

College of Health and Care Professionals of British Columbia

DRAFT BYLAWS

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1.0 Definitions and Interpretation

Definitions

1.1 The following definitions apply in these Bylaws and Schedules, unless otherwise specified:

“Act” means the *Health Professions Act*, RSBC 1996, c. 183;

“Amalgamation Date” means June 28, 2024, as specified in section 11 of the *Health Professions Designation and Amalgamation Regulation*, BC Reg. 270/2008;

“Applicant” means a person making application for registration or reinstatement with the College, but does not include an applicant as defined in Section 50.54 of the Act;

“Board” means the College board under section 17(1) of the Act;

“Board Chair” means the Board Member elected by the Board to serve as Board Chair;

“Board Code of Conduct” means the code of conduct passed by the Board under these Bylaws;

“Board Election” means an election of one or more Registrants to the Board under section 17(3)(a) of the Act;

“Board Meeting” means a business meeting of the Board, but does not include a planning session where no decisions are made;

“Board Member” includes a First Board Member, a Public Board Member, a Registrant Board Member, and an Elected Board Member;

“Board Policy” means a policy approved by the Board by ordinary resolution;

“Board Vice Chair” means a Board Member elected by the Board to serve as Board Vice Chair;

“Chief Executive Officer” or **“CEO”** means the person appointed to such position, which person may also serve as Registrar;

“Citation” means a citation issued by the Registrar under section 37 of the Act;

“College” means the amalgamated college under section 11 of the *Health Professions Designation and Amalgamation Regulation*, BC Reg. 270/2008, named “College of Health and Care Professionals of British Columbia”;

“College of Dietitians of British Columbia” or “CDBC” means the Former College established under section 15(1) of the Act for the designated health profession of dietetics specified in section 2(1)(d) of the *Health Professions Designation and Amalgamation Regulation*;

“College of Occupational Therapists of British Columbia” or “COTBC” means the Former College established under section 15(1) of the Act for the designated health profession of occupational therapy specified in section 2(1)(i) of the *Health Professions Designation and Amalgamation Regulation*;

“College of Opticians of British Columbia” or “College of Opticians” means the Former College established under section 15(1) of the Act for the designated health profession of opticianry specified in section 2(1)(j) of the *Health Professions Designation and Amalgamation Regulation*;

“College of Optometrists of British Columbia” or “College of Optometrists” means the Former College established under section 15(1) of the Act for the designated health profession of optometry specified in section 2(3)(c) of the *Health Professions Designation and Amalgamation Regulation*;

“College of Physical Therapists of British Columbia” or “CPTBC” means the Former College established under section 15(1) of the Act for the designated health profession of physical therapy specified in section 2(1)(k) of the *Health Professions Designation and Amalgamation Regulation*;

“College of Psychologists of British Columbia” or “CPBC” means the Former College established under section 15(1) of the Act for the designated health profession of psychology specified in section 2(1)(l) of the *Health Professions Designation and Amalgamation Regulation*;

“College of Speech and Hearing Health Professionals of British Columbia” or “CSHBC” means the Former College established under section 15(1) of the Act for the designated health professions of audiology, hearing instrument dispensing and speech-language pathology specified in section 2(3)(a) of the *Health Professions Designation and Amalgamation Regulation*;

“Committee” means a Committee established under the Act and these Bylaws;

“Committee Member” means any person appointed to a Committee;

“Complaint” includes any of the following:

- (a) a complaint under section 32(1) of the Act;

- (b) an investigation directed by the Inquiry Committee on its own motion under section 33(4) of the Act; and
- (c) a report that has been treated as a complaint under section 32.2(4)(a), 32.3(3)(a), or 32.4(3) of the Act;

“Complainant” means a person who submits a complaint under section 32(1) of the Act in writing to the College about a Registrant;

“Confirmation of Registration” means the record of registration in Bylaw 6.20;

“Current Class of Registration” means a class of registration provided for in Part 6.0 of these Bylaws, and which is comparable to a class of registration that existed within a Former College immediately prior to the Amalgamation Date (defined below as a “Former Class of Registration”) as set out in Schedule 9;

“Designated Health Profession” means, unless the context otherwise requires, one of the following professions designated under section 12(1) of the Act:

- (a) Dietetics;
- (b) Occupational Therapy;
- (c) Opticianry;
- (d) Optometry;
- (e) Physical Therapy;
- (f) Psychology;
- (g) Audiology;
- (h) Hearing Instrument Dispensing; and
- (i) Speech-Language Pathology;

“Designated Registrant” means a Registrant designated in accordance with Bylaw 12.13;

“Discipline Committee” means the Committee established in Bylaw 4.1;

“Elected Board Member” means a Registrant elected to the Board under these Bylaws;

“Election Trigger Date” means:

- (a) the date upon which the terms of office of those Registrant Board Members appointed as First Board Members expires; or
- (b) the date upon which terms of office of any Elected Board Members expire;

“Examination” means a theoretical, knowledge-based, or practical profession-specific examination or assessment for the purposes of assessing an Applicant’s or Registrant’s qualifications for registration, renewal, or reinstatement, and includes a combination of examinations or assessments;

“Fee” or “Fees” means and includes any fees, special fees, fines, debts, or levies owed to the College;

“Finance and Audit Committee” means the Committee established in Bylaw 4.1;

“First Board Member” means an individual appointed to the Board effective as of the Amalgamation Date as either a Public Board Member or Registrant Board Member;

“Former Class of Registration” means a class of registration that existed within a Former College immediately prior to the Amalgamation Date, and is comparable to the class of registration provided for in Part 6.0 of these Bylaws (defined above as a “Current Class of Registration”) as set out in Schedule 9;

“Former College” means any of the colleges that regulated one or more Designated Health Profession(s) now regulated by the College prior to the Amalgamation Date;

“Former Registrant” includes an individual deemed to be a former Registrant of the College under section 25.07(1) of the Act;

“General Meeting” means a meeting open to Registrants and the public as set out in Bylaw 3.21;

“Good Standing” means the state of registration of any Registrant in which all of the following conditions apply:

- (a) the Registrant is not suspended under the Act;
- (b) there are no limits or conditions on the Registrant’s practice of a Designated Health Profession under section 20(2.1) or (3), 32.2, 32.3, 33, 35,36, 37.1, 38, 39 or 39.1 of the Act; and
- (c) the Registrant is not in default of payment of any Fee;

“Governance Committee” means the Committee established in Bylaw 4.1;

“Health Profession Corporation” or “HPC” means a corporation to which a permit has been issued under section 43 of the Act;

“Holding Company” means a corporation described in section 43(1)(c)(ii) or 43(1)(d)(i)(B) of the Act;

“HPC Eligible Designated Health Profession” means the Designated Health Professions of:

- (a) Optometry; and
- (b) Physical Therapy;

“HPC Eligible Registrant” means a Registrant who is registered in an HPC Eligible Designated Health Profession;

“HPC Permit” means a permit that authorizes a corporation to operate as a Health Profession Corporation;

“HPC Permit Revocation Hearing” means a hearing under section 44 of the Act;

“Human Resources Committee” means the Committee established in Bylaw 4.1;

“Inquiry Committee” means the Committee established in Bylaw 4.1;

