

Chronicle

NEWS AND INFORMATION FROM THE COLLEGE OF PSYCHOLOGISTS

Volume 7 • Number 2 • Summer 2005

Comments from the Chair of the Board

The Board has been working hard on a number of issues over the summer, including the drafting of several practice checklists for use by registrants in the areas of release of records and informed consent. These will be circulated once the drafting process has concluded. We note with sadness the untimely death of Barbara Passmore, a former public member on the Board. Please see the special memorial in this edition of the Chronicle. We greatly appreciate the contributions of public members on the Board and are delighted that both Daniel Fontaine and Wayne Morson have agreed to serve for another two years on the Board. Marguerite Ford has completed her second year and we look forward to her continued involvement. All three public members have made invaluable contributions to the regulation of our profession.

The term of three of the current professional members of our board comes to a close in December: Derek Swain, Michael Joschko, and myself. All eligible registrants with an interest in the regulation of the profession are encouraged to run for election. Professional Board members should expect to put in an average of two days per month. Responsibilities include chairing a standing committee, attending Board meetings, review of Inquiry Committee decisions by request of dissatisfied complainants, and other responsibilities. Enclosed with this Chronicle are a nomination form and a copy of the bylaws pertaining to College election procedures. Completed nomination forms must be received at the College office by September 30, 2005. Please read the bylaws carefully. Nomination statements are intended to provide registrants with a summary of the professional activities of the candidates.

The AGM for the 2004 year, which was held on May 9, 2005, was well attended and the required number of registrants for a quorum were present. Reports were presented from all standing committees and the board. This year multiple sites participated, through the videoconferencing capabilities of the Chan Centre at Women's and Children's Hospital of B.C. Small groups of registrants in Abbotsford, Victoria and Nanaimo participated in this way. As the meeting came to a close, "thank you" chocolates were presented to committee members, oral examiners, and supervisors in recognition of their volunteer contribution to the College. The fire alarm went off at about this time and the formal meeting ended as we were required to exit the building. Refreshments were served on the lawn of the Chan Centre.

When the Bylaws were proclaimed in February 2002, the College became able to register masters' trained psychology practitioners under the title psychological associate. Masters' trained registrants registered prior to that date retain the title of psychologist. All new registrants, regardless of their title in any other jurisdiction, have access to the title of psychologist if their highest degree is a doctorate that meets registration criteria, or the title of psychological associate if their highest degree is a masters degree that meets registration criteria. The College has become aware of a recent decision made by the BC Labour Relations Board to include registered psychological associates in the Professional Employees Association – Government Licensed Professionals bargaining unit. Details are available at: http://www.pea.org/glpnews.htm.

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Registration Renewal

Registration renewal notices will be mailed out by the College by November 1, 2005. If you have not received your notice by November 15, please contact the College.

Registrants are reminded that renewal fees must be paid by December 31, 2005. Under Section 21(3)(b) of the *Health Professions Act*, "The registrar must cancel the registration of a registrant in the register if the registrant has failed to pay a fee for renewal of registration or another fee within the required time."

See the renewal document included in this Chronicle.

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College of Psychologists of British Columbia

BOARD MEMBERS

Lee Cohene, R. Psych. Robert Colby, R. Psych. Vice-Chair

Michael Elterman, R. Psych.
Chair

Daniel Fontaine,
Public Member

Marguerite Ford,
Public Member

Henry Harder, R. Psych.

Michael Joschko, R. Psych.

Wayne Morson, Public Member

Derek Swain, R. Psych.

From the Chair of the Board continued from page 1

Meeting with WCB Psychologists

The College invited psychology practitioners to a meeting at the College in April 2005 to review matters raised in the review of complaints about WCB psychologists. Among the topics discussed were the Inquiry Committee's response to requests from WCB for a practice advisory specific to file reviews to date; the complaint investigation process in general; a generic review of complaint outcomes and feedback provided to registrants related to file reviews; and a review of questions and comments regarding a recent Chronicle article on file reviews.

The meeting was informative and an active exchange occurred. Following the meeting, the College sent a summary letter to the WCB psychology department which included the following key points:

- Appreciation to the psychologists who attended the meeting and the opportunity to hear the concerns of the registrants who work in that setting and their interest in compliance with the provisions of the Code
- A relatively small number of complaints have been received from WCB clients (n=8, or 2% of total complaints processed under the *Health Professions Act*). Most of these raised issues concerning the role of the psychologist with regard to expressing opinions and recommendations without having been seen by the psychologist, or the client, as is typical of many other complaints, disagreement with the opinions or findings of a report.
- The main issues identified by the Inquiry Committee on review of these complaint files to date pertain to statements of limitations on any opinions expressed and clarity of descriptions of the information on which the report was based.
- The Inquiry Committee has also identified concerns with the informed consent form signed by all WCB clients and has encouraged an advocacy role for WCB psychologists in this regard. The Inquiry Committee has also expressed the preference for in-person contact wherever possible, and whatever other appropriate means for the psychologist to convey their understanding for the vulnerable position of individuals working their way through the WCB process.
- While each Code of Conduct standard must stand on its own in terms of its meaning, the complaint review process takes into account the context and particular circumstances of each complaint.

