**NEWS AND INFORMATION FROM THE COLLEGE OF PSYCHOLOGISTS** 

Spring 2017

### Letter from the Chair of the Board

Dear Colleagues,

As I begin my term as Chair of the Board, I reflect on some of the many changes that have evolved in our profession since I was registered in 1998. As a rookie registrant I was just figuring out how things worked when in January 2000, we (along with other health professions), came under the *Health Professions Act (HPA)*. I first met Dr. Kowaz at the AGM when she had taken the helm and had the (unenviable, I thought) task of trying to explain the reasons for the upheaval, the significant and imposed changes in self-regulation, and charting a new course for our College.

It did not require my carefully honed skills in empathy to ascertain that this was a time of confusion and frustration for registrants. I didn't realize then the differences between the new level of required regulatory oversight as set out by the provincial government as it compared with the College's previous, more autonomous, functioning under the Psychologists Act, including its initial formation under the name "BC Psychological Association".

- The *HPA*'s foundational assumption was that psychology was just one of many other health professions that would be regulated under a common framework and rules,
- The *HPA* model entrenched a formal separation of regulatory functions (College) and professional advocacy (professional associations such as BCPA), and
- The *HPA* set out a prescribed structure for required standing committees and specified processes for registration, complaint investigations and discipline, and quality assurance activities.

During that early period the College focus was on the development of the basic policies, processes and procedures that would meet the requirements of the *HPA*. The Registrar and staff focused on the three major spheres of College operations: applications & registration; complaint investigations & discipline; and quality assurance. College finances and new fiduciary and legal responsibilities of Board members had to be addressed. Ensuring the appropriate functioning of a governance board and a careful differentiation of board and staff responsibilities was a requirement within the *HPA* model.

My years on the Inquiry Committee opened my eyes to the challenges of being a self-regulating profession. The task of the Inquiry Committee (IC) is a mandatory review of the competence and conduct of the registrant on receipt of written complaints with regard to the *Code of Conduct* standards. A decision of what is appropriate in each circumstance is based on the actions available to the IC under the *HPA*.

College staff and the Inquiry Committee handle a large volume of complaints and are continually refining their skills and relying on the substantial contributions of the College's fine legal counsel to address the requirements of public protection while ensuring fairness to registrants.

Over my tenure on the IC, when complaints identified concerns regarding adherence to legal and ethical obligations, registrants consistently have found that cooperation and a focus on understanding the public protection issues led to resolution. It has been gratifying

to be involved with registrants who, when warranted, have not only engaged in remedial strategies (such as courses or supervision) but have also given feedback that the experience, while at times stressful for any responsible professional, was also a positive contribution to their professional practice and served to increase understanding and constructive engagement with the College.

In 2009, the Health Professions Review Board (HPRB) was established by the provincial government. This board, made up of lawyers and others with community experience (but no one who is currently a member of a regulated healthcare profession), has the authority to review decisions of the Registration and Inquiry Committees of all Colleges under *HPA*.

The HPRB was initially introduced as a means of addressing the perception that health professions had erected barriers to registration which did not align with new labour mobility laws, including BC's own Labour Mobility Act.

In my time with the Registration Committee (RC) I learned that balancing federal and provincial legislation aimed at providing labour mobility with College *bylaws* and its protection of the public mandate is complex and time-consuming primarily because of the challenges faced by our relatively young profession in firmly establishing clear and universal minimum standards nationally and internationally. College staff and the ...continued next page

#### **COLLEGE BOARD**

Kenneth Cole, *Ph.D., R.Psych*.
Catherine Costigan, *Ph.D., R.Psych*.
Lindsay 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*.

Letter from the Chair

CPBC Ongoing Commitment to Safer Health
System for Indigenous People

Continuing Competency Audit for 2016

....