“Inspector” means a person appointed as such under section 27 of the Act, and includes the Registrar;

“Minister” has the same meaning as in section 1 of the Act;

“Multi-Jurisdictional Registrant” means an individual registered in a Multi-Jurisdictional Registration class;

“Multi-Jurisdictional Registration” means registration by an individual in a registration class established in these Bylaws for the purpose of facilitating professional labour mobility in Canada;

“Nomination Advisory Group” means the group established under Bylaw 2.58;

“Panel” means a panel of a Committee established under these Bylaws;

“Personal Information” means:

- (a) in the public sector, “personal information” as defined in schedule 1 of the *Freedom of Information and Protection of Privacy Act*, RSBC 1996, c. 165; and
- (b) in the private sector, “personal information” as defined in section 1 of the *Personal Information Protection Act*, SBC 2003, c. 63;

“Professional Association” means:

- (a) a health profession association as defined in section 1 of the Act; or
- (b) an organization whose members include Registrants or persons regulated in another jurisdiction for the practice of a Designated Health Profession and whose purposes, objects, or operations include the promotion of interest of its members; and includes a national or international association or federation or association of professional associations;

“Professional Practice and Standards Advisory Committee” means the Committee established in Bylaw 4.1;

“Public Board Member” means an individual appointed to the Board who is not a Registrant and includes First Board Members who are not Registrants;

“Public Committee Member” means an individual appointed to serve on a Committee and who:

- (a) is not a Registrant or Former Registrant of the College;
- (b) has not at any time been a Registrant of a Former College; and
- (c) is not a Public Board Member;

“Publish” and **“Publication”** means the posting of the most recent version of a document, notice, or other information specified in these Bylaws on the College website, and may include any additional distribution of such material to Registrants and the public as the Registrar sees fit;

“Quality Assurance Committee” means the Committee established in Bylaw 4.1;

“Quality Assurance Examination” means an examination referred to in section 26.1(3)(b) of the Act;

“Quality Assurance Program” means the program established under Part 10 of these Bylaws;

“Register” means the register maintained by the Registrar under section 21(2) of the Act;

“Registrant” means:

- (a) an individual granted registration with the College in accordance with the Act and these Bylaws;

- (b) when used in Schedules 2-26, unless otherwise specified, a Registrant in the Designated Health Profession(s) that is the subject of such schedule; and
- (c) includes a Former Registrant where applicable in Part 11 [*Inspections, Investigations, and Discipline*], in accordance with section 26 of the Act;

“Registrant Board Member” means a Registrant appointed as a First Board Member or to replace such member;

“Registrar” means the individual appointed as Registrar under section 21(1) of the Act;

“Registration Committee” means the Committee established in Bylaw 4.1, and includes, for the purposes of Part 6.0 of these Bylaws, the Registrar pursuant to section 20(6)(b) of the Act;

“Respondent” means a Registrant who has been named in a Citation;

“Special Resolution” means a resolution requiring a two thirds vote of those persons present and eligible to vote on the resolution;

“Standards of Practice” means any or all of the standards, limits or conditions for the practice of a Designated Health Profession by Registrants, established by Bylaw in accordance with section 19(1)(k) of the Act, or by other means in accordance with section 19(1.1) of the Act;

“Standards of Professional Ethics” means any or all of the standards of professional ethics for Registrants of a Designated Health Profession, established in accordance with section 19(1)(l) of the Act, or by other means in accordance with section 19 (1.1) of the Act.

Interpretation

- 1.2 All headings, subheadings, and references in italicized text in square brackets are for convenience and do not constitute part of these Bylaws.

2.0 College Board

Board Composition

- 2.1 On and from the Amalgamation Date until the Board composition may change by law or as allowed under these Bylaws, the Board consists of the First Board Members.
- 2.2 The Board consists of no fewer than nine and no more than 12 individuals comprised of:
- (a) up to six Public Board Members; and
 - (b) up to six Board Members consisting of Registrant Board Members and/or Elected Board Members.
- 2.3 A maximum of one Board Member who is a Registrant in any single Designated Health Profession is permitted on the Board at any one time.

Board Chair and Board Vice Chair Selection and Terms of Office

- 2.4 The Board must elect a Board Chair from among its members by a majority vote:
- (a) at the first Board Meeting after appointment of the First Board Members, unless the Minister has already appointed a Board Chair;
 - (b) as soon as practicable after any of the cessation of office events in Bylaw 2.14; and
 - (c) in any other case, at the conclusion of the Board Chair's term set out in Bylaw 2.8.
- 2.5 The Board must elect a Board Vice Chair from among its members by a majority vote:
- (a) at the first Board Meeting after appointment of the First Board Members, unless the Minister has already appointed a Board Vice Chair;
 - (b) as soon as practicable after any of the cessation of office events in Bylaw 2.14; and
 - (c) in any other case, at the conclusion of the Board Vice Chair's term set out in Bylaw 2.8.
- 2.6 If the Board Chair elected or appointed is a Registrant Board Member or Elected Board Member, the Board Vice Chair must be a Public Board Member.
- 2.7 If the Board Chair elected or appointed is a Public Board Member, the Board Vice Chair must be a Registrant Board Member or an Elected Board Member.
- 2.8 The Board Chair and Board Vice Chair terms of office are a maximum two years, renewable as long as the individual remains a Board Member.

2.9 A Board Member replacing an existing Board Chair or Board Vice Chair prior to expiry of a term of office completes the term of office of the person replaced.

Duties of Board Chair and Board Vice Chair

2.10 The Board Chair must:

- (a) preside as chair of all Board and General Meetings of the College;
- (b) perform other duties as required to properly carry out the duties of the Board, including any requirements for the position established by the Board; and
- (c) maintain minutes of any portions of Board Meetings where the Registrar has been excluded pursuant to Bylaw 2.33.

2.11 In the event the Board Chair is absent from a Board or General Meeting or is unable or unwilling to act, the Board Vice Chair must carry out the duties of the Board Chair as set out in Bylaw 2.10.

2.12 In the event both the Board Chair and Board Vice Chair are absent or unable or unwilling to act at a Board Meeting or General Meeting, the Board must elect by majority vote a Board Member as acting chair for the purposes of the meeting, who must carry out the duties set out in Bylaw 2.10.

2.13 The Board may impose limits and conditions on the acting chair as it considers appropriate.

2.14 The Board Chair or Board Vice Chair ceases to hold office upon:

- (a) ceasing to hold office as a Board Member;
- (b) delivering written notice of resignation from office of Board Chair or Board Vice Chair to the Registrar;
- (c) election of a new Board Chair or Board Vice Chair under these Bylaws; or
- (d) removal from the office of Board Chair or Board Vice Chair by Special Resolution of Board Members attending a duly convened meeting.

Board Member Terms of Office

2.15 The terms of office for First Board Members commence on the Amalgamation Date.

2.16 Unless the terms of appointment provide otherwise, and subject to earlier removal from office by the Minister, the terms of office for First Board Members cease:

- (a) after two years, for two Public Board Members so designated by the Minister;

- (b) after three years, for two Public Board Members and three Registrant Board Members so designated by the Minister; and
- (c) after four years, for two Public Board Members and three Registrant Board Members so designated by the Minister.

