



Chronicle

College of Psychologists of British Columbia

NEWS AND INFORMATION FROM THE COLLEGE OF PSYCHOLOGISTS

Fall 2017

Letter from the Chair of the Board

Dear Colleagues,

This issue of the Chronicle is devoted to a number of key topics including: the professional executor requirement, proposed changes to the Continuing Competency Program (see details in this issue for how to provide your comments and input to the posted document), bylaw change update and ensuring proper insurance coverage, description of two new draft checklists (also posted for comment and feedback), a refresher on the duty to report requirement of the Health Professions Act (HPA), a call for Nominations for the two professional board positions, notice about upcoming information meetings in Vancouver and Victoria (and a reminder that the College will endeavor to provide a similar meeting for groups of 10 or more registrants in other locations), information about 2018 renewal, a brief promo and encouragement for registrants to take the College's online workshop on the key topics of the basics of regulation, collaborative care, and making use of the cumulative wisdom of the Inquiry Committee in avoiding or managing complaints. As always, comments and feedback (feedback@collegeofpsychologists.bc.ca) are welcome both generally as well as to the draft documents posted in the registrant portal. I am pleased to share a few comments on each of these important topics.

Professional Executor Requirement

This requirement has been in place since 2009. Since then, the College (and registrant's families) have repeatedly experienced the importance of having a registrant designated to perform this important function in the event of incapacity or death.

Proposed Changes to the Continuing Competency Program

As has been discussed at several past AGMs and information meetings, registrants are aware of the government and public expectation of increased responsibility among health profession regulators in regard to competence to practice. The current proposed changes are minor and are focused largely on clarifying the requirements. The Committee will continue to consider how the College requirements may need to change in the future with regard to competency assessment.

General Update on Bylaw changes

As this issue goes to press, the three month public notification phase of the proposed bylaw changes has closed and the date of official implementation is November 27, 2017. Thank you to those registrants who took the time to provide comments and feedback.

Draft Checklists on Two New Topics

Registrant response to the Practice Support Checklists has been quite positive and registrants are encouraged to continue to provide any comments or feedback. Two new draft checklists have now been posted on the topics of Establishing or Working Within a Group Practice and Indigenous Cultural Safety. Please take the time to review the documents carefully and to provide your thoughtful comments and feedback.

Duty to Report

The requirement to report a registrant of any health College is outlined in the HPA, and the article in this Chronicle is intended as a reminder of this obligation (see the Practice Support Corner in this issue).

Nominations

There are two open Board positions for registrants. See the notice included with this issue if you are interested in putting your name forward. Both Dr. Kenneth Cole and myself are now completing a first three-year term and plan to put forward our names again for a second term.

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COLLEGE BOARD

- Kenneth Cole, *Ph.D., R.Psych.*
- Catherine Costigan, *Ph.D., R.Psych.*
- Lindsey Jack, *Ph.D., R.Psych.*
- Sandra James, *Public Member*
- Pippa Lewington, *Ph.D., R.Psych.*
- Marlene Moretti, *Ph.D., R.Psych.*
- J. Dean Readman, *Public Member*
- Lisa Seed, *Public Member*
- Charles T. Wormeli, *Ed.D., R.Psych.*

Information Meetings

Information meetings provide an opportunity for the Board to provide registrants with important updates and to respond to questions from registrants. Please note the dates and RSVP. We continue to endeavor to provide information meetings in other locations for groups of 10 or more registrants. While it is not always possible to schedule, we do our best.

2018 Renewal

Once again, the Board is pleased that no increase in renewal fees is anticipated for 2018. We continue to appreciate the efficiency and competence of our staff, committee members, oral examiners and regulatory supervisors whose efforts importantly contribute to our ability to remain within budget parameters in an increasingly complex regulatory environment.

College Workshop Online

Considerable effort was put into converting the very successful College workshop which was offered in-person multiple times in 2015 and appreciation goes to our Deputy Registrar, Dr. Amy Janeck for her good work in making this happen. This transformation has resulted in a polished and easy to watch online workshop available for all registrants. The importance and continued timeliness of the workshop content means that it is worth completing, even if you attended one of the 2015 in person workshops.

I also take this opportunity to make sure registrants are aware of the newly revised website which is also a rich resource for registrants, containing links to past Chronicles and Annual Reports, in addition to many other sections of reference information and key documents, FAQs, public notifications, etc.

Respectfully yours,

Pippa Lewington, Ph.D., R.Psych.
Chair of the Board

Need Continuing Competency Hours?

APPROVED ONLINE WORKSHOPS!

San'yas Indigenous Cultural Safety Training Course

The College continues to encourage registrants to complete the San'yas Indigenous Cultural Safety Training Course located at <http://www.sanyas.ca/training/british-columbia>. The College's endorsement of this course has led the Quality Assurance Committee to amend the continuing competency policy to allow for this online course to be claimed for credit in Category A (Direct Participatory, Formal Programs).

Lessons from the Past and Prepping for the New Reality

This College developed course is available online for registrants who were either unable to attend one of the series of in-person offerings in 2015 or are interested in a refresh on the content which remains timely and important. The workshop garnered consistently high reviews from the over 250 registrants who participated. Participant comments praised the clear presentation of the accumulated wisdom of the Inquiry Committee and translation of that wisdom into practice, including lessons learned from complaints and top tips for best practices and understanding the College's obligation to investigate complaints. Collaborative care and expectations for registrants to engage routinely and productively with other health professionals is also highlighted as part of this workshop. Completion of the workshop online, including the required readings and successful completion of the post-workshop quiz, will meet regular continuing competency requirements for 2017 or can be banked for next year.