- Standard 11.40 provides the limits to the kinds of comments that can be made on reviewing a report written by someone else and very clearly states that no opinion, diagnosis or recommendation that is specific to the individual who is the subject of the report may be made on the basis of such review.
- It was emphasized that file reviews that restrict their content to comments regarding the report(s) or file(s) reviewed and to the sufficiency and consistency of information contained therein would be consistent with the Code of Conduct.
- With regard to the latter point, the professional standards relating to multiple data sources and data quality are relevant. Comments such as "This record is consistent with the diagnosis expressed in such and such report", or "Aspects of this report are not consistent with the reported diagnosis" are highly consistent with the emphasis in psychology on using such records as one source of data.
- The primary intent of the standards from the *Code of Conduct* with regard to comments, recommendations and opinions about an individual is the centrality of an in-person examination in the diagnostic process. In order to make statements about a specific individual, this in-person component is essential as outlined in Standard 11.26. When, despite reasonable efforts, no direct contact occurred, Standard 11.27 obligates the psychologist to clarify the impact this limitation had on their comments.
- Considerable discussion occurred with regard to the interpretation of Standard 11.40. This standard pertains to the parameters of reviewing others' reports. This standard obligates psychologists to limit comments to "methods, procedures and process" of the assessment used by the other professional, prohibits psychologists from making conclusions, diagnoses or recommendations specific to the individual assessed in the report being reviewed unless the psychologist has directly assessed that person, as per standard 11.26, and to further restrict their comments to the sufficiency of information in the original report and the data contained therein. This standard does not preclude "restating conclusions reached in the report". It does prescribe that when doing so, the registrant direct their attention to the sufficiency of information presented in the original report.

Michael Elterman Chair of the Board

Draft Practice Advisories

Enclosed with this edition of the Chronicle is Draft Practice Advisory #7. It is being circulated for feedback from registrants. As noted on the attachment to the Advisory, the term "extreme matters" is to be taken literally. The context of this Advisory is those circumstances which fall clearly outside of those situations which would reasonably be expected to arise in the course providing psychological Such services. situations would include the following: a situation in which a previous client of a psychologist actively stalks the psychologist, or leaves a threatening phone message containing an intent to do harm. The Board welcomes feedback from registrants. Feedback must be received by September 30th, 2005 for consideration by the Board prior to final approval.

Another practice advisory under consideration is with regard to "informed assent". Advisory is intended to provide clear direction to registrants dealing with situations in which informed consent is problematic. It is anticipated that this Advisory will be circulated to registrants by mid-Winter. The Board also has under review a number of checklists to cover key areas of practice such as release of records and informed consent. Practice Advisory #4 is undergoing final stages of revision and will also be circulated in a few months time

Quality Assurance Committee Report

Included in this edition of the *Chronicle* is a copy of the Continuing Competency Program Policy that applies for the current year. The Quality Assurance Committee remains open to constructive feedback, and is very pleased with the amount of respectful interaction with registrants about the program.

The following are a selection of "Frequently Asked Questions" and responses from the Committee. The questions below are actual questions submitted by registrants to the Committee over the past few months. These and other FAQs may be found on the College website

1. Why not make the requirements due over a two year period?

The Committee is aware of other psychology jurisdictions where each year half of the registrants are eligible for audit, with the required activities completed over a two-year cycle. The Committee will review this issue again in the future once our BC program definitions and administrative procedures are solidly in place. Having a two-year cycle in place during our initial period of program development would result in a longer lag time in implementing and in providing clarity to registrants regarding the requirements of the program and program compliance.

2. I plan to be out of town early in the new year. What happens if my name is selected for the random audit and I am not in town to respond?

A. The College communicates to registrants in writing to their register address.

- B. Registrants who plan to be away from their office for any length of time should either a) change their register address to one that will provide secure and regular access to mail from the College, or b) ensure that a responsible individual will forward the mail to the registrant and/or inform the registrant of mail received.
- C. Registrants who have been selected to participate in the random audit are expected to be able to respond to the requests of the Quality Assurance Committee.
- D. Registrants who are planning to be out of town in the new year, could provide a colleague or other responsible person with a copy of their completed log sheet prior to their departure and ask that person to submit the log sheet on their behalf if selected for an audit. Please do not submit completed log sheets prior to them being requested by the Quality Assurance Committee.