2.17 The term of office for an Elected Board Member commences on the date of their election and ceases after three years.

2.18 A Registrant who has held office as an Elected Board Member for a consecutive period of six years or more is ineligible to be elected to the Board until at least three years have elapsed since the end of the Registrant's most recent term of office on the Board.

Board Meetings: General Requirements

2.19 The Board must meet at least four times during a College fiscal year.

2.20 A Board Meeting must be called by the Registrar:

- (a) upon receipt of written request of the Board Chair; or
- (b) upon receipt of a written request from a majority of Board Members.

2.21 A request to meet under Bylaw 2.20(b) must set out the matter(s) for discussion or decision, which information must be provided in the notice of Board Meeting.

2.22 Notice of Board Meetings, and any cancellations of Board Meetings, must be provided by the Registrar to:

- (a) all Board Members by providing written notice within a reasonable period of time to the email address for delivery provided by the Board Member for such purpose; and
- (b) to Registrants and the public by Publishing a notice on the College website.

2.23 The notice period of meetings for Board Members, Registrants, and the public in Bylaw 2.22 may be different.

2.24 Notice to Registrants and the public of a Board Meeting is not required if the meeting is called on an urgent basis.

2.25 The Registrar must Publish confirmation and a summary description of any Board Meeting for which prior notice was not given under Bylaw 2.24 within a reasonable period of time after such meeting.

- 2.26 The failure to deliver notice of a Board Meeting under Bylaw 2.22, or the non-receipt of such notice by any person, does not invalidate Board Meeting proceedings.
- 2.27 Board Meetings may be held in person, by telephone, by videoconference, or in a hybrid manner.
- 2.28 The Board may establish or adopt procedures, policies, guidelines, or rules, consistent with these Bylaws, for regulating the conduct of Board Meetings.
- 2.29 The Registrar must Publish any procedures, policies, guidelines, or rules adopted by the Board under Bylaw 2.28.
- 2.30 The Board may meet in planning sessions that are not open to the public or Registrants for the purpose of planning, education, or other reasons not requiring Board decisions.

Board Meetings: Openness and Exclusions

- 2.31 Subject to Bylaw 2.32, Board Meetings must be open to Registrants and the public.
- 2.32 The Board may exclude any person who is not a Board Member from any part of a Board Meeting where one or more of the following items will be discussed:
- (a) personnel matters;
 - (b) instructions to, or opinions received from legal counsel or any other matter subject to solicitor-client privilege, or information or discussion concerning a contemplated or ongoing legal proceeding;
 - (c) property acquisitions or dispositions;
 - (d) communication with the Office of the Ombudsperson;
 - (e) information concerning:
 - (i) the contents of an Examination;
 - (ii) the scoring or results of an Examination; or
 - (iii) any information related to an Examination that would constitute an unreasonable invasion of an individual's personal privacy;
 - (f) information concerning:
 - (i) consideration of whether an academic or technical program will be recognized by the College;
 - (ii) an application for an individual for registration, reinstatement, renewal, or certification;

- (iii) any matter under Part 3 of the Act;
 - (iv) a criminal, civil, or administrative proceeding the disclosure of which in (i)-(vi) above would be an unreasonable invasion of the individual's personal privacy;
 - (g) financial, personal, or other matters of such nature that the interest of any affected person or the public interest in avoiding disclosure outweighs the public interest in open Board Meetings;
 - (h) information that the College or another public body would be required or authorized to refuse to disclose to an applicant making a request for records under Part 2 of the *Freedom of Information and Protection of Privacy Act*;
 - (i) the Board's self-assessment of its performance; and
 - (j) an internal Board conflict resolution process.
- 2.33 Despite Bylaw 2.32, the Board may not exclude the Registrar, or a person designated by the Registrar to attend on their behalf, from any part of a Board Meeting except to the extent that such meeting concerns:
- (a) a discussion of the Registrar's performance or employment contract;
 - (b) the Board's self-assessment of its performance; or
 - (c) an internal Board conflict resolution process.

Board Meetings: Minutes

- 2.34 The Registrar must ensure that minutes are taken at each Board Meeting and retained.
- 2.35 Board Meeting minutes must include a notation that includes the Bylaw authority for the exclusion whenever any person or class of persons is excluded from a Board Meeting.
- 2.36 The Registrar must Publish Board Meeting minutes on the College website within a reasonable period after such minutes are approved, subject to:
- (a) non-substantive editing of the Published version of the minutes for clarity and accuracy; and
 - (b) removing information in relation to any item in Bylaw 2.32, provided that the Bylaw authority for removing such item is noted in the Published version of the minutes.

Board Meetings: Quorum and Decision-Making

- 2.37 Quorum at any Board Meeting consists of:
- (a) a majority of Board Members, including:

- (i) no fewer than two Public Board Members; and
- (ii) no fewer than two Board Members who are Registrant Board Members or Elected Board Members.

2.38 Board resolutions are made by majority vote unless otherwise provided in these Bylaws.

2.39 Board resolutions are deemed to take immediate effect unless otherwise specified in the resolution.

2.40 The Board may pass a resolution in writing, including by email or otherwise, with the same binding effect as if such vote occurred at a Board Meeting.

2.41 Board resolutions in writing must be passed by unanimous vote, except that failure by any Board Member to respond to a resolution in writing vote within the time period set by the Board Chair in the notice is considered a vote in favour of the resolution.

2.42 All Board resolutions in writing and the outcome of the decision must be included with the minutes of the first Board meeting after such resolution, subject to Bylaw 2.32.

Board Elections: General

2.43 Unless these Bylaws are amended or superseded by other legislation, an election for Elected Board Member positions must occur at least 30 days prior to an Election Trigger Date, on a date set by the Board.

2.44 The Board must select the election date at least 180 days prior to an Election Trigger Date.

2.45 The Registrar must deliver a notice of election to all Registrants eligible to vote under these Bylaws at least 30 days prior to an election date.

2.46 The election notice must include:

- (a) information about the nomination and election procedures;
- (b) information about candidates including without limitation
 - (i) term lengths; and
 - (ii) registration class;
- (c) indication whether a candidate has been endorsed by the Nomination Advisory Group;
- (d) information regarding desired competencies for Elected Board Members; and
- (e) any other information pertaining to the candidates and election the Registrar deems appropriate.

- 2.47 Any failure to deliver a notice of election to, or the non-receipt of a notice of election by any person entitled to such notice does not invalidate the election, proceeding, or results.
- 2.48 Except as otherwise provided in these Bylaws, the Registrar administers elections and the nominations procedure.