2018 RENEWAL

The renewal process will start mid-November. Please ensure that the College has a current email on file as all renewal information and correspondence will be sent electronically. We will also be sending detailed instructions and FAQs on how to log into the registrant portal, complete the online form and submit payment. This information will be posted on the College website as well. Please take the time to review these materials to avoid errors and delays.



In order for your renewal to be complete, both form and payment must be received at the College by December 31st. Registrants are encouraged to use electronic payment to pay their renewal fees. This ensures that your payment will not be impacted by seasonal or other delays in mail delivery. Please also note that this year December 31st falls on a Sunday and the College office will be closed. Payment can be made by cheque, money order or through online banking. Credit cards are not accepted.

Please be sure to touch base with your professional executor before you renew. See the article in this edition of the Chronicle for more information regarding this requirement.

We invite you to contact the College if you have questions. Please keep in mind that the end of the year is a very busy time for the College and your patience is appreciated. We are always looking for ways to improve the renewal process by providing you with all the necessary information and assistance well in advance and we look forward to making this year's renewal a positive experience.

Continuing Competency Program Policy Changes

The Quality Assurance Committee conducted a thorough review of the existing Continuing Competency Program (CCP) policy and identified several areas in which clarifications were needed or greater detail would be of assistance to registrants, based on observations from past audits. While the edits are relatively minor there are several proposed changes (as well as one required change) that we wish to highlight for registrants:

No Exemptions From Continuing Competency Requirement for Non-Practicing Registrants Seeking Reinstatement to Active Practice:

This change to the policy is required for compliance with the College's current bylaws and is already being implemented. All registrants in the non-practising class (out of province, on leave, retired, etc) seeking reinstatement to active practice must be able to attest that they have completed all continuing competency program requirements for any calendar year ending between the date of their previous active registration and the date on which they are seeking to resume active practice. Out of Province registrants may meet the requirements by completing equivalent activities in their home jurisdiction. In circumstances where a non-practicing registrant has not fully met the continuing competency program requirements prior to reinstatement, the Registration Committee can consider reinstating the registrant to active practice as a Temporary (Supervised) registrant provided the registrant undertakes to complete any outstanding requirements and agrees to practice under supervision and in accordance with an approved plan. The College strongly recommends that non-practising registrants carefully plan their return to active practice by ensuring that they've fulfilled their continuing competency activities for the year(s) of inactive practice prior to the date on which they wish to return.

Proposed Changes and Additions for future implementation:

1. Requirement to retain Continuing Competency Logs (and supporting documentation) for 2 years.
2. Non-peer reviewed online content and association newsletters are added to listserv discussion groups as unacceptable to fulfill the Category B requirement. Reading peer reviewed professional journals, other academic publications, the *Code of Conduct* and College communications should be the modal activity.
3. Reviewing a manuscript for a peer reviewed journal can be included in Category B if the registrant learned something new and practice enhancing.
4. To meet the requirements for Category C, the registered health practitioner colleague(s) cannot be a family member of the registrant.
5. Proposed New Category E: Self-Assessment:

Ongoing competent practice is dependent on: education, training, and experience; keeping current with developments in one's area(s) of practice; and maintaining appropriate health and self-awareness for professional activities. As part of their review of the Continuing Competency Program, the Quality Assurance Committee (QAC) has discussed and reviewed the *Code of Conduct* requirements for self-care and self-monitoring as an important part of maintaining competent practice. Specifically, Standard 3.28 of the *Code of Conduct* obligates registrants to maintain physical and mental health sufficient to carry out their professional duties, and to take appropriate action in the event they determine their own issues or problems may interfere with their performance of work-related duties. Standard 3.27 requires registrants to consider whether personal problems will prevent them from fulfilling obligations and commitments, will prevent them from performing professionally in a competent manner, or will otherwise harm another person with whom they have a professional relationship. Standard 3.29 specifies termination requirements in the event a registrant becomes impaired within the meaning of Standards 3.27 or 3.28. The QAC has considered the importance of these requirements, and is actively considering incorporating a self-care and self-monitoring component into the Continuing Competency Program. The proposed new Category E requirements are intended to ensure that registrants formally consider the impact of their particular circumstances and stressors on their professional activities, and actively take steps to engage in appropriate self-monitoring and self-care to maintain their competent practice. It is recognized that each registrant will have his or her own specific set of personal and professional circumstances, and protective factors to consider as part of an individual self-review. If this proposed change goes forth, the College would either develop or identify existing tools to support registrants' compliance.

Registrants are encouraged to review the proposed revisions to the Continuing Competency Program Policy (which is available in the Registrant Portal) and to provide any comments or feedback to the College by November 15, 2017. Feedback should be sent via email at: feedback@collegeofpsychologists.bc.ca.

Non-compliance with the Continuing Competency Program is a serious matter. Compliance is a renewal requirement. At the point of renewal, all registrants are required to attest that they have completed all continuing competency program requirements for the year ending. In circumstances where an actively practicing registrant has not fully met the continuing competency program requirements prior to renewal, the Registration Committee can consider granting them Temporary (Supervised) registration provided the registrant undertakes to complete any outstanding requirements and agrees to practice under supervision and in accordance with an approved plan.

Practice Support: NEW Draft Checklists

The College is pleased to announce two additional draft checklists available for registrant review to assist registrants in considering two new practice issues: Establishing or Working Within a Group Practice and Indigenous Cultural Safety. These documents are intended to assist registrants in considering relevant issues when contemplating establishing or joining a group practice or working with indigenous clients. They are published in this edition of the Chronicle and are also available under "Review Documents" on the registrant portal.