Public Notification

Online Registrant Workshop Update

**Practice Support Corner: Supervision Services** 

Practice Support:

Provision of Supervision Services Checklist

Website Update AGM Announcement

## Letter from the Chair of the Board continued from page 1

Registration Committee review and assess applications from individuals who are registered as psychologists in jurisdictions that do not require doctorates or, in some cases, degrees in psychology. CPBC has worked hard to address this issue at the national level, and currently all provinces, except Alberta, are either at the doctoral standard or in consultation with their governments and moving actively towards this national standard.

While labour mobility may have been the initial aim of the HPRB, in reality, the vast majority of matters before it have to do with complaints. The jurisdiction of the HPRB is to review the adequacy of the investigation and the reasonableness of the decision.

The different professions regulated under the *HPA* face a diverse array of regulatory challenges including the complexity and number of complaints, number of discipline proceedings, number of registrants, proportion of complaints taken to the HPRB, etc. These differences exist alongside the push for increased collaboration and consistency of policy and practice across the colleges.

We are a comparatively small college whose registrants are engaged primarily with a segment of the general public who are vulnerable, facing serious health challenges, in proceedings under the *Family Law Act*, enduring workplace injuries, etc. The proportion of CPBC complaints taken before the review board is relatively high compared to other colleges whose complainant base represents a broader sampling of the general population. Of course this means greater demand on staff time and resources.

In the context of the *HPA* as a "one size fits all" structure, the developing case law and recommended best practices issued by the HPRB means that some practices appear to work better for some Colleges than for others. For example, the HPRB recommendation that complainants have the opportunity to respond to all correspondence from the registrant about whom they've complained has been highly effective in a subset of complaints. However, it has led in other instances to a more prolonged and nonproductive exchange on matters of key importance to the complainant that are not within the College's jurisdiction.

Parallel to recommendations with regard to best practice with complainants has been attention to what colleges publish with regard to inquiry and discipline decisions. The BC Health Regulators (www. bchealthregulators.ca) adopted a public notification policy of best practice which is helping to standardize the information published by the colleges with regard to inquiry and discipline decisions. Some readers will recognize BCHR for the work it has done over the past two years to inform the public, via television advertisements and print materials, about the value of obtaining health services from a regulated professional. CPBC continues to have a leadership role within BCHR.

In summary, the College has witnessed major changes in the regulatory requirements and regulatory environment over 17 years under the *HPA*. The public has increasing expectations of both health practitioners and health regulators. My involvement with the College in a variety of capacities over the years, in addition to being a welcome addition to my work in solo private practice, has been highly challenging, always stimulating and incredibly rewarding. I have been honoured to work with colleagues of such high calibre and integrity. The dedication and hard work of the College staff is second to none.

On the Board and on each committee there are public members who devote significant time and energy, who offer their insight and a wide

range of skills and expertise for the benefit of our College, to ensure our protection of the public mandate. We owe each one of them a debt of gratitude. I have profound respect for their contributions. All of this said, the work at CPBC has a level of collegiality and congeniality that is perhaps unique.

I am proud of our profession with its diversity, its values, and its contributions to society. Registrant engagement in the College is very high, with about 10% of our registrants directly involved in College matters through committee involvement, regulatory supervision, oral examinations, etc. Please come to the AGM and information meetings (in person or via webcast). Read the Chronicle. Constant review ensures clarity of information available to the public about what the College can and cannot do in an ongoing attempt to align expectations with available outcomes. If you or your group have questions, please contact the College. Provide comments or feedback to posted documents or other matters via feedback@collegeofpsychologists.bc.ca. Practice questions should be directed to our practice support service which continues to be a service provided to all registrants free of charge. I look forward to contributing to our College and to our profession to the best of my abilities as we navigate through ever changing and always challenging waters.

Of special note in this issue is the upcoming AGM on May 25th. The Continuing Competency presentation is by our colleague and registrant, Dr. Christine Korol. She will speak on the challenges of incorporating technology into clinical practice. See you there!