Board Elections: Eligibility

- 2.49 Only individuals in the following Registrant classes are eligible for Board election:
- (a) Dietetics: Full;
 - (b) Occupational Therapy: Full;
 - (c) Opticianry: Registered Optician;
 - (d) Opticianry: Registered Contact Lens Fitter;
 - (e) Opticianry: Temporary;
 - (f) Optometry: Therapeutic Qualified;
 - (g) Optometry: Non-Therapeutic Qualified;
 - (h) Physical Therapy: Full;
 - (i) Psychology: Registered Psychologist;
 - (j) Psychology: School Psychologist;
 - (k) Audiology: Full;
 - (l) Hearing Instrument Dispensing: Full; and
 - (m) Speech-Language Pathology: Full.
- 2.50 A Registrant is ineligible for Board election if, on the date that nomination forms must be received under Bylaw 2.63, the Registrant:
- (a) is not in Good Standing;
 - (b) is the subject of an ongoing investigation by the Inquiry Committee under section 33 of the Act;
 - (c) is a Respondent in relation to an unresolved Citation;
 - (d) directly or indirectly owns a legal or beneficial interest in any voting shares of a Health Profession Corporation named in an unresolved notice of HPC Permit Revocation Hearing;

- (e) is the subject of an unresolved hearing in British Columbia or another jurisdiction that could result in the individual's entitlement to practise a profession being cancelled, revoked, or suspended, other than for non-payment of fees;
- (f) is an undischarged bankrupt; or
- (g) is the subject of a current order or finding by a court in Canada or another jurisdiction to be incapable of managing the person's own affairs.

2.51 A Registrant is ineligible for Board election if, at any time within the three-year period preceding the date nomination forms must be received under Bylaw 2.63, the individual:

- (a) is or was a director, officer, or employee of a Professional Association; or
- (b) is or was a director, officer, or employee of a corporation or other entity that provides professional liability coverage to any Designated Health Profession or a corresponding health profession in another province or territory of Canada or a foreign jurisdiction.

2.52 A Registrant is ineligible for Board election if, at any time within the three-year period preceding the date nominations forms must be received under Bylaw 2.63, the individual:

- (a) was the subject of a consent order under section 37.1 or determination under section 39(1) of the Act by the Discipline Committee of any college under the Act;
- (b) was the subject of an order under section 35 or 38(8) of the Act;
- (c) was the subject of a finding by a body in another province or territory of Canada or foreign jurisdiction equivalent to the Discipline Committee that the Registrant committed an act that in the opinion of the Registrar would likely constitute unprofessional conduct under the Act; or
- (d) has been suspended or removed from office as:
 - (i) an elected board member or equivalent of another college under the Act;
 - (ii) a director or similar governance position of any body in BC, Canada or a foreign jurisdiction that regulates a profession; or
 - (iii) as a director or similar governance position of any other public body in British Columbia, Canada, or a foreign jurisdiction.

2.53 A Registrant is ineligible for Board election if, at any time:

- (a) the individual's entitlement to practise a profession:
 - (i) has been cancelled, revoked, or suspended in British Columbia, another Canadian province or territory or foreign jurisdiction for any reason other than non-payment of fees;

- (ii) has been voluntarily relinquished in British Columbia, another Canadian province or territory or foreign jurisdiction, with the effect of preventing the commencement or completion of an investigation, review, hearing, or other proceeding that could have resulted in the Registrant's entitlement to practise the profession in BC or that other province or foreign jurisdiction being cancelled, revoked, or suspended for any reason other than non-payment of fees; or
 - (b) the individual has been convicted of an offence in British Columbia, another Canadian province or territory or foreign jurisdiction and the Registrar is satisfied that the nature of the offence including the circumstances in which it was committed give rise to reasonable concerns about the Registrant's competence or fitness to serve as a Board Member such that disqualification is justified.
- 2.54 A Registrant not eligible for Board election under Bylaws 2.50-2.53 may, prior to the close of nominations under Bylaw 2.63, deliver to the Registrar a written request for eligibility in the form determined by the Registrar.
- 2.55 The Registrar must consult with the Nomination Advisory Group and the Registrar must determine whether the individual making an eligibility request will be permitted to run for election, having regard for:
- (a) the person's ability to discharge the duty of a Board Member;
 - (b) the integrity of the Board; and
 - (c) the public interest.
- 2.56 After making a decision under Bylaw 2.55 the Registrar must notify the individual who made the eligibility request and the Nomination Advisory Group of the decision in writing.

Board Elections: Nomination Advisory Group

- 2.57 The Board must establish a Nomination Advisory Group at least 180 days prior to the end of a Registrant Board Member's term.
- 2.58 The Nomination Advisory Group is comprised of:
- (a) two public members selected by the Board who must not be Board Members;
 - (b) two Registrants selected by the Board:
 - (i) who must declare in writing that they will not be nominees for the election; and
 - (ii) who must be Registrants of different Designated Health Professions; and
 - (c) the Registrar, as a non-voting participant.

- 2.59 At least 180 days prior to an Election Trigger Date, the Board must establish and Publish selection criteria for Nomination Advisory Group members other than the Registrar.
- 2.60 The Board must consider the selection criteria established under Bylaw 2.59 when selecting members for the Nomination Advisory Group.

Board Elections: Composition Matrix and Nominee Evaluation Criteria

- 2.61 At least 180 days prior to an Election Trigger Date, the Board must establish and Publish:
- (a) a Board composition matrix that incorporates:
 - (i) principles of geographic, professional, and demographic diversity; and
 - (ii) Indigenous perspectives; and
 - (b) Board nominee evaluation criteria that includes:
 - (i) merit principles, including the skills and experience determined to best meet College Board needs; and
 - (ii) integrity principles, including having regard to information relating to the nominee's competency and professional conduct.

Board Elections: Nominations Process

- 2.62 At least 150 days prior to an Election Trigger Date, the Registrar must Publish a notice seeking nominations for the Board election, which notice must include at least:
- (a) nomination procedures including a nomination form; and
 - (b) information about the nomination review process, including the nominee evaluation criteria to be used by the Nomination Advisory Group.
- 2.63 The Registrar must ensure the close of nominations occurs at least 120 days prior to an Election Trigger Date.
- 2.64 The Registrar must:
- (a) review all nomination forms submitted for compliance and eligibility in accordance with the requirements provided in the notice and these Bylaws;
 - (b) reject any forms that are not compliant or ineligible and advise the submitter; and
 - (c) deliver all completed accepted nomination forms to the Nomination Advisory Group in a timely manner.
- 2.65 The Registrar's decision to reject a nomination is final and not subject to review.

- 2.66 If the number of valid nominations is fewer than or matches the number of vacant Board positions, having regard for the maximum Designated Health Profession limits in Bylaw 2.3, the Registrar must declare such nominees as elected by acclamation.
- 2.67 Unless the election occurs by acclamation, the Nomination Advisory Group must:
- (a) review all nomination forms it receives against the approved nominee evaluation criteria;
 - (b) conduct any further inquiries it deems appropriate, including without limitation seeking information from College staff and conducting interviews with nominees; and
 - (c) make a determination whether to endorse a nominee for Board election based on the nominee evaluation criteria.
- 2.68 The decision whether to endorse a nominee for Board election must be made by Registrant and public members of the Nomination Advisory Group.
- 2.69 Within 14 days of receipt of nomination forms from the Registrar, the Nominations Advisory Group must:
- (a) complete the nomination review process in Bylaw 2.67; and
 - (b) provide a report to the Registrar:
 - (i) summarizing the nominee review process; and
 - (ii) indicating for each nominee whether the Nominations Advisory Group endorses their candidacy for the Board.
- 2.70 The report provided by the Nomination Advisory Group in Bylaw 2.69 is confidential to the Registrar.
- 2.71 A Registrant who is otherwise eligible for the Board election under Bylaws 2.49-2.56 is eligible for Board election whether endorsed by the Nomination Advisory Group or not.