Registrants are encouraged to review the Draft Checklists which follow and to provide any comments or feedback to the College by November 15, 2017. Feedback should be sent via email at: feedback@collegeofpsychologists.bc.ca.

Establishing or Working Within a Group Practice [DRAFT]

This checklist is intended to assist registrants in considering relevant issues when contemplating establishing or joining a group practice. Relevant Code standards are indicated in brackets following the checklist items.

- As a founder or principal of a joint practice, I have carefully considered who I will include as associates, including whether my associates will be completely independent practitioners, will be supervised by me, or will have some other clearly specified relationship with me and my joint practice. **(3.1, 8.4, 8.5, 8.6)**
- If I am using a restricted title in my business name, I will remain compliant with all College requirements to do so. **(10.19)**
- As the principal of my group practice, I will exercise care to ensure that no individual in my practice is misrepresented as a registrant if that individual is not registered with the College, and will take steps to correct any misrepresentation or misunderstanding regarding the status of any non-registrant in my group practice. **(9.5, 9.6)**
- If my practice will include service providers who are supervised by me, my supervision will be appropriate and sufficient to ensure competent service delivery and will be based on each supervisee's education, training, experience, and needs. **(5.21, 5.22, 5.23)**
- If my practice will include supervised service providers, clients and third party payers will be clearly informed regarding who is delivering the service and who is the responsible supervisor, and their informed consent will be obtained for this arrangement prior to the initiation of services. **(4.7, 8.6, 12.15)**
- A supervisory relationship will not be asserted solely for billing purposes, and will be claimed only when appropriate and sufficient supervision is being provided. **(12.16)**
- Regardless of whether my associates are my supervisees or independent practitioners, a written agreement will be established that sets out various practice issues, including but not limited to: file ownership; file storage practices; what happens to client files in the event a provider leaves the practice; financial arrangements, as appropriate; who has access to client information; access to shared resources (e.g., testing materials, clerical support, office space, etc.), as appropriate; responsibility for equipment maintenance, as appropriate; etc. **(3.1, 6.5, 8.4, 11.13, 11.16, 13.5, 13.10, 14.1, 14.2, 14.3, 14.4, 14.8)**
- In the event that research will be conducted within the group practice, a written agreement will be established regarding file ownership, publication credit, etc. **(14.13, 17.2, 17.3, 17.4, 17.5, 17.6)**
- In the event that I undertake to offer training as part of my group practice, I will ensure that the training is competently designed, accurately described and advertised, provides the necessary and proper experiences to appropriate trainees, and meets the stated goals of the training programme. **(11.13, 11.16, 15.1, 15.2, 15.3, 15.4, 15.5, 15.8, 15.9, 15.10)**
- I will provide appropriate and sufficient feedback to each of my trainees and supervisees, and will maintain appropriate records detailing my supervision and trainee evaluation activities. **(13.8, 13.9, 15.6, 15.7)**
- Clients will be fully informed regarding who has access to their information and for what purposes, and must specifically consent to each service and to use of their information for any purpose other than their own service, including for research purposes. **(4.1, 4.2, 4.7, 4.13, 4.14, 4.19, 6.1, 6.5, 6.14, 6.15, 14.10)**
- In the event that I decide to join a group practice as an associate, I will seek written clarification regarding: the nature of my relationship to the practice and its principals; file ownership; file storage practices; what happens to client files in the event I leave the practice; financial arrangements, as appropriate; who has access to client information; access to shared resources (e.g., testing materials, clerical support, office space, etc.), as appropriate; responsibility for equipment maintenance, as appropriate; etc. **(3.1, 6.5, 8.4, 11.13, 11.16, 13.5, 13.10, 14.1, 14.2, 14.3, 14.4, 14.8)**
- I recognize that as an associate I am responsible for addressing any perceived conflicts between the expectations or requirements of the group practice and my obligations under the Code of Conduct. **(5.24, 8.8)**
- I recognize that regardless of whether I am practicing as a principal or an associate of a group practice, I am responsible for all of my professional decisions and actions, including ensuring informed consent of clients, and that my conduct must meet all relevant Code of Conduct standards. **(2.1, 3.1, 4.1)**
- Regardless of whether I am practicing as a principal or an associate of a group practice, I have sought legal consultation if necessary to clarify my rights and obligations in working within a group practice. **(3.1, 18.1)**

Indigenous Cultural Safety Checklist [DRAFT]

This checklist is intended to assist registrants in considering relevant issues when contemplating providing services to indigenous individuals, to ensure those services are provided consistent with requirements of the College of Psychologists of British Columbia's Code of Conduct. This checklist is also intended to be consistent with the Truth and Reconciliation Commission of Canada's Calls to Action and the United Nations Declaration on the Rights of Indigenous Peoples. It has been developed with significant reliance on materials from the San'yas Indigenous Cultural Safety Training program delivered by the Provincial Health Services Authority in British Columbia. Use of the term "indigenous" in this checklist is intended to be inclusive and to encompass all of the First Nations, Metis, and Inuit peoples of Canada. This term is currently being adopted across Canada by groups designated as "aboriginal" and by the federal government. By recognizing First Nations, Metis and Inuit people as indigenous, the government is acknowledging their internationally legal right to offer or withhold consent to development under the United Nations Declaration of the Rights of Indigenous Peoples. A non-exhaustive list of relevant *Code of Conduct Standards* are included in brackets behind each section of this checklist.