Respectfully yours,

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

## Annual General Meeting Continuing Competency Presentation

May 25, 2017 6:00pm – 8:30pm A light dinner will be available at 5:30pm.

AGM Continuing Competency Presentation Topic:
Practical and Ethical Challenges of Technology and
Social Media in Clinical Practice

#### Vancouver Location:

Simon Fraser University, Wosk Centre for Dialogue 580 West Hastings Street, Vancouver, BC, V6B 1L6

more details on last page

## CPBC Ongoing Commitment to Safer Health System for Indigenous People

On March 1st Dr. Andrea Kowaz, on behalf of the College of Psychologists of British Columbia, joined with registrars of the other 23 BC health professions regulatory bodies in signing the Declaration of Commitment to the Cultural Safety and Humility in the Regulation of Health Professionals Serving First Nations and Aboriginal People in British Columbia. The Declaration reflects the high priority placed on advancing cultural safety and humility for Indigenous people among regulated health professionals by committing to actions and processes which will ultimately embed culturally safe practices within all levels of health professional regulation. All 23 regulatory bodies have committed to report on their progress via annual reports outlining strategic activities which demonstrate how they are meeting their commitment to cultural safety.

#### **CPBC Supports Cultural Safety Training**

Increasing the level of cultural safety in the health care system through approaches such as cultural safety, cultural humility, health literacy and relationship-based care will assist in improving the quality of health services for First Nations and Aboriginal people. The CPBC will continue to support registrants in participating in cultural safety training, and many registrants have been active in responding to this challenge in a variety of meaningful ways in their professional practice. Registrants who have not yet explored the San'yas Indigenous Cultural Safety (ICS) training program are encouraged to investigate the program at http://www.sanyas.ca/.

The ICS program is a unique, British Columbia made, facilitated on-line training program

#### Continuing Competency Audit for 2016

The Quality Assurance Committee wishes to thank the randomly chosen registrants of the 2016 audit for their prompt and professional response to having been selected. Generally speaking, the Committee found the logs to be easy to read and the activities clearly and comprehensively documented. The Committee strongly encourages registrants to document their activities as they happen so that there is a sufficient level of detail and accuracy in reporting. This is especially important for case conferences or other recurring meetings that registrants wish to claim for Category C. Please remember that dates as well as general topic of discussions is required reporting for this category. The Committee was pleased to note that more registrants are availing themselves of online coursework sponsored by CPA/APA. Please note that in order to claim online courses for Category A, they must either be sponsored by CPA/APA or by another accrediting body in the area of specialization. Non-accredited coursework may be claimed in the category of self-study (B).



covering topics of diversity, aspects of colonial history such as Indian residential schools and Indian Hospitals, and contexts for understanding social disparities and inequities.

#### **CPBC Task Force**

The CPBC Indigenous Cultural Competency Task Force was established by the Board in September of 2016, with the mandate to maximize College Board, Committee and Staff training and knowledge of indigenous cultural competency issues, identify aspects of College functioning and structure where particular attention should be paid to ensuring inclusiveness and specialized training, and assessing the current level of

registrant participation in indigenous cultural competency training to inform how to best maximize registrants' indigenous cultural competencies. The Task Force will also be reviewing the Code of Conduct to ensure appropriate coverage of indigenous cultural competency standards and to enhance registrants' awareness of indigenous cultural competency issues. Chaired by former Board Chair Henry Harder, the Task Force includes registrants Yaya De Andrade, Jeffrey Ansloos, Alanaise Goodwill, Brenda Knight, Sarina Kot, Jo-Ann Majcher, Marlene Moretti, Donna Paproski, Maureen Olley, and Kamaljit Sidhu. The College wishes to thank the registrants who've put their name forward to serve on this important Task Force.

## ANNUAL GENERAL MEETING CONTINUING COMPETENCY

The Board is delighted to have Dr. Christine Korol deliver the AGM Continuing Competency Presentation on use of technology in clinical practice. Technological advances can assist registrants in their clinical practice but must be used in an ethical and safe manner. Key ethical and practical considerations when incorporating technology into one's psychology practice will be reviewed.

