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

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

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

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

## Family Law Parenting Assessments Checklist

This document is intended to be read in conjunction with the general Practice Support Psychological Assessments Checklist. Registrants practicing in the family law area are expected to have obtained the requisite education, training, and experience to provide this specific type of service.

Psychologists are able to bring unique skills to family law parenting assessments with their expertise in utilizing an empirically informed and scientific hypothesis testing model. These assessments require that registrants who conduct them are competent across a broad range of areas. Given that these assessments are often a key factor in litigation, registrants who conduct such assessments need to be prepared to have their work examined in the court setting.

This checklist is intended to be of assistance to registrants who are considering conducting assessments pursuant to Section 211 of the Family Law Act (FLA). Professionals working in this area should be guided by requirements set out in the Supreme Court Family Law Rules, the Provincial Court (Family) Rules, the practice standards of the Association of Family and Conciliation Courts' (AFCC) Model Standards of Practice for Child Custody Evaluation (2006) and the AFCC Guidelines for Examining Intimate Partner Violence (2016) supplement, and the American Psychological Association's Speciality Guidelines for Forensic Psychologists. Relevant Code of Conduct standards and other resources are indicated in brackets following the checklist items.

## A. PRIOR TO CONDUCTING THE ASSESSMENT

I have the requisite education, training, and experience to conduct assessments of adults, children, and relationship dynamics in family law proceedings, including but not limited to education, training, and experience in the following areas:				
	Forensic and clinical interviewing and assessment; (3.3, 3.5, 3.15, 3.25, 11.1)			
	Psychometric testing and use of relevant normative data; (3.3, 3.5, 3.10, 3.11, 3.23, 3.25, 11.1, 11.2)			
	Issues related to parenting approach, skills, and parenting capacity; (3.3, 3.5, 3.15, 3.25)			
	Family systems and parent-child relationships (including healthy and unhealthy systems and relationships, and blended and extended families); (3.3, 3.5, 3.15, 3.24, 3.25)			
	Child and adolescent development, and developmental disorders and their diagnosis; (3.3, 3.5, 3.15, 3.23, 3.24, 3.25)			
	Comprehensive information gathering, including use of collateral sources; (3.3, 3.5, 3.25, 11.1, 11.3, 11.6, 11.32)			
	Appropriate management of confidentiality when dealing with multiple parties and collaterals; (4.6, 11.7)			
	Assessment and diagnosis of mental disorders and addictions; (3.3, 3.5, 3.15, 3.25)			
	Adverse childhood events and the impact of family violence on children; (3.3, 3.5, 3.15, 3.25)			