Board Elections: Eligibility to Vote

- 2.72 Registrants in the following classes who are in Good Standing as of the date a voting list is prepared under Bylaw 2.75 are eligible to vote in a Board Election:
- (a) Dietetics: Full;
 - (b) Dietetics: Emergency;
 - (c) Dietetics: Temporary;
 - (d) Dietetics: Non-Practicing;
 - (e) Occupational Therapy: Full;

- (f) Occupational Therapy: Provisional;
- (g) Opticianry: Registered Optician;
- (h) Opticianry: Registered Contact Lens Fitter;
- (i) Opticianry: Temporary;
- (j) Optometry: Therapeutic Qualified;
- (k) Optometry: Non-Therapeutic Qualified;
- (l) Physical Therapy: Full;
- (m) Psychology: Registered Psychologist;
- (n) Psychology: School Psychologist;
- (o) Audiology: Full;
- (p) Audiology: Conditional;
- (q) Audiology: Non-Practising;
- (r) Hearing Instrument Dispensing: Full;
- (s) Hearing Instrument Dispensing: Conditional;
- (t) Hearing Instrument Dispensing: Non-Practising;
- (u) Speech-Language Pathology: Full;
- (v) Speech-Language Pathology: Conditional; and
- (w) Speech-Language Pathology: Non-Practising.

Board Elections: Procedure

- 2.73 Board Elections must be held electronically by way of an electronic voting platform selected by the Registrar.
- 2.74 The Registrar must:
- (a) take reasonable steps to ensure the voting platform used in a Board election includes industry-standard confidentiality and data-management conditions to protect voter identity and voting data provided by the College for election purposes; and
 - (b) take reasonable steps to ensure that internal election processes maintain the confidentiality and privacy of voting data, including confidentiality and anonymity of voting choices.

- 2.75 The Registrar must create a list of Registrants eligible to vote at least 14 business days prior to the date the notice of election is delivered.
- 2.76 Unless acclamation for all Board Member positions to be filled has occurred under Bylaw 2.66, the Registrar must, at least 30 days prior to the election date, prepare and deliver to all Registrants eligible to vote in a Board election and who are on the list prepared in Bylaw 2.75 a ballot in electronic format listing all eligible candidates.
- 2.77 The ballot and voting process must account for the maximum Board participation from each Designated Health Profession established in these Bylaws, such that if more candidates from a Designated Health Profession are on the ballot for an open Board position than are allowed under these Bylaws, the voter may only vote for one candidate from that Designated Health Profession.
- 2.78 The Registrar may deliver the election ballot incorporated with or at the same time as the notice of election under Bylaw 2.45.
- 2.79 Each Registrant eligible to vote may vote in favour of one candidate for each Board Member position to be filled in an election, without restriction as to Designated Health Profession of the voter or candidate.
- 2.80 Subject to the restrictions on maximum number of Board members from each Designated Health Profession established in these Bylaws, the candidate who receives the most votes for an Elected Board Member position to be filled in an election is elected to that position.
- 2.81 In the event of a tie vote for a Board position, the Registrar must select the successful candidate by random draw.
- 2.82 If election procedures are interrupted, including delivery of notice of election or ballot, receipt of nominations, or voting period disruption, the Registrar may extend any deadline specified in these Bylaws to accommodate the interruption.
- 2.83 The Registrar must:
- (a) determine any dispute or irregularity with respect to any nomination, ballot, or election;
 - (b) receive and review the election results and communicate the final results to the Board, Registrants, and public in a timely manner; and
 - (c) certify newly-elected Elected Board Members under section 17.1(1) of the Act.

Board Code of Conduct and Board Policies

2.84 The Board must establish and Publish a Board Code of Conduct which must include, without limitation:

- (a) duties and responsibilities of Board Members;
- (b) ethical requirements for Board Members; and
- (c) conflict of interest guidelines.

2.85 The Board may establish Board Policy in relation to its policy governance role.

Ceasing to Hold Office: Elected Board Members

2.86 An Elected Board Member ceases to hold office as a Board Member if the individual at any time during their term:

- (a) ceases to be a Registrant in the registration class corresponding to the Board position to which there were elected;
- (b) meets any of the disqualification criteria in Bylaws 2.50, 2.51, 2.52, or 2.53 except Bylaw 2.50(b);
- (c) is deceased;
- (d) is removed from office under section 17.11(5) of the Act or under Bylaw 2.87; or
- (e) resigns in accordance with these bylaws.

2.87 In addition to the Board's power under section 17.11(5) of the Act, if the Board is satisfied that an Elected Board Member has contravened the Board Code of Conduct, the Board by Special Resolution may do one or more of the following:

- (a) remove the Elected Board Member from one or more Board Meetings;
- (b) censure the Elected Board Member;
- (c) suspend the Elected Board Member from Board duties for a specific period of time; and
- (d) remove the Elected Board Member from office.

2.88 Prior to considering whether to take any decision under Bylaw 2.87, the Board must provide reasonable notice to the Elected Board Member in question and an opportunity to be heard in person or in writing.

Board Vacancy: Elected Board Member

- 2.89 If no one is nominated to fill a vacant Board Member position in a Board election, or if an Elected Board Member ceases to hold office for any reason, the Board may, by Special Resolution, appoint a Registrant who is eligible for that position to fill the vacancy until the end of the term of office of the vacancy.
- 2.90 Subject to section 17.11(1) to (4) of the Act, a Registrant appointed under Bylaw 2.89 assumes the vacant Board position and holds office as an Elected Board Member.

Public Board Member: Recommendation

- 2.91 The Board may, by Special Resolution, recommend to the Minister that a Public Board Member or a Registrant Board Member be removed from office before the expiry of their term of office if the Board is satisfied the Board Member in question has contravened a term of the Board Code of Conduct or the Oath of Office required under section 17.11(1) of the Act.
- 2.92 Prior to meeting to decide whether to recommend removal under Bylaw 2.91, the Board must provide reasonable notice to the individual and an opportunity to be heard in person or in writing.
- 2.93 If a removal recommendation vote passes under Bylaw 2.91:
- (a) the Registrar must notify the Minister in writing of the recommendation within seven days of the decision; and
 - (b) unless removed by the Minister, the individual in question continues to serve as a Board Member without limitation on their duties, power, and obligations under the Act and these Bylaws.

3.0 College Administration

Registrar and Chief Executive Officer

- 3.1 The Registrar:
- (a) has the powers and duties assigned to the position in the Act and these Bylaws;
 - (b) is the Chief Executive Officer of the College; and
 - (c) is responsible for the College's operational and administrative affairs.
- 3.2 The Registrar may designate any College employee or agent to exercise any power or duty of the Registrar as assigned by the Registrar.
- 3.3 An individual designated by the Registrar in Bylaw 3.2 has the same authority as the Registrar when acting on behalf of the Registrar.
- 3.4 The Registrar is authorized to:
- (a) establish forms for the purposes of these Bylaws;
 - (b) require the use of such forms by Registrants,
- and such forms are considered to be a Bylaw under sections 19(2.1) and 19(2.2) of the Act.