#### **ABOUT THE PRESENTER**

Christine Korol, Ph.D., R.Psych.

Dr. Korol is a psychologist and program lead for Kelty's Key — Online Therapy Service at Vancouver Coastal Health (www.keltyskey.com/)— an innovative program that allows people to access therapy services from their own home. In addition to creating content for the online courses, Dr. Korol trains and supervises new online therapists at VCH, evaluates the program and develops policies and procedures for the use of technology with VCH patients using online therapy services.

SPRING 2017

## Public Notice(s)

Notice: March 21, 2017

Date of Action: March 17, 2017

Former Registrant: Holly Prochnau, also known as Holly Fourchalk

Be advised that Holly Fourchalk, also known as Holly Prochnau or "Dr. Holly", who operates a "mobile health clinic" providing services throughout the Lower Mainland of British Columbia under the business name "Choices Unlimited for Health & Wellness" and sells various products and books online, is not registered as a psychologist in British Columbia, and has no other association with the College of Psychologists of RC

The College cancelled Ms. Fourchalk's registration as a psychologist, at her request, effective January 1, 2012, while investigations of two complaints against her were under way. The complaints were subsequently resolved by an Undertaking Agreement that Ms. Fourchalk signed on February 13, 2014. The terms of the Agreement are summarized on the College's website at http://collegeofpsychologists.bc.ca/public/public-notifications/.

As a result of the cancellation of her registration and the undertakings provided by Ms. Fourchalk in her Agreement, Ms. Fourchalk is prohibited under the *Health Professions Act* from working or practising in British Columbia as a "registered psychologist" or a "psychologist", and must not use either title to describe her work, or in association with any description of her work, in British Columbia. She is also prohibited from using any name, title, description or abbreviation of a name or title in any manner that expresses or implied that she continues to be registered as a psychologist in British Columbia, or that she otherwise continues to be associated in any way with the College of Psychologists of BC.

Despite the undertakings in Ms. Fourchalk's Agreement, the College has become aware that Ms. Fourchalk continues to be engaged in advertising or promotional activity that refers to her former status as a psychologist in British Columbia. The public is cautioned that this information is not current, and should not be relied on in any way.

Any questions or concerns should be directed to the College of Psychologists of BC at 604-736-6164.

## The following individuals were added to the Register

Dr. Michael R. Anthony,	Ms. Cynthia Norine Friesen-Ford Ashurst,	Dr. Christian Maile,
Registered Psychologist	Registered Psychologist	Registered Psychologist

Dr. Heather Victoria Baker,	Ms. Janice Helle,	Dr. Jordan Maile,
Reaistered Psycholoaist	Reaistered Psychologist	Reaistered Psycholoaist

Mr. Kyle Cheveldayoff,	Ms. Megan Hughes,	Ms. Irene Spelliscy,
Registered Psychologist	Psychology Assistant	Registered Psychologist

Dr. Mario Leonard Dollschnieder,	Dr. Megan Irene Hughes-Jones,	Dr. Alena Talbot Ellis,
Registered Psychologist	Registered Psychologist	Registered Psychologist

Ms. Naeodi Downey,	Dr. Katie Rose Kryski,	Dr. Claire Winson-Jones,
Registered Psychologist	Registered Psychologist	Registered Psychologist