3. Is it really necessary to use scare tactics to ensure that registrants sign attestations truthfully?

The Quality Assurance Committee was disappointed in the high percentage (10%) of log sheets audited which contained content clearly inconsistent with the signed renewal attestation of the audited registrant - this does not include those situations where there was clear attempt to comply with the requirements of the program but some confusion about what activities counted in the different categories. It is regrettable that some registrants do need to be reminded that attestations and declarations need to be completed truthfully. Examples of the inconsistencies include: signing an attestation of full compliance and submitting a log sheet significantly short of the required hours; entries for activities on the log sheets for more hours than the documented events (e.g. 4 hours for attendance at a half hour meeting).

4. What is the difference between peer supervision, and supervision where the intent is to provide information and guidance to others?

The general criteria applied in review of activities for the continuing competency program is whether any new knowledge related to the practice of psychology has been acquired. Registrants can receive continuing competency program credit for preparation for teaching, supervision, or consultation by documenting under Category B (Self Study) the material reviewed in the initial preparation for the topic. The Committee is of the view that supervision and consultation of others who are in a position of learning from the registrant (i.e., students, those on the Limited Register, other clinicians who are receiving supervision or consultation in order to increase their skills) does not typically provide the kind of learning experience for the registrant which is intended by the Continuing Competency Program.

The intent of Category C (Structured Interactive Activities) is for colleagues (peers) to interact on a regular basis in order to consolidate new learning and to receive feedback regarding one's practice.

5. I have been on the Limited Register – Non-Practicing because I have been on sabbatical. What are the continuing competency requirements for me (if any)?

The only registrants exempted from completing the continuing competency

requirements are those on the Limited Register – Out of Province, and the Limited Register – Retired for the entire year. All other registrants (Limited Register – Non-Practicing, Limited Register - Inquiry Committee, Limited Register – Registration Committee, Full Register) are required to be in full compliance with the program. Individual registrants may request a reduction (see the policy on the website and mailed to all registrants July 18, 2005) if they were on medical or parental leave during the course of the year.

6. Why is it necessary to document continuing competency activities?

Under the *Health Professions Act*, the Quality Assurance Committee is required to develop and administer a continuing competency program. The documentation is required so that registrants can be professionally accountable and demonstrate their compliance with the program in an objective and verifiable manner.

The Committee is currently reviewing a policy to deal with issues of noncompliance with the program. It is anticipated that a draft of this policy will be circulated to registrants by late autumn for comment. Since this is an area where there may be some financial or other consequences for noncompliance, the Committee hopes to receive a broad range of thoughtful and constructive comments concerning this future policy.

Michael Joschko *Chair*

REMINDER

Deadline for 2006 Registration Renewal: **December 31, 2005.**

NOTICE

A citation for professional misconduct was issued against Dr. Robert Haymond on April 29, 2005.

The citation was withdrawn in advance of the hearing being convened.

Accordingly, no findings were made.

Inquiry Committee Report

There is a marked transition occurring with regard to the work of the Inquiry Committee. This transition is due to a number of factors:

- The complaint backlog no longer exists, with the backlog complaints all resolved and closed.
- 2.The more recent resolution of several "sets" of complaints pertaining to single registrants.
- 3. Complaint review procedures which include a set process for summarizing complaints in bringing them forward to the Committee for review, and a tracking system linking allegations to Code of Conduct provisions. There is no marked change in the number of complaints being received by the College, nor in the nature of the complaints – which continue to range from relatively minor concerns about accuracy of report details to more serious allegations of professional and sexual misconduct. The procedures now in place, the routine (and timely = early) legal consultation, and the ability of staff and the Committee to focus efforts on current complaints combine to set a new pace and rhythm to the work of the Committee. It is a welcome change.

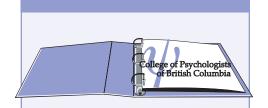
The College has received twenty-four complaints since January, which brings the total of complaints processed under the *Health Professions Act* to 397, 300 of which were received under the new legislation.

On a personal level, I am enjoying my new role as chair of this Committee, having previously chaired the Board and Registration Committee. For over five years I have witnessed the huge number of volunteer hours that colleagues have donated to the College on behalf of our profession. I am heartened by the respectful and thoughtful process which characterize complaint reviews by the Committee. I share the sentiments expressed in the letter written by a colleague on the Committee recently circulated to registrants and hope that this open and heartfelt communication will help provide all registrants with an understanding of the challenges of the work done by this Committee and the core values of respect and thoughtfulness that characterize it.

The Registrar has recently completed a Frequently Asked Questions document for registrants named in a complaint. This will be included in the package of materials sent to respondents (see Registrar's Report).

This will supplement the information already available on the website and in College publications. This is part of an attempt to facilitate a focus on constructive ways to bring complaints to resolution and to avoid unnecessary anxiety based on heresay or inaccurate information.