	Mental disorders, addictions, trauma and cognitive, learning, and/or physical challenges and their effects on parental capacity; (3.3, 3.5, 3.15, 3.24, 3.25)		
	Integration of background information/history, interviews, testing, observations, and collateral information consistent with: (3.2, 3.3, 3.5, 3.7, 3.8, 3.15, 11.1)  i. CPBC Code of Conduct requirements; ii. accepted forensic standards, guidelines, and empirical scientific principles; iii. any other relevant standards and guidelines that have emerged and become accepted in this field at the time of the contemplated assessment service.		
	Understanding the limits of reliability and validity of different data sources, and the selection and utilization of normative data appropriate to context and cultural factors; (3.5, 3.10, 3.13, 3.18, 3.23, 3.24, 11.2, 11.9, 11.11, 11.15)		
	Implications and significance of cultural, linguistic, and/or religious backgrounds of the parties and their potential impact on family dynamics, psychopathology, and parenting; (3.3, 3.5, 3.15, 3.23, 3.24)		
	With specific regard to Indigenous cultural safety and humility issues, in the event I am providing assessment services that includes any Indigenous person I will be mindful of: the need for intercultural competency that includes culturally sensitive and respectful language and testing materials; Indigenous health issues, including the history and legacy of residential schools; and, where possible and appropriate, Indigenous teachings, practices, and perspectives. (3.3, 3.13, 3.14, 3.18, 3.23, 3.24, 5.1, 5.7, 5.26, 5.31, 8.2, 11.2, 11.9, 11.11. See also the CPBC Practice Support Indigenous Cultural Safety Checklist.)		
	Different types and classifications of family violence; the incidence, characteristics, and psychological factors associated with family violence; identifying/assessing various forms of family violence; assessing violence specifically within the context of child custody evaluations; and safety planning and available treatments for violence within the context of parenting and co-parenting; (3.3, 3.5, 3.15, 3.25, 11.2, 11.3, 11.6)		
	(1) Specific topics relevant to the case, including but not limited to: alienation; children's resistance to spending time with a parent; relocation; child maltreatment and neglect; sexual orientation issues; the effects of parental conflict on children; parenting plans specific to ages, developmental stages, and individual needs of the child(ren); and (2) recognition of the limits of my knowledge and when to decline the case or consult with additional experts; (3.3, 3.5, 3.6, 3.15, 3.24, 3.25, 3.26)		
	Applicability of current and relevant legal statutes, including: (3.8, 11.1, 18.1)  i. the Federal Divorce Act; ii. the B.C. Supreme Court Family Rules; iii. the B.C. Provincial Court (Family) Rules iv. the B.C. Family Law Act (especially Sections 37, 38, 41, 69, 202, and 211); v. the Child, Family, & Community Service Act; vi. the Infants Act; and vii. any other statutes and/or legal regulations that are relevant at the time of the contemplated assessment service.		
	Requirements related to report writing for and testifying in Court, (3.5, 3.8, 3.12, 3.13, 3.14, 3.15, 3.18, 3.19, 3.20, 11.6, 11.10, 11.11, 11.27, 11.28, 11.30, 11.33)		
	Proper file maintenance consistent with professional standards and legal requirements for production of the file and for responding to questions pertaining to the file contents and report; (6.5, 7.19, 7.20, 7.21, 13.1, 13.2, 13.3, 13.6, 13.7, 13.10, 13.11, 13.12, 14.1, 14.2, 14.3, 14.4, 14.5, 14.13)		
	Understanding one's cognitive biases, the practice of neutrality, objectivity, and balance, utilization of parallel processes, and awareness of the rights of those being evaluated and the rights of others who may be affected by the evaluation; (3.12, 3.13, 3.14, 3.16, 3.19, 11.3, 11.22, 11.27, 11.28, 11.30, 11.32, 11.33)		
	If I am considering using remote procedures (e.g., internet platforms) for any part of my assessment, I maintain sufficient knowledge, skills, and awareness of literature pertaining to the limitations of telepsychology, I will state these limitations within the report, and I will obtain appropriate and sufficient informed consent regarding limitations of and cautions pertaining to use of telepsychology for the assessment. (3.5, 3.13, 3.18, 3.25, 3.30, 4.2, 4.8, 11.11. See also the CPBC Practice Support Telepsychology Services Checklist and the Telepsychology Assessment Checklist.)		
	I maintain current awareness of professional developments in the areas above, and in any other areas that become identified over time as relevant to family law parenting assessments. (3.2, 3.3, 3.7, 3.8, 3.15)		
I have reviewed the court order or referral, considered and defined my role in this case, and have disclosed any known, suspected, or potential conflicts of interest, and will continue to do so if and as they become known during my involvement in the case. (4.2, 4.6, 4.11, 5.9, 5.10, 5.11, 5.12, 11.24, 11.25, 11.26)			
I have received and reviewed parties' documents, and clarified the referral questions and scope of the assessment. (4.9, 8.1, 11.4			