#### **IN MEMORIAM**

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

Clair Hawes (# 109) Former Registrant Anneliese Robens (#218) Registrant

## **Practice Support Corner: Supervision Services**

Registrants may sometimes offer or be contacted regarding supervision of students, applicants, other registrants, or other non-registrants seeking to attain proficiency in a skill or practice area that is new to them. There are a number of important considerations for registrants in determining whether to offer supervision services. The Practice Support Provision of Supervision Services Checklist (see end of Chronicle) was developed to assist registrants in considering their obligations when contemplating offering supervision services. A partial list of issues includes: one's competence to provide supervision; appropriateness of the candidate who is seeking supervision to be offered supervision for the activities in question; ensuring the level of supervision offered is sufficient to ensure the services are meeting *Code of Conduct* standards; consent issues related to the supervisee as well as to the client and third party payer; and evaluation of the supervisee. Supervision is a professional activity and registrants who offer this service are expected to maintain compliance with all relevant Code standards, just as with any other professional activity. The following sample vignettes are offered for illustrative purposes, and should be considered in conjunction with the Practice Support Provision of Supervision Services Checklist and the *Code of Conduct*.

#### Supervision Vignette No. 1

Dr. Wright was contacted by a graduate student seeking supervision for psychological assessment services. Dr. Wright had already taken an on-line course on supervision and had been familiarizing herself with relevant literature on supervision for the past few months as supervision was a developing interest of hers. She was also part of a peer consultation group that included two psychologist members who provided supervision services. She spoke with each of them about their willingness to offer consultation to her as she started offering her own supervision services, as she knew that supervision would entail new skills and learning for her, and was mindful of *Code of Conduct* requirements that registrants attaining new competencies must not only ensure they seek appropriate education and training but must also ensure they are seeking consultation sufficient to ensure the quality of their service provision.

Dr. Wright decided to review the Practice Support Checklist to see what issues she would need to consider before deciding what to do. She came up with the following list of questions she would need to discuss with the student:

- Is he enrolled in a professional training program and if so, what is the profession? If his training program isn't intended to prepare him for professional practice as a psychologist, she knew she was less likely to take him on as a supervisee.
- What coursework and supervised training had he completed to date? Did the student have an appropriate background for the type and content of supervision he was seeking? Dr. Wright decided she would need to review his transcript, and have a follow up discussion regarding the content of specific courses he had taken and other supervised training he had obtained.
- What was the student's purpose in seeking supervision? Did he intend to seek registration with the College? Did he intend to include his supervised experience with her towards his registration requirements? If so, Dr. Wright determined she would need to speak with the student about his own responsibilities for obtaining information from the College regarding requirements for registration, and they would need to review this information together to determine whether her services would meet his needs.
- What were the student's financial expectations? Was he expecting to pay her for supervision services? Was he expecting to be paid for conducting assessments that might reduce Dr. Wright's own workload? Dr. Wright decided that this issue would require careful discussion if they came to an agreement about proceeding, and financial arrangements would need to be included in any formal written agreement.
- Was the student going to require her to communicate with his training institution? If so, were there formal reporting requirements? Dr. Wright decided that she would need to have a very clear discussion with the student about whether she would be required to provide an evaluation of his performance, what that evaluation would be based upon, what form her evaluation would take, how she would be providing feedback to him, and who would be entitled to receive evaluation information.

After thinking about all of these issues she needed to discuss with the student, Dr. Wright decided that she would create a detailed informed consent process for offering supervision services if she and the student decided to proceed, and for anyone else to whom she might offer supervision in the future.

Dr. Wright also made a note of other issues she needed to consider, including:

- The informed consent process for any clients who would receive services from her supervisee would need clearly to indicate she was supervising and responsible for the services.
- Any third party payers would need clearly to be advised who had provided the service and that she was supervising and responsible for them.
- Determine whether there were any supervisee requirements related to offering training on specific testing instruments, given the purchasing agreements she had entered into when she obtained the tests.
- How would she determine how much and what type of supervision the student needed to ensure that his services were meeting *Code of Conduct* requirements? Dr. Wright decided that this would be a good issue to consult with her colleagues regarding once she had more information about the student's background and existing training and experience.

Dr. Wright reviewed the Practice Support Provision of Supervision Services Checklist before preparing a list of discussion items for her review with the student. She also decided that she would consult with her experienced colleagues prior to meeting with the student to ensure that she hadn't overlooked any relevant considerations, and to consult with them again after she met with the student and before she made a final decision about whether to take the student on as a supervisee.