Deputy Registrars

- 3.5 A Deputy Registrar appointed by the Board under section 21(1) of the Act is authorized to perform all duties of the Registrar:
- (a) subject to any direction or limits or conditions from the Registrar; and
 - (b) without limitation, if the Registrar is unable to act or provide direction for any reason.

Fiscal Year

- 3.6 The College's first fiscal year runs from the Amalgamation Date to March 31, 2025.
- 3.7 Thereafter, the fiscal year of the College begins April 1 of each calendar year and ends on March 31 of the following year.

Budget, Reserve Funds and Oversight

- 3.8 The Board must, in each fiscal year:
- (a) approve an operating budget and a capital budget for the College for the fiscal year; and

- (b) set any limits or conditions deemed appropriate on the Registrar's authority to make College financial commitments during the fiscal year.
- 3.9 The Board must establish contingency reserve funds and limits and conditions for disbursements from such funds.
- 3.10 The Board must review financial statements or reports from the Finance and Audit Committee in relation to College finances on a quarterly basis.

Banking, Borrowing Powers and Investments

- 3.11 The Board may:
- (a) establish College accounts with a chartered bank, trust company, or credit union as it deems appropriate; and
 - (b) authorize the Registrar to establish such accounts.
- 3.12 The Board may raise funds, borrow, or guarantee or secure payments on behalf of the College in any manner determined by the Board, in order to carry out College purposes.
- 3.13 The Board may:
- (a) invest College funds in accordance with any Board policies on investment, which must be consistent with sections 15.1 and 15.2 of the *Trustee Act*, RSBC 1996 c. 464; and
 - (b) authorize the Registrar to invest College funds in accordance with this Bylaw.

Legal Counsel

- 3.14 The Registrar may retain legal counsel to assist the Board, the Registrar, a Committee, or Panel on any College matter.
- 3.15 The Board may, by Special Resolution, retain legal counsel to assist the Board on any College matter.

Auditor

- 3.16 The Board must appoint a chartered professional accountant to be the auditor for the College.
- 3.17 The Registrar must:
- (a) deliver the College's financial statements to the auditor within 60 days of the end of each fiscal year; and
 - (b) instruct the auditor to conduct an annual audit of the College's finances.

- 3.18 A copy of the auditor's signed report must be included in the College's annual report under section 18(2) of the Act.
- 3.19 The Board may remove an auditor before expiration of any term of appointment but in such case must, as soon as reasonably possible:
- (a) appoint another auditor for the remainder of the predecessor's appointment, or some other period; and
 - (b) provide written notice to the predecessor auditor of the removal.

Real Property

- 3.20 The Board may only sell, dispose of, mortgage, charge, or encumber any interest the College holds in real property by Special Resolution.

General Meetings

- 3.21 The Board may call a General Meeting of the College to be held:
- (a) in person in British Columbia;
 - (b) by electronic means; or
 - (c) by combination of in person and electronic means, and must set a date and time for any meeting called.
- 3.22 If the Board calls a General Meeting, the Registrar must:
- (a) deliver notice of the meeting to every Registrant at least 30 days before the meeting; and
 - (b) provide 30 days' notice of the meeting to the public on the College website.
- 3.23 The notice of meeting required in Bylaw 3.22 must include:
- (a) date and time of the meeting;
 - (b) location of any in-person meeting; and
 - (c) description of the general nature of the business to be conducted at the meeting.
- 3.24 Any failure to deliver notice of a General Meeting to, or the non-receipt of such notice by, a person entitled to receive notice does not invalidate proceedings at the meeting.
- 3.25 Any General Meeting must include reasonable opportunity for Registrants and the public to ask questions about, and provide feedback on, issues relevant to the duties and objects of the College under section 16 of the Act.

3.26 The Board may establish procedural rules or guidelines in relation to General Meetings.

Report to Registrants and Public

3.27 Starting in 2025, the Board must Publish the annual report to the Minister respecting the College required under section 18(2) of the Act by July 31 of each year.

Remuneration

3.28 The Board may establish policies for Board and Committee Members in relation to:

- (a) remuneration; and
- (b) expense reimbursement.

Patient Relations Program

3.29 The Board must oversee development and administration of the College's patient relations program.

3.30 All patient relations standards, policies, or criteria of, respectively,

- (a) the CDBC for the Designated Health Profession of Dietetics,
- (b) the COTBC for the Designated Health Profession of Occupational Therapy,
- (c) the College of Opticians for the Designated Health Profession of Opticianry;
- (d) the College of Optometrists for the Designated Health Profession of Optometry;
- (e) the CPTBC for the Designated Health Profession of Physical Therapy;
- (f) the CPBC for the Designated Health Profession of Psychology; and
- (g) the CSHBC for the Designated Health Professions of Audiology; Hearing Instrument Dispensing and Speech-Language Pathology,

that were in effect immediately before the Amalgamation Date:

- (i) remain in effect for that Designated Health Profession on and after the Amalgamation Date, unless and until they are amended or repealed, or others are established in their place; and
- (ii) for greater certainty, are deemed to have been established by the Board as patient relations standards, policies, or criteria of the College.

4.0 Committees & Panels

Committees

- 4.1 The following Committees are established:
- (a) Registration Committee;
 - (b) Inquiry Committee;
 - (c) Discipline Committee;
 - (d) Quality Assurance Committee;
 - (e) Professional Practice and Standards Advisory Committee;
 - (f) Finance and Audit Committee;
 - (g) Governance Committee; and
 - (h) Human Resources Committee.
- 4.2 The Board must establish and Publish terms of reference for each Committee in Bylaw 4.1 consistent with the Act and these Bylaws.
- 4.3 The Board may establish task forces, advisory groups or working groups, or similar entities that are not Committees as the Board considers appropriate.
- 4.4 The Board must establish terms of reference for any entity established under Bylaw 4.3, which must include:
- (a) a term of no more than one year unless extended by the Board; and
 - (b) any requirements related to:
 - (i) composition including without limitation those related to any Registrant and non-registrant appointments;
 - (ii) chair and vice chair requirements;
 - (iii) any minimum and maximum size;
 - (iv) term lengths for members and for chair and vice chair offices;
 - (v) quorum and meeting requirements;
 - (vi) resignation and removal provisions; and
 - (vii) duties, powers, and limits on exercise of powers.

