

The information in this Practice Support checklist is intended to provide general guidance to assist registrants in identifying issues and options that should be considered, and implementing strategies to address issues, resolve problems and improve practice, with respect to a particular aspect of psychology practice. No checklist can anticipate all variables that might be relevant to a specific professional decision or circumstance, but the checklist can provide general guidance to registrants dealing with the identified practice issue. Registrants are also invited to contact the Practice Support Service with any questions.

Readers are advised that documents provided by the Practice Support Service are not legal advice, and do not supplant any applicable legislation, the College's Code of Conduct, its Indigenous Cultural Safety and Humility and Anti-racism Standard, or any other official College communications or professional standards. While an effort has been made to be comprehensive, the information in this checklist is not exhaustive, and the College makes no warranty or representation as to its currency, completeness or accuracy. The College accepts no responsibility for any errors or omissions, and expressly disclaims any such responsibility.

This checklist does not establish standards, limits or conditions for registrants' practice for the purposes of the Health Professions Act, and it is not intended to impose mandatory requirements to the extent that such requirements are not established under the Code of Conduct or the Indigenous Cultural Safety and Humility and Anti-racism Standard. In the case of any inconsistency between this checklist and any Code standard or the Indigenous Cultural Safety and Humility and Anti-racism Standard, the Code standard or Indigenous Cultural Safety and Humility and Anti-racism Standard governs. The final decision on the course of action to be taken in any practice situation is made by the registrant, and checklists are not intended as a substitute for the professional judgment and responsibility of the registrant. Exclusive reliance on checklists is imprudent, as every practice decision depends on its own particular circumstances.

This document may not be copied in part. Registrants wishing to copy it in its entirety must keep this disclaimer attached and must identify it as a College of Psychologists of B.C. Practice Support document. For ease of reference, select Code standards are indicated in brackets following checklist items. Registrants are obligated to consider any other Code standards and legislation that may be relevant to a specific practice situation. All references to the Code of Conduct and other legislation is current to the date indicated at the beginning of each checklist.

Telepsychology Services Checklist

This document is intended to assist registrants who are considering providing telepsychology services. The term telepsychology is used to refer to psychological services that are not provided in-person (i.e., the provider is not physically present with the service recipient). This applies whether the client is in another building or another jurisdiction. A service is considered to have been provided via telepsychology regardless of modality and thus includes, as examples, services provided via email, telephone, videoconference, or other electronic media. Relevant Code standards are indicated in brackets following the checklist items.

- I understand that I am responsible for determining all requirements for providing telepsychology services in the jurisdiction I am in and the client(s) is (are) in, and for maintaining compliance with those requirements. **(3.8, 3.30, 3.31, 18.1)**
- If the client(s) is (are) outside of BC I have determined whether I need to be registered in the jurisdiction(s) in which the potential client(s) is (are) located in order legally to offer the service being contemplated, and have taken steps as appropriate to register in that (those) jurisdiction(s). **(3.8, 3.30, 3.31, 18.1)**
- If the client(s) is (are) outside of BC I have determined all relevant legal requirements regarding offering services in the other jurisdiction(s) and will ensure that I am, and will remain, in compliance with those requirements. **(3.8, 3.30, 3.31, 18.1)**
- If the client(s) is (are) outside of BC I have apprised myself of all professional Code(s) of Conduct or other corresponding rules/regulations in the other jurisdiction(s), and will ensure that I am, and will remain, in compliance with those regulations. **(3.8, 3.30, 3.31, 18.1)**
- If I am offering services when I am outside of BC, I have determined whether I need to be registered in the jurisdiction(s) in which I will be located in order legally to offer the service being contemplated, and have taken steps as appropriate to register in that (those) jurisdiction(s). **(3.8, 3.31, 18.1)**
- If I am offering services when I am outside of BC, I have determined all relevant legal requirements regarding offering services in the other jurisdiction(s) and will ensure that I am, and will remain, in compliance with those requirements. **(3.8, 3.31, 18.1)**
- If I am offering services when I am outside of BC, I have apprised myself of all professional Code(s) of Conduct or other corresponding rules/regulations in the jurisdiction(s) I will be in, and will ensure that I am, and will remain, in compliance with those regulations. **(3.8, 3.31, 18.1)**
- I have determined that my liability insurance coverage includes coverage for the specific services I am considering offering in the specific jurisdiction(s). **(3.30)**
- I have determined that my liability insurance coverage meets the insurance requirements set by all relevant jurisdiction(s). **(3.8, 3.30, 3.31, 18.1)**

- I have the appropriate education, training, and experience to offer the contemplated service in the modality being considered. **(3.5, 3.25, 3.30)**
- I have established appropriate consultation resources that I may access as necessary to maintain and enhance my competent practice of telepsychology services. **(3.2, 3.3, 3.21, 3.30)**
- I will maintain current knowledge of scientific and professional developments related to the telepsychology services I offer. **(3.2, 3.7)**
- I have considered whether there is appropriate empirical support for the specific intervention or other telepsychology service being considered. **(3.9, 3.10)**
- I have considered whether there is appropriate empirical support for the telepsychology service with the specific type of client in question. **(3.9, 3.10, 3.23, 5.1)**
- I have considered whether there is empirical evidence to suggest that the contemplated telepsychology services are at least as beneficial in the circumstance as in-person psychology services. **(3.9, 3.10, 5.1, 8.2)**
- I have considered whether the contemplated telepsychology service serves the best interests and welfare of the intended client(s). **(3.6, 5.1, 5.26, 8.2)**
- I have considered how best to structure the service and my availability to maximize client welfare. **(3.3, 5.1, 5.26, 8.2)**
- I have considered potential safety or other concerns regarding the intended clients and familiarized myself with the client's local supports and other location-specific resources as necessary. **(3.3, 5.1, 5.26, 8.2)**
- I have considered my client selection process to ensure that I will only offer my services as appropriate to maximize client welfare. **(3.23, 5.1, 5.26, 8.2)**
- I will consider when a referral to another professional may be in the client's best interests and have established referral resources for that purpose. **(3.6, 5.1, 5.26, 8.2)**
- I have considered the information I need to provide to clients to ensure that I am obtaining proper informed consent given the current state of the empirical literature pertaining to telepsychology services, including specific risks related to the service, any additional risks to confidentiality and my management of those risks, and specific elements of a telepsychology- based professional relationship. **(3.30, 4.1, 4.2, 4.6, 4.8)**
- I have identified the steps I will need to take in the event a mandatory reporting issue arises, including jurisdiction-specific requirements, and my informed consent process includes a review of this issue with potential clients. **(3.8, 3.30, 4.2, 18.1)**
- I have conducted a review of the *Code of Conduct* to ensure my contemplated services are in compliance with all relevant *Code* requirements. **(2.1, 3.1, 3.30)**