Henry Harder Chair, Inquiry Committee



DIRECTORY

Enclosed with this Chronicle is your

2005 Directory of Registrants of the College

for inclusion in your purple binder.

This document contains the names of all registered psychologists and registered psychological associates registered with the College as at July 20, 2005.



Legislation Committee Report

The Legislation Committee has held one preliminary meeting with a sample group of psychologists working in various institutional settings in the province to review shared concerns with regard to common filing systems and other problems related to data sharing and storage. A larger meeting is planned and will be held once a proposed policy has been drafted and circulated for review. Among the issues under consideration relate to minors, common filing systems,

lockstep release policies, cross-site research data, psychologists' ethical and professional responsibilities versus institutional policies, and record retention policies. It is hoped that a constructive dialogue with registrants working in institutional settings will help clarify the application of the *Code of Conduct* to these settings and provide the opportunity for concerns and suggestions to be considered.

Workshop

Stay tuned for more information on the November 12th workshop on

Professional Wills.

Information and registration details on this workshop shortly.

Registration Committee

The College continues a dialogue with the Office of Professional Regulation, the Ministry of Health Services and the Ministry of Education related to the removal of current exemptions for psychology practice and the regulation of school psychology practitioners who are currently not being regulated by the College.

A total of 142 applications are currently under active review, and 36 new registrants have been registered so far this year. Issues on the table for discussion by the Committee include the following: area of practice declarations at renewal, expectations with regard to changing area of practice at

renewal or at other times during the year; review of categories of registration including retired status; discussion of accommodation of requests to return to the register following retirement; future planning with regard to the large number of registrants approaching retirement age, and many other important issues

Renewal materials will be ready for mailout by early November. If you have not received your renewal package by November 15th, please contact the College office.

A total of nine psychological associates have completed the registration process and are on

the 2005 Register. Now that the registration procedures are firmly in place for all categories of registration, the length of time from application to registration has shortened significantly. It now takes approximately three to four months reciprocal/mobility applicants and six to twelve months for regular applicants. In addition, given the availability of multiple examinations dates, the applicant has significant input in terms of the length of the application process.

Robert Colby, Chair, Registration Committee

PRACTICE ISSUE:

Sliding Fee Scales

Many registrants would like to be able to offer "discounted" rates to certain clients or categories. In addition, the issue of third party reimbursement for psychological services and existence of various employee assistance programs have created some challenges for registrants with regard to billing practices. This article emphasizes the importance of clarity and transparency in the setting of fees. The Code of Conduct is very clear in outlining the obligations of registrants with regard to the setting and collection of fees (12.1); clarity of fees (12.2, 12.15); early clarification of fees (12.3); basis for fees (12.4, 12.5); credit cards and interest (12.6, 12.7, 12.8); prepayment and retainer (12.9, 12.10); withholding records for nonpayment (12.11, 12.12); commissions (12.13); and reasonableness of fees (12.14).

Here are some key principles to consider with regard to the issue of sliding fees, that is, changing the amount of money charged for the same services on the basis of client characteristics such as income or employment status.

One Fee Schedule:

There should be one fee schedule that describes the fees for the kinds of services provided by the registrant.

Clear policy for fee reduction:

This schedule should include any policy for fee reduction and the range and eligibility criteria for such fee reduction.

Uniformity of Fees For Same Service regardless of who pays:

It is desirable that the fees charged for various services should be the same, regardless of whether the client is paying out of pocket or by some insurance or other program. If a client qualifies for a fee reduction on the basis of a registrant's sliding fee policy, the same fee should be charged, regardless of whether the fee is covered by the client paying out of pocket or a third party payer.

Fees Known in Advance:

Registrants may have negotiated individual compensation packages with a company or employee assistance program such that the registrant has various contracts with different fee schedules, but such schedules should be clearly represented in advance to service recipients and third-party payers.

The matter of sliding fees is not a simple one. Transparency and a clear policy in advance of service provision will be helpful to registrants who wish, on a compassionate basis, to slide their fees based on the client's ability to afford service.

Upcoming Workshop

The College is pleased to be co-sponsoring a workshop with the three lower mainland training clinics – the UBC Counselling Centre, the UBC Psychology Clinic and the SFU Clinical Psychology Centre. The workshop is scheduled for late autumn and the topic is "Professional Wills". The workshop will focus on issues related to preparation for retirement including closing a practice and ensuring that procedures are in place for the professional and ethical handling of related matters.

The workshop will be presented by Dr. Tom McGee. It is tentatively scheduled for Saturday, November 12th, 2005 but the date may change.

NOTICE

Dr. Robert Haymond resigned from the College of Psychologists of British Columbia effective June 30, 2005.