Knowledge (3.2, 3.3, 3.7, 8.2)

- I have read and am familiar with Section 35 of the Canadian Constitution, which recognizes and affirms the existing aboriginal and treaty rights of the indigenous peoples of Canada.
- I know that there is diversity between indigenous groups as well as within groups of indigenous people.
- I recognize and respect that there has been a pervasive impact of colonization on indigenous people in Canada.
- I recognize and respect the individual, inter-generational, and general impact of historical trauma inflicted by mechanisms of assimilation, such as residential schools.
- I acknowledge the role of racism in affecting the life experiences and opportunities of all indigenous people, including those who do not identify with their racial, ethnic, or cultural heritage.
- I interpret the current health status of my clients in the context of broader level forces, such as the socio-economic determinants of health (e.g., the role of poverty as a contributing factor).
- I understand that beliefs about health, illness, and treatment are culturally anchored.
- I recognize and respect that some indigenous clients will be interested in using traditional approaches to healing while others may not.

Awareness (3.12, 3.13, 3.14, 3.18, 3.23, 5.1, 5.7, 5.26, 5.31, 5.33, 11.9, 11.11, 11.27, 11.33)

- I am aware of the cultural basis of my own values and beliefs.
- I am aware of my stereotypes of indigenous people.
- I am aware that my indigenous clients have stereotypes of me that may or may not be accurate.
- I am aware of how my stereotypes inform my attitudes (including possible prejudices) and behaviour (including possible discrimination) toward indigenous people.
- I am aware that the values, beliefs, and norms of my profession are rooted in a western perspective, and recognize there are incompatibilities between the culture of my profession and the culture(s) of my clientele.
- I am aware of the link between my discipline and colonial institutions (e.g., educational institutions, government structures, the justice system, etc.).
- I recognize and respect that some of my clients may not trust my profession or me.
- I am aware that the way I conceptualize a problem determines (and limits) the options I see for intervention.

Skills (3.2, 3.3, 3.5, 3.18, 3.21, 3.24, 5.1, 5.26, 5.33, 8.2, 11.3, 15.5)

- I am able to establish collaborative, respectful, and affirming working relationships with my clients.
- I am able explicitly to acknowledge diversity/differences between my clients and myself and also to identify commonality/common ground.
- I am able to recognize and respect the difference between my client's view of his or her problems and my view of the issues.
- I inquire about how my clients view their health concerns.
- I am open to learning from and collaborating with my indigenous clients, knowledge holders and colleagues, whose knowledge of traditional understandings of health and illness and indigenous approaches to healing may be greater than my own.
- I am respectful if my clients want to utilize traditional approaches to healing as part of or in addition to their work with me.
- I do my best to help my clients have an "affirming" encounter with my profession.
- I practice from a place of humility when trying to explore the unique experiences of my clients.
- I understand that my clients may not tell me about the nature of their experiences with me and that I must proactively use my knowledge, awareness, and skills to provide my services in a culturally competent manner to promote the health of all of my indigenous clients.
- I encourage my colleagues to adopt cultural safety standards for service delivery.
- I seek community experiences to enhance my knowledge, awareness, and skills in working with indigenous clients.

PROFESSIONAL LIABILITY INSURANCE

All registrants must maintain or be included in coverage under professional liability insurance in an amount not less than \$1,000,000 per occurrence, as per Bylaw 61. Most registrants enroll in a private professional liability plan and pay for their own insurance in order to meet this bylaw; others rely on liability insurance coverage provided for by their employer. While some employment liability insurance policies may meet the bylaw requirement, policies may be primarily designed to protect the employer rather than the employee and not likely to be of assistance in the context of a regulatory complaint or hearing.

Private insurance is relatively inexpensive and typically provides for legal representation in the context of College complaints and discipline hearings in addition to other legal action that may be taken against a registrant outside of regulatory complaints.

Registrants are solely responsible for ensuring that their liability insurance (private or employer) meets the requirements of College Bylaw 61.

The following individuals were added to the Register

(March 31, 2017 – September 30, 2017)

Dr. Kimberly Ann Armstrong <i>Registered Psychologist</i>	Dr. Sherri Frohlick <i>Registered Psychologist</i>	Dr. Stephen Rochefort <i>Registered Psychologist</i>
Dr. Heather Baitz <i>Registered Psychologist</i>	Dr. Aaron Robert Jacobson <i>Registered Psychologist</i>	Dr. Janani Sankar <i>Registered Psychologist</i>
Dr. Shannon Batten <i>Registered Psychologist</i>	Dr. Erin King-Brown <i>Registered Psychologist</i>	Dr. Sarah Sinclair <i>Registered Psychologist</i>
Dr. Elizabeth Jo Bernhard <i>Registered Psychologist</i>	Dr. Robert James McClelland <i>Registered Psychologist</i>	Ms. Julia Somody <i>Registered Psychologist</i>
Dr. Paul Brewster <i>Registered Psychologist</i>	Ms. Amy McKendrick <i>Registered Psychologist</i>	Mr. Gerthein Pieter Swanepoel <i>Registered Psychologist</i>
Dr. Jennifer Clark <i>Registered Psychologist</i>	Dr. Natalie Mikic <i>Registered Psychologist</i>	Dr. Sandra Nadine Thompson <i>Registered Psychologist</i>
Mr. Anurag (Alexander) Dhand <i>Registered Psychologist</i>	Mr. Dylan Duran Payne <i>Registered Psychologist</i>	Dr. Sarah Worobetz <i>Registered Psychologist</i>
Dr. Karen Flood <i>Registered Psychologist</i>	Dr. Carla Jane Petker <i>Registered Psychologist</i>	Dr. Keith Zukowski <i>Registered Psychologist</i>
	Dr. Allison Reeves <i>Registered Psychologist</i>	

The College's online directory is the most up to date resource for information regarding registration status, date of initial registration, highest degree as well as other information about our registrants. If you require official confirmation of your own or another registrant's status on the register, please contact the College in writing.