## **B. INFORMED CONSENT/ASSENT**

	any expect 4.2, 4.3, 4	ovided written information outlining policies, procedures, fees, limits of confidentiality, release of information, and sted post-report services (e.g., court testimony), and obtained and documented consent from all relevant parties. (4.1, .4, 4.6, 4.9, 4.11, 5.9, 5.13, 6.1, 6.3, 6.4, 7.19, 12.1, 12.2, 13.6. See also the CPBC Practice Support Informed Consent at Checklist.)			
	I have provided information pertaining to documentation, reporting, and limits to confidentiality, and obtained and documented assent or consent as appropriate from all non-party interviewees (e.g., included partners, children, and collaterals). (4.1, 4.2, 4.3, 4.6, 4.11, 6.9, 6.10, 7.19, 13.6. See also the CPBC Practice Support Informed Consent and Assent Checklist.)				
	I have disclosed any known, suspected, or potential conflicts of interest to all parties and I have documented these as part of my informed consent process, (5.10, 5.11, 5.12, 7.19, 11.24, 11.25, 11.26, 11.29, 13.6)				
	I have taken steps to ensure that collateral sources, if any, know and understand how the information they provide may potentially be used and are informed regarding all possible recipients of that information, in writing where possible, and I have documented this in my record. (13.6)				
	manner a	sured that all communications and fee collection with parties and legal counsel have been conducted in such a s to maintain the standards of impartiality, transparency, and objectivity, and to protect against potential cognitive 12, 11.27, 12.1)			
C. 1	THE ASSESS	SMENT PROCESS			
	I have ass deemed p	essed factors that are statutorily defined, presented in the court orders or joint referral letter, and other factors pertinent based on professional judgment. (3.3, 3.14, 3.15, 3.25, 11.2, 11.3, 11.4, 11.6, 11.32, 11.33)			
	My assessment procedures and methods are balanced, parallel, employ a multi-method approach, and are appropriate and sufficient to address the issues of concern and to provide opinions and recommendations to address the best interests of the child(ren) as defined by the FLA and to address the specific referral questions. (3.3, 3.12, 3.13, 3.14, 3.16, 3.19, 3.25, 8.2, 11.1, 11.2, 11.3, 11.4, 11.6, 11.15, 11.18, 11.19, 11.20, 11.21, 11.22, 11.27, 11.30, 11.31, 11.32, 11.33)				
	I have assessed each party and where other caregiving adults reside with or co-parent with a party I have considered their impact on the party's ability and willingness to meet the child(ren)'s needs. (3.14, 3.25, 11.3, 11.6, 11.22, 11.30)				
	I have individually assessed each subject child, each sibling relationship, and the relationships between the child(ren) and each party/caregiver, using empirically supported and multi-method assessment methods. (3.10, 3.14, 3.16, 11.3, 11.6, 11.22, 11.30, 11.32)				
	I have attempted to control for, or discussed limitations associated with, the influence of extraneous variables, including but not limited to observer effects, parental stress associated with assessment, the timing and sequence of interviews/observations, and primacy/recency effects. (3.13, 3.14, 3.18, 11.6, 11.11, 11.31)				
	I have selected assessment tools/tests of sufficient relevance and based on research in a custodial litigation context. The tools/ tests selected have sufficient empirical basis to withstand scrutiny and have sufficient reliability and validity to meet legal tests. I have employed appropriate normative data specific to contextual and cultural factors, and have used caution with computerized interpretations, which are often not based on custodial norms. (3.3, 3.7, 3.10, 3.14, 3.15, 3.23, 3.25, 11.2, 11.3, 11.6, 11.9, 11.15, 11.18, 11.19, 11.32, 11.33)				
	I have screened for family violence as defined under the FLA, [Part 1 (1)] and as specified in relevant court decisions. (3.3, 3.7, 3.8, 3.14, 3.15, 3.25, 11.2, 11.3, 11.6, 11.30, 11.32, 11.33.)				
		Where family violence is presented by the parties, I have assessed factors relevant to family violence, including those specified under section 38 of the FLA and those within the professional research literature, and have assessed, considered, and will report on those factors with regard to the Best Interests of the Child.			
		I have reviewed case documents and affidavits, including for information relevant to family violence.			
		I have interviewed both parties as to each allegation pertaining to family violence, and have observed the consistency, clarity, and detail of allegations and explanations, the history of allegations, and the involvement of authorities.			
		I have considered collateral information pertaining to the alleged violence, including but not limited to that provided by police, social workers, involved professionals such as counsellors and marriage counsellors, physicians, and other potential witnesses.			
		I have interviewed the child(ren) as to potential witnessing and impact of the alleged violence.			

