



Professional Accountability & Responsibility

Applies to Audiologists, Hearing Instrument Practitioners, and Speech-Language Pathologists

The College of Health and Care Professionals of BC was created on June 28, 2024 through the amalgamation of seven health regulatory colleges:

- College of Dietitians of British Columbia
- College of Occupational Therapists of British Columbia
- College of Optometrists of British Columbia
- College of Opticians of British Columbia
- College of Physical Therapists of British Columbia
- College of Psychologists of British Columbia
- College of Speech and Hearing Health Professionals of British Columbia

All current requirements for standards of clinical and ethical practice issued by the seven colleges remain in place upon amalgamation.

This document was created by the College of Speech and Hearing Health Professionals of British Columbia and will be updated to reflect the amalgamation.

Standard Category:	Standard Title:	Standard #:
Professional Standard	Professional Accountability & Responsibility	SOP-PROF-05
Regulation Bylaw Reference:		HPA Reference:
Bylaws: Part 13		16 (2)(d)
Authorization:	Date Approved:	Date Revised:
CSHBC Board	August 9, 2017	June 29, 2020

DEFINITIONS

In this standard:

“Practice role” means a set of professional activities performed by registrants. Registrants may have different practice roles depending on their practice settings and given different clinical populations. A practice role may be in direct clinical care of clients or in other roles including but not limited to managing, counselling, administering, teaching, guiding, directing, or developing clinically related services. All roles are intended to be within the scope of practice of a given health profession and may be integral to an inter-professional care team.

SCOPE

All Full, Conditional, and Temporary registrants of CSHBC.

STANDARD

All Full, Conditional, and Temporary registrants of CSHBC must practice according to the CSHBC *Registrant Code of Ethics* (SOP-PROF-08) and *Registrant Code of Ethics (Annotated)* (SOP-PROF-09). Registrants must always conduct themselves in a professional manner, regardless of their practice role and in accordance with the following professional principles and requirements.

Registrant accountability and responsibility extends to all services that they provide and in all professional contexts and includes a mandate to ensure client safety at all times.

Registrant Responsibilities

Registrants are responsible for:

1. Care provided by those under their supervision including: Communication Health Assistants, Interns, students, trainees, Conditional registrants;
2. Being familiar with and adhering to all CSHBC standards of practice and related clinical decision support tools;
3. Reporting registrants who are not practicing ethically, competently or who are unfit to practice (see *Duty to Report* (SOP-PROF-04));

4. Knowing who needs to be on a client's care team and for knowing who on the team is responsible for what or if the responsibility is shared (see *Inter-professional Collaborative Practice Standard of Practice (SOP-PROF-01)*);
5. Knowing the risks and benefits of services to a client; predictability of outcomes, and methods to measure outcomes (both intended and unintended);
6. Managing caseloads within existing resources which may involve the need for client prioritization;
7. Informing clients of all treatment and intervention options that are recommended;
8. Informing clients when there is a discrepancy between recommended and available services including, but not limited to, informing them of alternate treatment options, funding opportunities, discrepancies between recommended and actual treatment availability, any risks or implications of delayed treatment or treatment that is below the recommended levels;
9. Informing clients of all funding options, including 3rd party and private pay alternatives.

Registrant Accountabilities

In addition, registrants are accountable for and required to:

1. Be competent in all areas of their practice, commensurate with their individual expertise regardless of the circumstances or who asks for the care to be provided (see *Attaining & Maintaining Practice Competence (SOP-PROF-02)*);
2. Accept sole accountability for determining that the client's condition warrants performance of an activity;
3. Involve and inform the client (or substitute decision-maker) regarding all clinical decision making according to CSHBC standards of practice and the principles of client-centered care;
4. Obtain and document client consent according to the CSHBC standard, policy, and guideline for *Documentation & Records Management (CPG-04)*;
5. Practice within the scope of practice for each profession for which they hold registration;
6. Practice within any limits or conditions set by CSHBC or in the Speech & Hearing Health Professionals Regulation;
7. Understand and comply with the national competency profiles for all professions for which they hold registration;
8. Have client-based rationale when deviating from accepted or best practices;
9. Understand and utilize the CSHBC guidelines on conflict of interest and professional boundaries (see *Professional Boundaries – Where's the Line? (CPG-05)*);
10. Know and adhere to any CSHBC documents pertaining to any concurrent or alternate service delivery methods, including virtual care;
11. Maintain their professional information on record with CSHBC and to be current in their CSHBC obligations including, but not limited to, registration and payment of fees, Continuing Competency Credit (CCC) requirements, Certified Practice (CP) requirements, Practice Hours Requirements (PHR), and Quality Assurance & Professional Practice (QAPP) Practice Review program requirements;
12. Participate fully in all required CSHBC QAPP program modules.

COMPLIANCE

Registrants are required to abide by the professional responsibilities and accountabilities. Where a registrant does not comply, and where certain conduct occurs, including a registrant's refusal to fully participate in required Quality Assurance & Professional Practice (QAPP) program, under section 26.2(3) of the *Health Professions Act* (the "Act"), the QAPP Committee must refer the matter to the College's Inquiry Committee, which must treat the matter as if it were a complaint.

CSHBC RELATED DOCUMENTS

Attaining & Maintaining Practice Competence (SOP-PROF-02)

Certified Practice (SOP-PROF-06)

Communication Health Assistants (Delegation & Assignment) (SOP-PRAC-04)

Continuing Competency Credit Program Requirements (POL-QA-02)

Documentation & Records Management (CPG-04)

Duty to Report (SOP-PROF-04)

Infection Prevention & Control Guidelines for Audiologists (ACPG-08)

Inter-professional Collaborative Practice (SOP-PROF-01)

Professional Boundaries – Where's the Line? (CPG-05)

Registrant Code of Ethics (SOP-PROF-08)

Registrant Code of Ethics (Annotated) (SOP-PROF-09)

Unique & Shared Scope of Practice (SOP-PROF-03)

Virtual care (SOP-PRAC-03)

REFERENCES

[BCCNP Professional Standards](#)