Committee Composition

- 4.5 Each of the following Committees consists of at least 21 members:
- (a) Registration Committee;
 - (b) Inquiry Committee;
 - (c) Discipline Committee;
 - (d) Quality Assurance Committee; and
 - (e) Professional Practice and Standards Advisory Committee.
- 4.6 Each Committee in Bylaw 4.5 must include:
- (a) at least two Registrants from each of the Designated Health Professions in the College; and
 - (b) at least three Public Committee Members.
- 4.7 Registrants in the following classes who are in Good Standing are eligible to be appointed to a Committee:
- (a) Dietetics: Full;
 - (b) Dietetics: Non-Practicing;
 - (c) Occupational Therapy: Full;
 - (d) Opticianry: Registered Optician;
 - (e) Opticianry: Registered Contact Lens Fitter;
 - (f) Opticianry: Non-Practising;
 - (g) Optometry: Therapeutic Qualified;
 - (h) Optometry: Non-Therapeutic Qualified;
 - (i) Optometry: Limited;
 - (j) Optometry: Academic;
 - (k) Optometry: Non-Practising;
 - (l) Physical Therapy: Full;
 - (m) Psychology: Registered Psychologist;
 - (n) Psychology: School Psychologist;
 - (o) Audiology: Full;
 - (p) Hearing Instrument Dispensing: Full; and

- (q) Speech-Language Pathology: Full.
- 4.8 Board Members are not eligible for appointment to any Committee in Bylaw 4.5 while sitting on the Board.
- 4.9 Each of the following Committees consists of at least three and no more than five members:
- (a) Finance and Audit Committee;
 - (b) Governance Committee; and
 - (c) Human Resources Committee.
- 4.10 Each Committee in Bylaw 4.9 must include:
- (a) at least one Public Board Member; and
 - (b) at least one Registrant Board Member or Elected Board Member, and may include Registrants and Public Committee Members.
- 4.11 The Finance and Audit Committee must include at least one member with a Chartered Professional Accounting (CPA) designation.

Committee Appointment and Term

- 4.12 Subject to Bylaw 4.13, all Committee Members must be appointed by the Board.
- 4.13 The Registrar is a member of the Professional Practice and Standards Advisory Committee whose membership is not subject to a term limit.
- 4.14 The Board must establish a Committee composition matrix to assist in assessing the needs of Committees leading to appointments.
- 4.15 Unless otherwise specified by the Board, the term of office for all Committee Members is three years.
- 4.16 Committee Members are eligible for reappointment to Committees to a maximum of six consecutive years.
- 4.17 For each Committee, a person who completes six consecutive years of service as a Committee Member is ineligible for reappointment to the same Committee until three years have elapsed since the end of service.
- 4.18 Service on any committee of a Former College does not count towards the limit established in Bylaw 4.16.

- 4.19 Subject to Bylaw 4.20, a person may be appointed to more than one Committee concurrently if otherwise eligible for such appointment.
- 4.20 A person may not be a member of the Discipline Committee and the Inquiry Committee.

Committee Member Resignation and Removal

- 4.21 A person who:
- (a) resigns from office as a Committee Member under Bylaw 4.22; or
 - (b) is removed from office as a Committee Member under Bylaw 4.24,
- is ineligible for reappointment to the same Committee until three years have elapsed from the date of resignation or removal.
- 4.22 A person may resign from office as a Committee Member at any time before the expiry of their term of office by delivering written notice to the Registrar.
- 4.23 A notice of resignation under Bylaw 4.22 is effective:
- (a) on the date specified in the notice, unless withdrawn in writing by the person before such date; or
 - (b) upon receipt by the Registrar if no effective resignation date is indicated.
- 4.24 The Board may by Special Resolution:
- (a) remove a person from the office of chair or vice chair on a Committee or chair of a Panel;
 - (b) remove any Committee Member or Panel member from office; and
 - (c) appoint a replacement for any person removed under this Bylaw.

Committee Chair and Vice-Chair

- 4.25 Subject to Bylaw 4.26, the Board must designate a chair and at least one vice-chair for each Committee from among Committee Members.
- 4.26 The Registrar must designate a chair, which may be the Registrar, and at least one vice-chair for the Professional Practice and Professional Standards Advisory Committee.
- 4.27 For each Committee, the chair must:
- (a) preside at all meetings of the Committee; and

- (b) act in accordance with the requirements and duties of the office of chair of the Committee in support of the proper exercise and performance of the Committee's powers and duties.

4.28 If a Committee chair is absent or unable to act, a vice-chair of the Committee may exercise the powers and must perform the duties of the office of the chair.

4.29 Except for the chair and vice-chair(s) of the Professional Practice and Standards Committee appointed under Bylaw 4.26, the term of office for all chairs and vice chairs is one year, renewable by the Board.

Committee Panels

4.30 The following Committees may meet in Panels, subject to specific requirements in these Bylaws:

- (a) Registration Committee;
- (b) Inquiry Committee;
- (c) Discipline Committee;
- (d) Quality Assurance Committee; and
- (e) Professional Practice and Standards Advisory Committee.

4.31 To establish a Panel of a Committee, the chair of the Committee must:

- (a) appoint Committee Members to the Panel; and
- (b) from the Committee Members appointed to the Panel, name a chair of the Panel.

4.32 All Panels must be comprised of at least three Committee Members and include at least one Public Committee Member.

4.33 All Panels of the Registration Committee, Inquiry Committee, Quality Assurance Committee or Discipline Committee must, if an issue, decision, or exercise of power or duty of the Committee relates to a particular Registrant, include at least one Committee Member who is a Registrant from the same Designated Health Profession of the Registrant to whom the matter relates.

4.34 All Panels of the Registration Committee, Quality Assurance Committee or Professional Practice and Standards Advisory Committee must, if in the Committee chair's opinion a matter requires profession-specific expertise, include at least one Registrant from the Designated Health Profession(s) connected with or affected by the matter at issue.

Committee and Panel Meetings: Quorum

- 4.35 A majority of Committee Members constitutes quorum for meetings of the following Committees, as long as at least one-third of the members in attendance are Public Committee Members:
- (a) Registration Committee;
 - (b) Inquiry Committee; and
 - (c) Discipline Committee.
- 4.36 A majority of Committee Members constitutes quorum for meetings of the following Committees, as long as at least one member in attendance is a Public Committee Member:
- (a) Quality Assurance Committee; and
 - (b) Professional Practice and Standards Advisory Committee.
- 4.37 A majority of Committee Members constitutes quorum for meetings of the following Committees, as long as at least one member in attendance is a Public Board Member:
- (a) Finance and Audit Committee;
 - (b) Governance Committee; and
 - (c) Human Resources Committee.
- 4.38 A quorum for a meeting of any Panel consists of:
- (a) all Panel members if the Panel has three members; and
 - (b) three-quarters of Panel members if the Panel has four members or more, including at least one Public Committee Member.

Committee and Panel Meetings: Procedure

- 4.39 Committee and Panel decisions are made by majority vote.
- 4.40 A Committee or Panel may make a decision by email:
- (a) in the case of a Committee, by majority vote if quorum requirements are met; and
 - (b) in the case of a Panel, by unanimous vote.
- 4.41 Each member of a Committee or Panel has one vote.
- 4.42 Committee and Panel meetings may be held in person, by telephone, by videoconference or in a hybrid manner.

- 4.43 Subject to section 38(3) of the Act, and subject to the authority of a Committee or Panel to invite any person to attend all or part of a meeting, all meetings of Committees and Panels are closed to Registrants and the public.
- 4.44 The chair of a Committee or Panel must ensure that minutes are taken at each meeting of the Committee or Panel and retained on file.
- 4.45 The Board may establish or adopt procedures, policies, guidelines, or rules, consistent with the Act and Bylaws, to govern the activities of and procedures to be followed by Committees.