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		I have followed recommended methods and procedures pertaining to assessment of family violence consistent with the professional literature.				
		I am aware that there are a paucity of psychological tests specific to assessing family violence in the context of custody assessment, and am familiar with the recommended procedures for assessment contained within the research, including the pertinent reliability and validity issues.				
		My recommendations specifically consider family violence findings, and are consistent with the focus on ensuring the safety and well-being of the child(ren) and vulnerable individuals and consistent with the focus on the Best Interests of the Child.				
	I have ensured the opposing party has had an opportunity to respond to any allegations or concerns relevant to the assessment of the children's needs, or to allegations on which opinions or recommendations may be based. (3.12, 3.14, 3.19, 11.27, 11.30, 11.31, 11.32, 11.33)					
	I have created and maintain reasonably detailed, legible records (physical and/or electronic) of all aspects of the evaluation in such a manner as to preserve confidentiality and in such a format as can be readily produced when called upon to do so. (6.5, 7.19, 7.20, 7.21, 13.1, 13.2, 13.3, 13.6, 13.7, 13.10, 13.11, 13.12, 14.1, 14.2, 14.3, 14.4, 14.5, 14.13)					
	I have refrained from making or communicating any interim recommendations, unless otherwise directed by the court. (4.5, 8.3, 11.27)					
D. 7	THE ASSES	SMENT REPORT				
	I have written and produced a report in compliance with directives in relevant legal statutes, including the court order or consent document. (3.8, 3.25, 7.19, 18.1)					
	I have presented the assessment results in an accurate, balanced, clear, and understandable manner, and reported any limitations (and the impact if any of those limitations) to my opinions and recommendations. (3.12, 3.13, 3.14, 3.18, 3.19, 3.20, 4.10, 11.4, 11.9, 11.10, 11.11, 11.19, 11.20, 11.28, 11.31, 11.33)					
	I have included in the report an acknowledgement of any limitations which may impact the opinions and recommendations (including those related to telepsychology assessment, if applicable), including where I have departed from items on this checklist or those within referenced professional standards. (3.13, 3.18, 11.9, 11.11, 11.15, 11.28, 11.31)					
		sured that all recommendations follow logically from the information obtained and the opinions generated from the nt. (3.12, 11.6, 11.28, 11.33)				
E. F	OST-REPOR	RT PSYCHOLOGICAL SERVICES				
		tset of services I provided, in writing, policies surrounding post-report services and communication, and I adhere to 1, 4.2, 4.6, 4.9, 4.11, 5.9, 5.13, 6.3, 6.4, 8.3)				
		nducted myself in all post-report activities in such a manner as to preserve, in perpetuity, my role as an independent, expert for the Court. (3.12, 5.10, 5.11, 5.12, 11.24, 11.25, 11.26, 11.27)				
	all post-re bilateral o	intained awareness of issues related to established agreements, consent, parallel procedures, balance, objectivity in eport activities, requests, and communication, including, but not limited to: responding to requests for information; communication; release of testing to qualified professionals; file production; copying; fees; not altering the original expert witness testimony. (3.12, 3.13, 3.25, 4.1, 4.5, 5.10, 5.11, 5.12, 6.2, 6.4, 6.12, 6.13, 8.3, 11.12, 11.24, 11.27, 11.28, 11.4)				
	not refere	ntinued to ensure that I have documented informed consent from all parties for any work done post-report that was enced in the original consent form, except where clarifying results jointly with counsel or parties. (4.1, 4.2, 4.3, 4.4, , , 11.27, 13.6. See also the CPBC Practice Support Informed Consent and Assent Checklist.)				
	11.14, 11.	riewed relevant standards prior to releasing any information and/or records. (6.2, 6.11, 6.12, 6.13, 11.12, 11.13, 16, 18.1. See also the CPBC Practice Support Considerations When Contemplating Releasing Information in Various ances Checklist and the Responding to Requests for Release of Information Checklist.)				
	the case a	ipon to testify at Court, I will continue to provide my services in such a manner as to preserve my objectivity regarding and will testify in accordance with relevant legal statutes. (3.8, 3.12, 3.13, 3.14, 3.18, 3.19, 11.11, 11.27, 11.28, 11.30, 1; See also the Supreme Court Family Rules)				
	I will man	age any requests for new services, such as an update report, with a new contract. (8.1)				