IN MEMORIAM

The College was recently made aware of the deaths of the following registrants:

Marlo Gal (#1662)
Former registrant

Bruce (Bhupinder) Nirmal (#327)
Registrant

John Charles Yuille (#753)
Former registrant

Practice Support Corner: REGISTRANTS' DUTY TO REPORT UNDER THE HEALTH PROFESSIONS ACT

It is timely to revisit this very important obligation. Health professionals are charged with a host of legal and ethical obligations to ensure that the public is protected from harm. Changes to the *Health Professions Act* (the "Act") brought into force in 2006 impose a legal obligation on registrants of the College of Psychologists of B.C. and other professional bodies governed by the Act, to report certain types of professional misconduct and concerns about competence. The purpose of this article is to review again the requirements of this duty to report to help ensure that registrants understand the parameters of this obligation and to equip registrants to discharge these obligations under the Act.

The duty to report under the Act supercedes other duties. This is a mandatory legal obligation that applies to all registrants. As recognized in the *Code of Conduct*, Standard 7.17 specifies that, "Nothing in this Code is intended to relieve a registrant of any obligation to make any report required by law." Standards 7.14, 7.15, and 7.16 previously addressed mandatory reporting but were deleted in 2014 to make explicit reference to the requirements in the Act.

Who has an obligation to report under the Act? The Duty to Report applies to:

- Every registrant of this College;
- Each registrant of other professional colleges governed by the Act;
- Employers, partners, and business associates of a health professional; and
- Health care officials and physicians who admit a health professional to a facility for the treatment of a psychiatric disorder or addiction.

The obligation to make a report is triggered by different circumstances for each of these groups. In this article, "health professional" and "registered health professional" means a registrant of any college governed by the Act.

What circumstances trigger a duty to report? Two Sections of the Act are relevant in considering this question. *Section 32.2 (1)* deals with the duty to report in cases relating to the competency of another registered health professional, where the registrant has reason to believe that the other health professional represents a danger to the public by reason of incompetence or physical, emotional, or mental impairment. *Section 32.4 (1)* deals with the duty to report in cases where the registrant has reason to believe that a health professional has engaged in sexual misconduct.

The duty to report under the Act deals with three scenarios:

1. Circumstances in which a registered health professional represents a danger to the public by reason of incompetence or physical, emotional, or mental infirmity (including alcohol and drug addiction) giving rise to a danger to the public;
2. Sexual misconduct by a registered health professional; and
3. Hospitalization of a registered health professional for psychiatric care or treatment for addiction to alcohol or drugs.

When is a registrant under a duty to report? The most common scenario in which a registrant will be subject to a duty to report is one in which he or she has reason to believe that another registrant of this College or other registered health professional either: (1) represents a danger to the public by reason of incompetence or physical, emotional, or mental impairment; or (2) has engaged in sexual misconduct. It is very important to note that in some scenarios consent to report is required, whereas in other scenarios it is not, as explained below.

(1) Incompetence or impairment - A duty to report may potentially arise whenever a registrant believes that another registrant of this College or other health professional is not competent to practice his or her designated health profession, or is suffering from a mental, emotional, or physical condition (including addiction to alcohol or drugs or an age-related impairment) that impairs his or her ability to practice. In order for the duty to report to apply, there must be "reasonable and probable" grounds for believing that the continued practice by such person of a designated health profession constitutes a danger to the public. The duty to report incompetence or impairment under *Section 32.2 (1)* is unqualified and unconditional. No consent is required to be obtained from any client(s) involved in the incident(s) leading to a report in such a circumstance. For example, even if a registrant has come to believe that another registered health professional is not competent to practice based on information learned in the context of a therapeutic relationship, and the client providing the relevant information is unwilling or unable to provide consent to the release of that information, the registrant is legally obligated to make a report.

(2) Sexual misconduct - Similarly, a registrant of the College must report a registered health professional if there are "reasonable and probable" grounds for believing that a health professional has engaged in sexual misconduct. In this case, however, if the basis for reporting sexual misconduct is a verbal or written report or complaint from a client or patient of the health professional, then before any report is made to a college, under Section 32.4 (1) the registrant must first obtain the consent of the patient to the making of the report or, if applicable, his or her parent, guardian, or committee. Generally speaking, the term "sexual misconduct" would encompass behaviour that is sexual in nature and directed toward co-workers, colleagues, students, patients, and/or members of the public. Sexual misconduct would obviously encompass criminal acts such as rape, sexual assault, or exploitation of minors. It may also include other

forms of sexual misconduct, such as sexual harassment, inappropriate touching, or making repeated or unwanted sexual demands or advances. It is important to remember that the duty to report is a mandatory legal obligation, and if there is any doubt as to whether a report should be made, the registrant should seek advice.

Note that registrants of this College are subject to specific prohibitions with regard to sexual and romantic relationships that go beyond current and former clients. *Code Standard 5.28* sets out additional prohibited relationships such as close relatives, guardians or significant others of clients or former clients and individuals over whom a registrant has supervisory or evaluative influence, such as students or supervisees. This College would view any breach of Standard 5.28 as constituting "sexual misconduct".