From the Registrar

Decision of the Information and Privacy Commissioner

The College was pleased with a recent decision of the Office of the Information and Privacy Commissioner. The decision arose out of a request for a written inquiry following the College's decision not to disclose correspondence between the College and a registrant. In essence, the Commissioner's decision protects the letters written to registrants under Section 33(5) of the Health Professions Act and registrants' responses to these letters from being disclosed to complainants. A letter written under this section of the Act typically lists the allegations of the complainant and any additional concerns identified by the Committee in its review of the complaint. The College is pleased that it was able to protect this important and private communication between the Inquiry Committee and registrants.

BROCHURE FOR REGISTRANTS

Here is the text of the brochure now routinely mailed to registrants along with notification of having been named in a complaint:

The role of the College Section 16 of the Health Professions Act states: It is the duty of a college at all times to serve and protect the public, and to exercise its powers and discharge its responsibilities under all enactments in the public interest. If a member of the public who has received or is receiving psychological services has questions or concerns about the services received from a registrant, they may wish to first discuss this with the registrant. If the member of the public is not satisfied with the outcome of this course of action or chooses not to contact the registrant, he or she may submit a formal complaint to the College. Complaints are also received from professional colleagues who are obligated to do so when there are reasonable and probable grounds that one or more standards of the Code of Conduct may have been breached. Once the College has received a written and signed letter of complaint, the College has both formal and informal resolution processes available to investigate concerns and complaints and take appropriate action. The Inquiry Committee may also open a complaint on its own motion when a matter of concern has come to its attention. The College investigates allegations brought before it that a Registered Psychologist or a Registered Psychological Associate has violated the Code of Conduct or the bylaws of the College. It is not the role of the College to be an advocate for complainants involved in ongoing litigation, nor to advocate on behalf of the registrant.

The complaint process All formal complaints submitted to the College are investigated.

Upon receipt of a complaint, the Registrar conducts an initial review to establish whether the College has jurisdiction and to assess immediate public protection issues. The complaint is then brought before the Inquiry Committee. If the Inquiry Committee identifies areas in which an ethical violation may have occurred, the registrant is sent a letter under Section 33(5) of the Health Professions Act. This section requests that the registrant provide to the College any information the registrant believes the College should take into consideration in making any decision on the matter. In other words, this is the time when the registrant has the opportunity to present their point of view through a written submission. If the complaint has proceeded to this stage, the College also provides to the registrant a copy of all of the documents upon which the Committee will be making a decision.

When a complaint is before the Committee, the Inquiry Committee directs any further investigative action on the file. The Committee's options include: (1) request of the clinical file; (2) inspection of the registrant's practice records; (3) informal attempts at resolution; or (4) dismissal of the complaint.

These options are not mutually exclusive. Registrants are required by the *Code of Conduct* to cooperate with the Inquiry Committee inits investigation of complaints. The Inquiry Committee is of the view that the solicitation of letters of support, and requests to third parties to comment on complaint allegations is an inappropriate response to letters of complaint. Any such letters will not be considered by the Committee in its deliberations about the complaint.

Complaint resolution The term "without prejudice" has become an important one in the College's complaint resolution process. A without prejudice meeting or letter is one that may not be used in any other proceeding. Issues discussed on this basis are for the purpose of resolution. If resolution is not attained, the matters raised may not be used or applied in any other context. The Inquiry Committee invites registrants to attend a without prejudice meeting where it is thought that such a meeting is likely to resolve the matters raised by a complaint. The Inquiry Committee has found that these meetings are most productive and useful when attended by the respondent and members of the Inquiry Committee for an open and collegial discussion, without the presence of legal counsel. Some insurance providers require that registrants notify them that a complaint has been lodged. Except in the

most serious circumstances it is typically the choice of the registrant whether to retain legal counsel.

The complaint decision A range of outcomes are possible when closing a complaint file. These include: dismissal of the complaint; a Letter of Undertaking or Consent Agreement (which is an agreement between the College and the registrant to address the concerns of the Committee and the specific terms and conditions for addressing the concerns); or referral of the complaint to the Discipline Committee for a hearing (in serious cases). In some circumstances the Inquiry Committee can call for its own hearing. Complaints that are dismissed do not become a part of the record of the registrant.

Who files complaints? The complaint process provides an opportunity for recipients of psychological services who feel that they have been treated unethically or unprofessionally by a Registered Psychologist or a Registered Psychological Associate to express their concerns. It is also available to registrants or other professionals who have reason to believe that a registrant has violated the Code of Conduct or the bylaws. Disagreeing with the opinion expressed by a Registered Psychologist or a Registered Psychological Associate is not in and of itself grounds for a complaint.