.....(continued on next page)

## Practice Support Corner: Supervision Services (continued)

#### Supervision Vignette No. 2

Dr. Liu has worked for many years within a hospital setting providing direct psychological services to hospitalized patients and as part of a team offering supervision services to psychology students rotating through their department. One day he received a request from another health professional within the hospital who was seeking to acquire skills in psychological treatment services. Dr. Liu was surprised by the request, as the woman who had called had no previous formal education, training, or experience with psychological interviewing or treatment, outside of a keen interest in the activity and some weekend workshops. He decided he needed to meet with the individual to determine precisely what she was seeking, and why. After thoroughly discussing the request with her, Dr. Liu decided that although the woman was skilled in her own professional area and had attended some local workshops she lacked core foundational knowledge in psychology and education in ethics in psychological practice to permit him to ethically train and supervise her in psychological intervention. Dr. Liu determined that it would be appropriate to offer to assist her in enhancing her knowledge of psychological treatment options for particular psychological diagnoses and various other presenting problems. This would allow her to make more informed decisions with regard to appropriate referrals for the patients she cared for. He reviewed his rationale for his decision with the health professional, and why he believed what he was offering to provide might be beneficial to her. She was disappointed, but accepted his rationale and explanation and, after considering his suggestion, decided to proceed with recommended readings, followed by a discussion session and consultation with Dr. Liu specifically focusing on how she could make appropriate treatment referrals for her patients who present with psychological issues.

## **PRACTICE SUPPORT Checklist #10: Provision of Supervision Services**

The information provided 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.

The Practice Support Page containing Checklist #10 as well as all the other Practice Support Checklists can be found on the College Website

http://collegeofpsychologists.bc.ca/registrants/practice-support/

# CONTINUING COMPETENCY WORKSHOP TO BE AVAILABLE ONLINE THROUGH REGISTRANT'S PORTAL

Beginning in May, registrants who were unable to attend one of the series of in-person Continuing Competency Workshops offered in 2015 will be able to participate online. The workshop Lessons from the Past and Prepping for the New Reality garnered consistently high reviews from the over 250 registrants who participated. It was overwhelmingly found to be an excellent 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 successful completion of the post-workshop quiz, will meet regular continuing competency requirements for 2017.

# COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA ANNUAL GENERAL MEETING

Thursday, May 25, 2017 6:00pm – 8:30pm

A light dinner will be available at 5:30pm.

Annual General Meeting and Continuing Competency Presentation

# Practical and Ethical Challenges of Technology and Social Media in Clinical Practice

The College is pleased to announce that Dr. Christine Korol, R.Psych., will be presenting on the topic of practical and ethical challenges of technology and social media in clinical practice.

#### Vancouver Location:

Simon Fraser University, Wosk Centre for Dialogue, 580 West Hastings Street, Vancouver, BC, V6B 1L6

The presentation to accompany the AGM will be eligible for Continuing Competency credits.

Registrants in other areas will be able to view the AGM via webcast and submit questions via email.

Board and Committee reports will be presented, as per the *Bylaws*.

### - RSVP -

Please RSVP your attendance by May 18, 2017:

Phone (604) 736-6164 or (800) 665-0979 (push 307 as soon as the auto-attendant picks up); fax (604) 736-6133; or email agmrsvp@collegeofpsychologists.bc.ca.

Please also contact the office if you are interested in participating via webcast as you will need to be sent further details.

Following the AGM, groups of 10+ registrants who participated via webcast are eligible to submit their signed attendance sign-in sheet(s) to receive a \$100 reimbursement stipend.



## College of Psychologists of British Columbia

404 - 1755 West Broadway Vancouver, B.C. V6J 4S5

Telephone: (604) 736-6164 (800) 665-0979 (BC Only) Fax:(604) 736-6133 www.collegeofpsychologists.bc.ca.