What are "reasonable and probable" grounds? The *Act* does not require a registrant to make a report unless there are "reasonable and probable grounds" for believing that a health professional is a danger to the public or has engaged in sexual misconduct. Determining whether reasonable and probable grounds exist requires the registrant to carefully consider the available evidence and its reliability, and then to evaluate whether the circumstances giving rise to the duty to report could reasonably exist. Reasonable and probable grounds will exist when: (1) a registrant actually believes there is a reliable basis for their suspicion; and (2) a reasonable person in our society placed in the registrant's position would also believe that the evidence supports such a belief. By way of example in considering reasonable and probable grounds, a report from an informant that a person is incompetent may not be sufficient to give rise to reasonable and probable grounds for a belief that they are a danger to the public. Observing a colleague engaged in practices that would generally be considered incompetent or unsafe, or receiving a report from a colleague who engaged in or observed such events, is more likely to satisfy this threshold. It is important to note that "reasonable and probable grounds" does not require definitive or conclusive proof of incompetence or misconduct. Only the existence of reliable and reasonable supporting evidence for a belief that a health professional is incompetent or has engaged in sexual misconduct is required to make a report. It is the mandate and the obligation of the appropriate college governing the reported health professional in question to investigate the validity, or lack thereof, of concerns regarding the conduct of that health professional.

What duties to report apply to employers, supervisors, partners, and business associates?

The *Act* imposes additional duties on employers, supervisors, partners, or business associates to make reports in any circumstances in which they have a belief that a registered health professional represents a danger to the public on the basis of incompetence or by reason of a physical, mental, or emotional impairment. Specifically, a duty to report by such persons arises when, for such reasons, employers, supervisors, partners, or business associates cause:

- a registered health professional to be terminated from employment;
- the revocation, suspension, or imposition of restrictions on the privileges of a registered health professional; or
- the dissolution of a partnership or association with a registered health professional.

A duty to report also arises if a registrant intended to take any of the above actions, but the other person resigned or surrendered their privileges before the decision was acted upon.

Registrants who have occasion to employ or supervise other registered health professionals or who are in a partnership or association with other health professionals should be aware of these obligations. If a registrant decides to change or terminate his or her business relationship with another health care professional by reason of incompetence then a duty to report does arise.

What duties to report apply to those who provide health services to registered health professionals? A duty to report is also imposed upon the chief administrative officer of a hospital or private hospital and the physician caring for a registered health professional who is admitted to a facility for psychiatric treatment or treatment for addiction to alcohol or drugs.

To whom is a report made? When a registrant has determined that they have reasonable and probable grounds for making a report as outlined above, they are required to make a report to the college governing the practice of the health care professional who is the subject of the report (e.g., College of Psychologists of BC if the professional is a psychologist, College of Physicians and Surgeons of BC, if the professional is a physician, etc.)

Conclusion It is important for all registrants to be cognizant of both their ethical and their legal obligations to report misconduct or competency issues of their colleagues within the profession of psychology and within other health professions regulated under the *Health Professions Act*.

The law also imposes additional duties on professionals to protect their patients or other persons from foreseeable harm by making a report to the proper authorities (e.g., the Ministry of Children and Family Development in cases of suspected child abuse or the Superintendent of Motor Vehicles in cases where a driver has an impairment and continues to drive despite being warned of the danger). While reporting colleagues and other professionals to authorities can be a difficult decision, registrants need to be aware of, and to comply with, these legal and ethical responsibilities.

Professional Executor Requirement A Reminder and an Update

Is your professional executor willing and able to continue to serve in this role?

The requirement to name a professional executor applies to all registrants who own (i.e. have primary control over) any practice records. Last year, at registration renewal, a handful of registrants were caught in a situation where their professional executor resigned from the College, apparently without providing notice to them, leaving them without an executor.

Confirm your executor's continued willingness to serve at least annually and prior to completion of your annual renewal form. If you serve as someone's professional executor and you are intending to resign from the College at next renewal, immediately inform the registrant who has named you. This will allow for them to identify another registrant in advance of the upcoming renewal.

Does your professional executor have adequate information about your practice and records in order to carry out their role?

Professional executors are expected to handle matters in the event of your death or incapacitation. While their primary function is for the purpose of proper management of records, in the case of a deceased or incapacitated registrant with an active clinical practice, an executor's role extends beyond mere record management. While it is unpleasant to contemplate, all registrants must consider the possibility of death or incapacitation and provide their executor with adequate information to manage their records and active practice should the situation arise. The College has developed a checklist to assist registrants in this task and the checklist is available on the College website.

COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA INFORMATION MEETINGS

Victoria Information Meeting,
November 14th, 2017 6:00pm – 8:00pm

Delta Hotels by Marriott
Victoria Ocean Pointe Resort

100 Harbour Road
Victoria, BC V9Z 0G1

Vancouver Information Meeting,
November 23rd, 2017 from 6:00pm – 8:00pm

Arbutus Club

2001 Nanton Avenue
Vancouver, BC V6J 4A1

- RSVP -

*Please RSVP by November 7th for Victoria or November 17th for Vancouver if you plan to attend
By Telephone: (604) 736-6164 or Toll-free in BC: (800) 665-0979
and press 307 when the auto-attendant picks up to leave a message. By Fax: (604) 736-6133*

If you are interested in having an information session in your area (Groups of 10 registrants or more), please contact the College

NOTICE OF ELECTION AND CALL FOR NOMINATIONS FOR COLLEGE BOARD

Nominations are invited for serving on the College Board. Please provide your name and registration number and insert your nominee's name and registration number with his/her signature consenting to stand for election on this form. Return deadline is **November 8, 2017**. The Bylaws and policies which govern election to the College are listed below and continue on the next page. Please review these carefully to ensure both the nominator and nominee meet the eligibility requirements.