How long will it take? The time frame for processing the complaint varies depending on a number of factors. These include the complexity of issues involved in the complaint, and the availability and volume of materials to be reviewed. Registrants are typically notified within one to two weeks of receipt of a complaint. In rare exceptions a longer period is allowed when the complainant has personal safety concerns.

What happens if the complainant is not satisfied? The Health Professions Act has a provision that complainants may request a review of a decision of the Inquiry Committee not to take the matter to a hearing if dissatisfied with the decision of the Inquiry Committee. This review is heard by the Board of the College. In some cases where an agreement is achieved with the registrant to resolve a complaint, the complainant does not have the right to a Board review. The Board review is conducted on the same documentation that was before the Inquiry Committee. The Board review may confirm the decision of the Inquiry Committee not to take the matter to a hearing, or direct other action under s. 34 (4) of the Health Professions Act.



Continuing Competency Program Requirements Quality Assurance Committee Policy

	Hr/Yr	Formal Description	QAC Policy
1. General Requirements	35 total	Key criteria: 1. Compliance with the Continuing Competency Requirements Policy is a pre-condition of renewing registration with the College. 2. Breach of the Code of Conduct will be referred to the Inquiry Committee. 3. General principle is the intent of acquiring new knowledge for the practice of psychology. a. Is the specified activity relevant to enhancing the competency of the registrant to practice psychology? b. Can the registrant articulate what he/she has learned relevant to improving competence in a way that is clear and convincing to a group of peers? 4. The closer the activities engaged in by the registrant is to the modal activity, the more likely it will be rated as meeting the criteria and the less likely that additional information will be required.	 Each year all eligible registrants will be in the selection pool for the random audit. Registrants must be in compliance with the program for each year. There is no averaging over more than one year. Registrants must be in compliance with the program categories of activities as noted. Additional hours in one category cannot be used to compensate for fewer hours in another category. Activities completed to fulfill requirements while on the Limited Register - Inquiry Committee or Limited Register - Registration Committee are considered remedial and cannot be used towards the continuing competency requirements. Providing supervision, and/or providing a workshop or presentation, where the intent is to provide information or guidance to others, cannot be used towards the continuing competency requirements. However, some preparation time may be included under self study. Continuing competency activities should be sufficiently evidence-based so as to be seen by a majority of registrants to enhance the registrant's practice of psychology within the scope of practice specified in the Psychologists Regulation under the <i>Health Professions Act</i>.
6. The Continuing Competency Program	Competency	Program	
A. Direct Participatory, Formal Programs	12	Intent: Learning of new information regarding the practice of psychology. To accommodate those registrants who live in rural areas, a maximum of half of the hours may be obtained through on-line courses, but only if these courses are CPA/APA approved. Modal Activity: Annual meetings of professional associations of psychology or sponsored learning institutes. Typical characteristics are: the event is planned in advance; speakers have professional credentials in mental health, health or industrial/ organizational behaviour; printed documentation is provided, registration fee is typically charged. Documentation: Log sheet details. Printed documentation to be submitted to the Committee on request.	 The QAC considers a CPA/APA approved correspondence course to be equivalent to an CPA/APA approved on-line course. In-person courses and CPA/APA sponsored/approved on-line courses are both considered direct participatory formal programs. Sponsors and full names of conferences, courses, workshops need to be identified on the log sheet. CPA/APA approval is not required for formal conferences or workshops attended in person. CPA/APA approval is required for on-line courses in this category. The activity must be within the framework of the definition of psychology as per the <i>Psychologists Regulation</i>. Presentations or workshops provided by you, where the intent is to provide information or guidance to others, cannot be used to fulfill the requirement in this category. Hours documented need to reflect time attending educational activities.

	Hr/Yr	Formal Description	QAC Polity
B. Self Study	11	Intent: Keeping current on reading of regulatory, academic, and professional literature, and to reflect on how this information impacts on one's practice of psychology. Modal Activity: Reading Code of Conduct, bylaws, practice advisories, other publications of the College, professional journals and other relevant publications. Reviewing one's practice of psychology with knowledge of the above documents to identify any areas in need of improvement. Documentation: Log sheet details outlining the specific journals and materials read. Simply stating "read journals" will not be sufficient.	 Details regarding specific journals and materials read are required on the log sheet. Online research acceptable if articles are obtained or read on-line. Non CPA/APA on-line courses are eligible. Preparation for presentations or workshops you give can be included in this category if you learned something new and practice enhancing. Listserve discussion groups are not acceptable. Materials read must be within the framework of the definition of psychology as per the <i>Psychologists Regulation</i>.
C. Structured Interactive Activities	12	Intent: Interacting with a reasonably consistent group of colleagues in recognized healthcare disciplines on a regular basis for the purpose of learning, consolidating new knowledge, and incorporating new ideas and feedback from others into one's practice of psychology. Modal Activity: Regularly scheduled or routine consultations with peers (colleagues who are licensed professionals in mental health, health, or industrial/ organizational behaviour). For example, peer consultation and/or case conferences are acceptable; staff meetings where the focus is on administrative issues are not acceptable.	 Structured interactive activities are activities in which you have interacted with colleagues (e.g. peer supervision or study/training groups). There are no requirements for structured activities to be in person (e.g., they could occur by phone). Listserve discussion groups are not acceptable to fulfill this requirement. Supervision, presentations or workshops you provide, where the intent is to provide information or guidance to others, cannot be used to fulfill this requirement. Staff meetings where the focus is on administrative issues are not acceptable to fulfill this requirement. To meet the requirements for this category, these activities need to be done with licensed mental health, health or industrial/organizational practitioners.
D. Ethics	(5)	Intent: Identifying which activities from Sections A, B, and/or C focus on ethical practice in psychology.	 The required 5 hours can be obtained via direct participatory, formal programs, self study, and/or structured interactive activities. This requirement could be met entirely through self-study. Registrants cannot request a reduction in required ethics hours.



