competence

Members and associates shall:

- a) Meet national membership requirements and, where required, hold provincial or territorial registration.
- b) Provide services within the applicable SAC Scope(s) of Practice and/or those defined by applicable provincial or territorial statutes.
- c) Engage only in the provision of services that fall within their professional competence, considering their level of education, training, experience and/or their access to professional supervision and assistance from qualified colleagues.
- d) Maintain and enhance their professional competence throughout their careers.
- e) Withdraw from practice if a physical or mental condition compromises their professional competence.

## 2. Delegation and Supervision

Members and associates:

- a) Are responsible for all professional services they delegate to communication health assistants and/or students under their supervision.
- b) Shall accurately represent the credentials of communication health assistants and students and shall inform patients or clients of the name and professional credentials of persons providing services.
- c) May endorse a student or supervisee for completion of academic or clinical training or employment only if they have had direct experience with the student or supervisee, and only if the student or supervisee demonstrates the required competencies and expected ethical practices.

## 3. Informed Consent

Members and associates shall:

- a) Inform a patient or client about the nature of their communication disorder and the services and intervention options available.
- b) Ensure that the patient or client understands this information.
- c) Obtain verbal or written consent from the patient or client before screening, assessment, intervention or participation in a research study.
- d) Ensure that patients or clients understand their right to refuse consent or withdraw consent once given without impacting any clinical services available to them.
- e) Obtain informed consent from the patient or client before sharing the patient or client's information with others, unless the member or associate is required to do so by law.

#### 4. Safety

Members and associates shall:

- a) Take every precaution to avoid harm to patients or clients. This includes following applicable occupational health and safety and infection prevention and control practices, and ensuring that equipment is appropriately calibrated and in proper working order.
- b) Ensure that their employees and/or supervised personnel comply with relevant occupational health and safety and infection control policies and procedures.

#### 5. Records

Members and associates shall:

- a) Prepare and maintain, in a timely fashion, adequate records of professional services rendered and products dispensed.
- b) Allow access to these records when appropriate authorization is obtained from a patient or client or when required to do so by law.
- c) Comply with documentation standards when using an electronic medical record.
- d) Abide by relevant privacy and consent legislation regarding documentation.
- e) Maintain and dispose of records according to the time period determined by applicable regulatory standards and/or organizational policies.

#### 6. Privacy

Members and associates shall:

- a) Be familiar and comply with applicable federal, provincial or territorial privacy legislation in all of their clinical, administrative, scholarly and research activities.
- b) Ensure that any supervised personnel comply with appropriate federal, provincial or territorial privacy legislation.
- c) Adhere to all relevant legislation and policies related to security, privacy, encryption, consent and documentation in the delivery of services via electronic technology.

## 7. Business Practices

Members and associates shall:

- a) Ensure that their advertisements, promotions, sales and fees for products and/or services are honest, appropriate and fair.
- b) Disclose all applicable fees, charges and billing arrangements prior to providing any services or products.
- c) Honour product and service contracts.

## 8. Conflict of Interest

Members and associates shall be vigilant in avoiding activities or relationships that represent a real or perceived conflict of interest. Examples of unacceptable conduct include, but are not limited to:

- a) Using information or resources from their employer for their own personal or financial benefit.
- b) Initiating or continuing intervention with a patient or client if such intervention is ineffective, unnecessary or no longer clinically indicated.
- c) Endorsing any service, product or individual to accrue any personal benefit.
- d) Accepting any form of benefit, financial reward or gift that may compromise or influence professional judgment or service recommendations.

## 9. Scholarly, Clinical and Research Practices

Members and associates shall use protocols that comply with standards accepted by the scientific community by:

- a) Obtaining approval, where required, for research projects and other scholarly activities, including ethics approval for studies involving human or animal subjects, and ensuring that protocols comply with all relevant national, provincial, territorial and institutional standards.

- b) Ensuring that participation in research does not delay or interfere with evidence-informed methods of assessment or intervention.
- c) Using peer review processes to evaluate research before presenting it to the public.
- d) Acknowledging other professionals in publications, presentations or products when referencing their work or contributions.

#### 10. Ethical Responsibility to the Professions

Members and associates shall cooperate with SAC in instances of alleged violation of this Code or the association's bylaws or policies by:

- a) Understanding the application of professional ethical and practice standards.
- b) Cooperating with any committee or individual authorized by SAC to investigate or act upon an alleged violation.
- c) Refraining from advocating, sanctioning, participating in or condoning any act or person that is in violation of this Code or SAC bylaws or policies.
- d) Reporting suspected violations to SAC.

#### References

Beauchamp, T. L., & Childress, J. F. (2001). *Principles of biomedical ethics* (5th ed.). New York City, NY: Oxford University Press.

## Appendix A: Definitions

**Communication disorder:** any disorder and/or delay within the scope of practice of a speech-language pathologist and/or audiologist.

**Conflict of interest:** any disparity between the private interests or relationships and the official responsibilities of a person or group of persons in a position of trust. A perceived conflict of interest refers to any situation in which a reasonable third party might infer such a disparity.

**Informed consent:** consent from a patient or client based on an informed choice that is the result of a process of educated decision-making. To provide informed consent, the patient or client must be provided with sufficient information about the proposed service or product, including the benefits, risks and any possible alternatives, and understand this information. Valid consent to receive a proposed service or to share personal information may be either verbal or written unless otherwise required by institutional or provincial or territorial regulation. The patient or client can withdraw informed consent at any time.

**Intervention:** this may involve promotion, prevention, counselling, treatment, consultation, management, (re)habilitation and education.

**Patient or client:** the individual receiving professional services, including students receiving professional services in educational settings, or the legal guardian or legal representative in the case of an individual who is not capable of decision-making. With the consent of the individual or legal guardian or representative, “patient or client” may also include family members and caregivers. “Patient or client” may also refer to a research subject, where applicable.

**Professional competence:** the ongoing ability to integrate and apply the knowledge, skills, attitudes and judgement required to provide effective and ethical speech-language pathology and/or audiology services within a designated area of practice.

**SAC associates:** affiliate associates, communication health assistant associates, reduced hours communication health assistant associates, research/allied professional associates, student associates and retired associates, as defined on the [SAC website](#).

**SAC member:** a professional who holds a master’s degree or equivalent in speech-language pathology or audiology and has joined SAC. This includes three membership types: full, reduced hours and international, as defined on the [SAC website](#).