Eligible registrants are encouraged to become involved in the College by serving on the Board. Registrants who have served on College Committees or have other significant relevant experience (oral examiners, supervisors) are especially encouraged to run for election to the Board. The Board meets typically for a half day meeting (held on Fridays) every other month. As College Committees are chaired by Board members, potential candidates should expect an on-site time commitment of 1½ days per month on average. Most Committees meet on a monthly basis. Additional time is required to read materials for Board and Committee meetings.

In addition to the formal requirements, the College promotes excellence in governance and encourages the nominations of registrants to the Board who have demonstrated commitment to the College through public service including past service on Committees or as a regulatory supervisor or oral examiner. The knowledge and experience of registrants who have worked with the College enhances the effectiveness of the Board. The College also recognizes that a diversity of professional skills, experience, and approaches is key to successful Board performance, and encourages nominations of registrants who reflect the cultural and geographical makeup and diversity of the psychology profession.

Board Election Dates - This Official Notice of Election is included with the Fall 2017 issue of the Chronicle for all eligible registrants. This Official Notice includes information about the nomination procedure, election procedure, and nomination papers. All Nomination Papers must be received at the College by 4:30 p.m. on **November 8, 2017**. Nominated candidates that are deemed eligible will be contacted to provide a brief biography respecting their activities on behalf of the profession. Eligible Registrants will receive on or before **November 19, 2017** the Election materials consisting of ballot, biographies, and notice of the time and date by which ballots must be received in the College office.

Oath of Office - *The Health Professions Act* places an obligation on all Board members to swear an Oath of Office. The text of the oath is found here: http://www.bclaws.ca/civix/document/id/lc/statreg/275_2008#Schedule1

New Candidate Nomination Forms – The Board of the College approved a new nomination policy that requests candidates for nomination complete a *Candidate Questionnaire* and a *Conflict of Interest Disclosure Statement*. The information obtained on the *Candidate Questionnaire* may be made available for inspection by registered psychologist registrants, for the purpose of assisting them in assessing the candidacy against the skills and experience that is expected of board members so that they may cast informed votes in the election. These two forms are available for download on the registrant portal under “review documents” and should be submitted along with the nomination form below.

Eligibility: Only a registered psychologist registrant in good standing is eligible to vote or be elected in an election under section 17(3)(a) of the *Act*. As defined in the bylaws, “**in good standing**” means, in respect of a registrant, that the registration of the registrant is not suspended under the *Act*, and there are no limits or conditions are imposed on the registrant’s practice of psychology under section 20(2.1) or (3), 32.2, 32.3, 33, 35, 36, 37.1, 38, 39 or 39.1 of the *Act*.

NOMINATION FORM

A registered psychologist registrant may nominate up to 2 registered psychologist registrants.

My signature below confirms that I have read all of the information on the 'Notice of Election and Call for Nominations' for College Board Form

Name of Nominator _____ Registration No. _____

Signature of Nominator _____

Name of Nominee	Registration Number	Nominee's Signature

COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA – EXCERPT OF ELECTION BYLAWS

3. Election procedure

- (1) The registrar must supervise and administer all board elections and, subject to these bylaws and any board policies not inconsistent with these bylaws, may establish procedures for that purpose.
- (1.1) Only a registered psychologist registrant in good standing is eligible to vote or be elected in an election under section 17(3)(a) of the Act.
- (2) The registrar must notify every registered psychologist registrant of a board election by giving written notice at least 60 days before the term of office of a board member expires.
- (3) The notice under subsection (2) must contain information about the nomination procedure and the election procedure, including nomination papers.
- (4) A registered psychologist registrant in good standing may nominate not more than two registered psychologist registrants for each vacant position on the board.
- (5) A registrant making a nomination must deliver the following to the registrar at the offices of the College not later than 45 days before the term of office of a board member expires: (a) the nomination papers; (b) the written consent of the person nominated.
- (6) If the registrar is satisfied that a person nominated under subsection (5) (a) is eligible for election, (b) has been nominated within the time and as required under these bylaws, and (c) has given the required consent, the registrar must declare that person a candidate for election.
- (7) A person declared to be a candidate for election under subsection (6) may deliver the following to the registrar within five days after the date the candidate's nomination papers were filed: (a) a brief biography of the candidate; (b) a brief statement concerning the candidate's contributions to the profession.
- (7.1) Information delivered by a candidate under subsection (7) must not be inconsistent with the oath of office prescribed for the purpose of section 17.11 of the Act.
- (8) Not later than 28 days before the term of office of a board member expires, the registrar must send to each registered psychologist registrant (a) one election ballot, (b) any information provided by a candidate as permitted in, and within the time required by, subsections (7) and (7.1), and (c) notice of the time and date by which election ballots must be delivered to the offices of the College for counting.
- (9) No person may distribute information respecting a candidate for election other than as contemplated in subsection (8).
- (10) Each registered psychologist registrant in good standing may cast one vote for each board position to be elected.
- (11) The registrar must be satisfied that each ballot is submitted by an eligible voter and that the anonymity of each voter is assured in the counting of ballots.
- (12) The candidate for election receiving the most votes on the return of the ballots is elected.
- (13) In the case of a tie vote, the registrar must select the successful candidate by random draw.
- (14) The registrar must resolve any dispute or irregularity with respect to any nomination, ballot or election.
- (15) Where the number of persons nominated is less than or equal to the number of board positions at the close of nominations, all the nominees are elected to office by acclamation.
- (16) The registrar must publish the results of the election on the College website within a reasonable period of time after the election.