	Hr/Yr	Formal Description	QAC Polity
I. Exemptions/Partial Reductions	al Reduction	SI	
For registrants in the Out of Province or Retired Category			Full exemption will be granted for: a. registrants in the Out of Province category for the entire year. b. registrants in the Retired category for the entire year.
For registrants on medical or parental leave during the course of the year			Any reductions granted will result in a reduction across categories, excluding the ethics requirement, for which no reduction will be granted. No reductions will be granted for amounts other than listed in the items below. The maximum reduction granted for amounts other than listed in the items below. The maximum reduction granted will be 86% (i.e., 100% minus 5 hours of ethics or 14%). Other reductions are only as listed below. Registrants may be granted a reduction based on the date of initial registration during the year as follows: Date of Registration Reduction April - June April - June April - June Cocober - December 86% Registrants may be granted a reduction as below for medical or parental leave. Registrants are required to submit a letter from the attending physician and documentation confirming the length of time the registrant was not practicing. Amount of Leave Reduction 4 - 6 months 7 - 9 months 86% 10 - 12 months

ANNUAL REGISTRATION RENEWAL POLICIES FOR DECEMBER 31, 2005		
A. General Requirements		
Each registrant of the College must 1) pay to the College an annual renewal fee and 2) submit the completed renewal form on or before December 31 of each year. This applies to all registrants regardless of placement on the Full or Limited Register.		
Registrants are personally responsible to ensure that the renewal fee and completed renewal form arrive at the College by December 31. Registrants are encouraged to take institutional financial processing and mailing procedures into account in ensuring that materials arrive at the College by the due date.		
As per the <i>Health Professions Act</i> , s 21 (4), "A board may, on grounds the board considers sufficient, cause the registration of a former registrant to be restored to the register on payment to the board of (a) any fees or other sums in arrears an owing by the former registrant to the board, and (b) any reinstatement fee required by the bylaws."		
As per bylaw 54(1), "A former registrant whose registration was cancelled under section 21(3) of the Act may be reinstated by the board under section 21(4) of the Act if the former registrant submits a. a signed and completed application for reinstatement in Schedule H, b. all documents, fees, and information required for renewal of registration in section 53(3), and c. a reinstatement fee in an amount equal to 35% of the registrant's annual registration renewal fee. (2) The board may waive all or any part of the reinstatement fee referred to in subsection (1) (c) if the board is satisfied that imposition of the fee would cause undue financial hardship for the former registrant."		
Individuals who practice psychology after they have been removed from the Register will be considered to have violated the <i>Code of Conduct</i> and the <i>Psychologists Regulation</i> .		
As per bylaw 53(8), "a registrant must prominently display his or her current annual certificate in the premises routinely used by the registrant to practice psychology." Receipt and annual certificate(s) will be mailed to those who have completed their renewal.		
B. Fees		
As per the Health Professions Act, s. 21(3)(b), "The registrar must cancel the registration of a registrant in the register if the registrant has failed to pay a fee for renewal of registration or another fee within the required time." Registrants who submit their payments after December 31 will be removed from the register (see Reinstatement and Possible Disciplinary Action).		
The full amount (\$1200) is due on or before December 31. There are no payment plans. Cheques may be post-dated no later than December 31, 2005. Cheques dated after December 31, 2005 will not be accepted.		
Registrants whose cheques are returned by the bank for any reason will be considered to have not paid their renewal fee. In addition, an administrative fee of \$50.00 will be charged.		
on, and Supporting Documents		
REMINDER: DO NOT SEND ANY DOCUMENTS TO THE COLLEGE AT THIS TIME. Registrants will be required to sign an attestation regarding their compliance with the Quality Assurance Program. After renewal, a random sample of registrants will be asked to supply documentation.		

