

## **Guiding Principles for: Audiologists / Occupational Therapists / Physiotherapists / Speech-Language Pathologists**

These principles guide the ongoing development and review of the service delivery models, and how providers work with families and each other.

1. Family and Child Centred Service
  - Parent and service providers have a relationship that is considered a partnership
  - Families have responsibility for the care of their children
  - Families are involved in the decision-making regarding services for their child
  - Each family and family member is treated with respect
  - The needs of all family members are considered
  - The involvement of family members is supported and encouraged
  - Family choice and informed decision making are central
  - Strengths of families are used as a resource
  - Family and cultural diversity is respected
  - Practice/service is developmentally appropriate
2. Partnership and Collaboration
  - Service delivery is a family and interdisciplinary team based approach that is a partnership requiring close collaboration of the stakeholders (e.g., family, service providers, physicians, community providers, etc)
  - Transitions between service providers are a planned, family and child centered process that minimizes service interruption or delay
  - Families and caregivers are encouraged to take an active and central role in the service provision process for their child
  - Service providers treat one another with respect; service providers are treated with respect by the family and caregivers
3. Evidence Based
  - Consistent and transparent standards and practice patterns are used
  - Decisions about intervention planning are based on evidence rather on “beliefs” or “philosophy”
  - The term “evidence” includes information from current research, assessment as well as family observations and values
4. Individualized and Flexible
  - Each child and family is unique and no one method, approach or specific curriculum meets the needs of all families
5. Accessible and Equitable
  - Families may access the system directly
  - Families are able to access information and services in a timely manner
  - Access facilitates family and child centered service.
  - Common intake “increases accessibility, co-ordination, and encourages a more equitable service.”

6. Transition Planning
  - Processes support a seamless transition through health, education and/or social services.
  - Is conducted when the child moves between various service agencies, departments, to school, through early, middle and senior years and into the community.
  - Enables children and their families to receive appropriate information and services without interruption or delay.
7. Respect and Sensitivity to Cultural and Geographical Diversity
  - The child and family have access to services that deliver equitable outcomes for all, regardless of race, ethnicity, religion, ability/disability, economic status or geographic location.
  - The service model reflects an appreciation and value of diversity and equity.
  - Cultural responsiveness of the service model which refers to the ability of individuals and systems to respond respectfully and equitably with people of all cultures, races, ethnic backgrounds in a manner that recognizes, affirms and values the worth of individuals, families and communities and protects the dignity of each.
8. Accountable and Sustainable
  - Expectations of service provision are clear and service providers are accountable.
  - Outcomes are measurable.
  - Data is collected and reviewed regularly to assess and monitor the quality, efficiency and effectiveness of services and to ensure services are sustainable.
  - Services are provided within available resources to maintain sustainability.
  - Services have an evaluation plan and structure.
9. Compliance with all Legislative Requirements, as applicable.

*Sources:*

1. Manitoba Education, Citizenship and Youth, Manitoba Family Services and Housing, Manitoba Health and Healthy Living, Healthy Child Manitoba. "Children's Therapy Initiative Planning Guide."
2. Occupational Therapy, Physiotherapy and Speech-Language Pathology Work Groups
3. Audiology Work Group. "Guiding Principles."
4. "BC Early Hearing Program: A service of the Provincial Health Service Authority". Prepared by: Susan Lane, Lori Bell & The Intervention Advisory Group. October 2007.