4. Terms of office

- (1) The term of office for an elected board member is three years.
- (2) An elected board member may serve a maximum of two consecutive terms.
- (3) An elected board member may resign at any time by delivering a notice in writing to the registrar and the resignation is effective upon receipt by the registrar.

REGISTRATION RENEWAL 2018

A. General Requirements (see Bylaw 51)

1. Due Date: The following is due at the College office on or before December 31*:

(a) online renewal form including signed attestation and all the information requested therein (including any updates to this information).

(b) renewal fee paid via cash, cheque, online payment, or money order.

**The deadline of December 31st falls on a Sunday this year. If you plan to pay using a cheque or money order, please ensure that it reaches the College office no later than the 29th as the College office and building will be closed on the 30th and 31st. Electronic bank transfers and online forms can be completed up to and including the deadline of the 31st. We encourage all registrants to complete the payment process electronically.*

2. Reinstatement: The registrar must cancel the registration of a registrant who has failed to pay a renewal fee or another fee within the required time: see Health Professions Act s. 21 (3). Registrants should also refer to Bylaw 52(1)(c) which requires payment of any "outstanding fees, levies or debts owed to the College."

3. Possible Disciplinary Action: Individuals who have been removed from the Register but continue to practice will be considered in violation of the *Psychologists Regulation* and the *Code of Conduct*.

4. Annual Certificate: Please see Bylaw 55(4). Registrants will receive an annual registration certificate by mail at the completion of renewal. Additional copies of certificates can be requested on the renewal form, for a fee. Bylaw 55(4) requires that current certificates be prominently displayed.

B. Fees

1. No Late Payments: The College can accept cheques post-dated no later than December 31 of this year. Please see HPA s. 21(3)(b). Online payments must be made no later than December 31st. Registrants may be required to provide evidence that a request for a funds transfer was made on or before that date.

2. Amount Due: As noted above, Bylaw 51(2) paragraphs (b) and (c) require every registrant to deliver the amount of applicable fees for renewal as well as any outstanding fees, levies, or debts owed to the College in order to maintain registration. The College does not accept or provide for payment plans.

Reminder to all registrants in the non-practicing registration class (Out of Province, Non-Practising and Retired) or those wishing to move into the class: The renewal fee for inactive registration has changed. All registrants in this class must pay \$300. This represents a reduction for most but an increase in fee for those with the 'retired' designation.

3. Returned Cheques: 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. Registrants who fail to pay all fees owing by the deadline will have their registration cancelled as per HPA s.21(3)(b).

4. Paying Online: Registrants are invited to submit their renewal fees by using the online bill pay option of any of the following: Royal Bank of Canada, Scotiabank, Bank of Montreal, Toronto Dominion Bank/Canada Trust, HSBC, CIBC, or credit unions. Your invoice number is your four-digit registration number. Follow the instructions of your online banking program, select the College of Psychologists of BC as your payee, and print off the receipt of your payment for your records.

C. Professional Executor

As per Bylaw 51(2)(d) Registrants are required to provide a declaration of confirmation of the appointment of a professional executor and any updated information with regard to their professional executor at renewal.

D. Moving Into the Non-Practising Class of Registration at Renewal or Reinstating to Active Practice as of January 1st.

1. Out of Province: Registrants placing themselves in the Non- Practising (Out of Province) class must submit documentation of their registration/ licensure to practice psychology by a regulatory body in the other jurisdiction.

2. Reinstating to Active Practice from Non-Practising:

Registrants who were non-practising due to medical reasons and wish to move into an active practice class must submit documentation attesting to their readiness to resume the practice of psychology.

All registrants will be required to submit verification of licensure / registration for any jurisdiction in which they are currently or previously registered. This includes non-practising registrants who were temporarily on parental or medical leave.

All registrants will be required to attest that they've been in compliance with all continuing competency program requirements for any calendar year ending between the date of their previous active registration and the date on which they are seeking

REGISTRATION RENEWAL 2018

continued from previous page

to resume active practice. Out of Province registrants may meet the requirements by completing equivalent activities in their home jurisdiction. Depending on the length of time away from practice, additional information may be required regarding continuing competency activity.

In circumstances where a non-practicing registrant has not fully met the continuing competency program requirements prior to reinstatement, the Registration Committee can consider reinstating the registrant to active practice as a Temporary (Supervised) registrant provided the registrant undertakes to complete any outstanding requirements and agrees to practice under supervision and in accordance with an approved plan.

Non-practising registrants should carefully plan their return to active practice by ensuring that they've fulfilled their continuing competency activities for the year(s) of inactive practice prior to the date on which they wish to return.

E. Changes/Additions to Information on the Renewal Form

1. Change of Register Address: Registrants should refer to HPA ss. 21(2) and 54(1), and Bylaw 55.3. An address for physical premises is required (i.e., post office boxes are not acceptable, except for rural addresses, in which case a registrant should provide both a land address and a post office box).

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 legal name over the past year under the Name Act must provide the College with their full legal names for inclusion on the Register. The College may request supporting documentation. Registrants who have adopted new professional, business, or trade names, as a result of marriage or otherwise, must also provide these names to the College, exactly as spelled or punctuated in actual use.

4. Change of Credentials: Registered Psychologist registrants who are currently registered at the master's level and wish their registration status to reflect a recently acquired doctoral degree must make a written request to have the degree reviewed by the Registration Committee. The request must include an original transcript sent directly to the College by the degree-granting institution. The doctorate degree will be reviewed according to current registration criteria in "Schedule H."