2. Insurance	As per bylaw 61, "All registrants must maintain or be included in coverage under professional liability insurance in an amount not less than \$1,000,00 per occurrence." Registrants are required to sign an attestation that they have insurance in compliance with bylaw 61.
3. Limited Register	 a) Limited Register – Out of Province. Registrants placing themselves on the Limited Register – Out of Province must submit documentation of their registration/ licensure to practice psychology by a regulatory body in the other jurisdiction. b) Limited Register – Non-Practicing. Registrants placing themselves on the Limited Register – Non-Practicing must indicate the reason for placement in this category. c) Limited Register – Retired. Registrants placing themselves in this category are not expected to return to practice.
D. Making Changes at Ren	ewal
1. Change of Register Address	Registrants are reminded that bylaw 50(3) states "If there is a change in the information on the full register or limited register respecting a registrant, the registrant must, within 30 days of the effective date of change, provide the registrar with new information." There is a \$100 processing fee if a registrant has not notified the College of a change to the Register. As per the Health Professions Act, 21(2), "The registrar must maintain a register and must enter in it the name and address of every person granted registration under section 20." Please note that under the Health Professions Act, 54(1), "If a notice or other document is to be delivered to a person under this Act, the regulations or the bylaws, it is deemed to have been received by the person 7 days after the date on which it was mailed if it was sent by registered mail, in the case of a document to be delivered to a registrant, to the last address for the registrant recorded in the register referred to in section 21(2) " A legal address is required (i.e., no post office boxes except for rural addresses in which case both a land address and post office box are required).
2. Change of Address where Records are Kept or Change of Directory Address	Registrants should indicate such changes in the space provided on the renewal form.
3. Change of Name	Registrants who have changed their name over the past year are required to review the Name Act and the requirements of the BC Vital Statistics Agency, and provide the appropriate documentation to support a legal name change. See the following document available on the College website for the name change policy: http://www.collegeofpsychologists.bc.ca/documents/ACF886.pdf
4. Change of Registration Categories	There is no criminal record check required for a registrant to change from one registration category to another. Registrants moving to the Limited Register - Out of Province or Limited Register - Non-Practicing must provide the supporting documentation as above. Registrants who were on the Limited Register - Non-Practicing due to medical reasons must submit documentation attesting to their readiness to resume the practice of psychology if they are planning to move to the Full Register.
5. Change of Credentials	Registrants who are currently registered at the masters' level and wish their registration status to reflect a recently acquired doctorate degree must make a written request to have the doctorate reviewed by the Registration Committee. The request must include an original transcript. The doctorate degree will be reviewed according to current registration criteria (available on the College website under Applications).
6. Change of Area of Practice	At renewal, registrants sign an attestation declaring their competence in one or two areas of practice. The self-declared areas of practice will be listed on the renewal form. Any changes or additions will be reviewed by the Registration Committee and registrants may be asked to submit documentation to support the change.

IN MEMORIAM

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Barbara Passmore

With great sadness we report on the death of Barbara Passmore, former public board member, former co-chair of the Inquiry Committee, and more recently, member of the Registration and Inquiry Committees. Barbara died on May 29th from pancreatic cancer. She will be remembered fondly for her strongly principled stance on important issues and her passionate presentation of her views. She gave many hours to the College and strongly believed in the importance of the public voice in professional regulation. She will be greatly missed. Here is the text of comments offered by Dr. Michael Joshcko, board member and Chair of the Quality Assurance Committee, who represented the College at her memorial service:

All of you are here because you have a connection with Barbara - With her vibrant spirit, her love of scotch, her sense of humor and warm and engaging personality. We would like to speak to the very significant contribution she made through her involvement as a public member of the psychology licensing Board in British Columbia, the College of Psychologists of B.C. Barbara was appointed to our Board during a time of significant challenge and transition. She spoke her mind when she thought she perceived self-interest and pounded on the table when she sniffed a possible insensitivity to an issue of public protection. We are so pleased that we were able to acknowledge her contributions at last year's AGM, just weeks before her diagnosis. With that recognition we are assured she had some idea of how important her contributions were and how much she was appreciated by the profession of psychology in British Columbia. We will cherish our memories of Barbara, vibrant, funny, engaging, and genuine and will ever value her personal integrity, her fierce devotion to community service and the very important, real and meaningful contribution that she made to the regulation of the profession of psychology in British Columbia.

The College Board has decided to dedicate the Board Room in her memory. The dedication ceremony is to take place on September 16, 2005 with Barbara's family and friends, members of the Board and College staff in attendance for the ceremony and luncheon. The Board Room will be renamed the **Barbara Passmore Boardroom** and a plaque with her picture and a tribute will be unveiled.

College of Psychologists of British Columbia