Committee Powers and Duties: General

- 4.46 A Panel may exercise any power and perform any duty of the Committee under the Act and Bylaws, subject to any procedures, policies, guidelines, or rules established by the Board.
- 4.47 In addition to the powers and duties set out in the Act and Bylaws, the Board may assign additional duties to Committees and Panels and require scheduled reporting to the Board from time to time on any matter.
- 4.48 Committees, task forces, advisory groups, working groups, or similar entities established by the Board under Bylaws 4.1 and 4.3 have the duties and powers established by the Board in their terms of reference.

Committee Powers and Duties: Registration Committee

- 4.49 In addition to the duties and powers of the Registration Committee set out in the Act and Part 6 [*Registration*] of these Bylaws, the Registration Committee must:
- (a) approve any Examinations required under section 20(4.3)(b) of the Act or Part 6 of these Bylaws; and
 - (b) review, assess, and make any recommendations to the Board it deems necessary in relation to requirements for registration and certification under these Bylaws; and
 - (c) at least every two years, review and assess the Committee's terms of reference and make any recommendations to the Board deemed appropriate.

Committee Powers and Duties: Inquiry Committee

- 4.50 In addition to the duties and powers of the Inquiry Committee set out in the Act and Part 11 [*Inspections, Investigations, and Discipline*] of these Bylaws, the Inquiry Committee must at least every two years, review and assess the Committee's terms of reference and make any recommendations to the Board deemed appropriate.

Committee Powers and Duties: Discipline Committee

4.51 In addition to the duties and powers of the Discipline Committee set out in the Act and Part 11 [*Inspections, Investigations, and Discipline*] and Part 12 [*Health Profession Corporations*] of these Bylaws, the Discipline Committee must at least every two years, review and assess the Committee's terms of reference and make any recommendations to the Board deemed appropriate.

Committee Powers and Duties: Quality Assurance Committee

4.52 In addition to the duties and powers of the Quality Assurance Committee under Part 3 of the Act, the Committee is responsible for:

- (a) overseeing the establishment, administration and maintenance of the Quality Assurance Program described in Part 10 [*Quality Assurance*] of these Bylaws; and
- (b) at least every two years, reviewing and assessing the Committee's terms of reference and making any recommendations to the Board deemed appropriate.

Committee Powers and Duties: Professional Practice and Standards Advisory Committee

4.53 The Professional Practice and Standards Advisory Committee:

- (a) must advise the Registrar or the Board, upon request, in relation to:
 - (i) the development, review, and recommendation of standards, limits, and conditions for the practice of a Designated Health Profession, including without limitation standards, limits, and conditions regarding any service or restricted activity identified by regulation;
 - (ii) the development or modification of Standards of Practice, Standards of Professional Ethics, and practice guidance for any Registrant classes; and
 - (iii) the development or modification of standards of practice or ethics in relation to Indigenous reconciliation and Indigenous patient care; and
- (b) must, at least every two years, review and assess the Committee's terms of reference and make any recommendations to the Board deemed appropriate.

Committee Powers and Duties: Finance and Audit Committee

4.54 The Finance and Audit Committee must:

- (a) advise the Board in relation to:

- (i) the needs of the College in regard to financial administration and the financial implications of Board decisions;
 - (ii) enabling the availability of sufficient resources to promote anti-racism and to support eradicating Indigenous-specific racism in the health care system, and to integrate cultural safety and humility into the College's practices, through financial policies and budgetary matters;
 - (iii) financial and audit risk management issues;
 - (iv) the application of legislative, regulatory and other College financial requirements; and
 - (v) financial and budgetary policies;
- (b) ensure the College has an adequate risk management framework;
 - (c) support the Registrar in relation to the development and review of operational and capital budgets;
 - (d) make budget and capital expenditure recommendations to the Board;
 - (e) make recommendations to the Board in relation to annual Fees for Registrants and Fees generally;
 - (f) oversee and report to the Board in relation to College investments;
 - (g) recommend Board Policies essential to the College's financial administration;
 - (h) review and report to the Board on any financial or audit matter referred to it by the Board;
 - (i) serve as a Board resource on matters pertaining to College financial administration, financial risk management and audit; and
 - (j) at least every two years, review and assess the Committee's terms of reference and make any recommendations to the Board deemed appropriate.

Committee Powers and Duties: Governance Committee

4.55 The Governance Committee must:

- (a) Review and recommend competencies that are necessary or desirable for persons to be:
 - (i) elected to the Board or to Board Chair or Board Vice Chair positions; or
 - (ii) appointed to Committees, working groups, task forces and related entities and as chair or vice chair of such entities;
- (b) identify any Board composition or competency gaps and make recommendations to the Board, Nomination Advisory Group and Registrar in relation to any nomination for Board election, including communications seeking nominees;

- (c) review and make recommendations to ensure the College's governance framework and practices advance anti-racism, support the eradication of Indigenous-specific racism in the healthcare system, and integrate cultural safety and humility into the College's practices;
- (d) oversee and report to the Board on Board, Board Member, Committee, and Committee Member evaluations;
- (e) oversee and make Board recommendations in relation to Committee appointments;
- (f) oversee and report to the Board in relation to Board Member orientation and education;
- (g) review and provide Board recommendations in relation to any Board Policy and governance documentation not referred by the Board to another Committee;
- (h) advise the Board in relation to governance issues including governance risk management issues; and
- (i) at least every two years, review and assess the Committee's terms of reference and make any recommendations to the Board deemed appropriate.

Committee Powers and Duties: Human Resources Committee

4.56 The Human Resources Committee must:

- (a) oversee and report to the Board in relation to:
 - (i) Registrar and CEO performance reviews;
 - (ii) Registrar and CEO compensation reviews;
 - (iii) emergency and long-term Registrar and CEO succession planning; and
 - (iv) the overall compensation framework and philosophy of the College.
- (b) make recommendations to the Board in relation to strategic human relations policies and human relations risk management;
- (c) advise the Board in relation to alignment of College human resource policies and practices with regard to:
 - (i) diversity, equity, and inclusion principles; and
 - (ii) advancing anti-racism, and supporting the eradication of Indigenous-specific racism in the healthcare system, and integrating cultural safety and humility into the College's practices; and
- (d) at least every two years, review and assess the Committee's terms of reference and make any recommendations to the Board deemed appropriate.

Powers and Duties in Progress on Amalgamation Date

4.57 For Bylaws 4.58 – 4.59, “Committees” and “Officer” have the same meanings as in Part 2.01 in the Act.

4.58 For the purposes of section 25.06(4) of the Act, the following Committees and Officers are authorized to continue to exercise powers and perform duties that they began to exercise or perform, but did not complete, prior to the Amalgamation Date:

- (a) the registration committees for:
 - (i) College of Dietitians of British Columbia;
 - (ii) College of Occupational Therapists of British Columbia;
 - (iii) College of Opticians of British Columbia;
 - (iv) College of Optometrists of British Columbia;
 - (v) College of Physical Therapists of British Columbia;
 - (vi) College of Psychologists of British Columbia; and
 - (vii) College of Speech and Hearing Health Professionals of British Columbia;
- (b) the inquiry committees for:
 - (i) College of Dietitians of British Columbia;
 - (ii) College of Occupational Therapists of British Columbia;
 - (iii) College of Opticians of British Columbia;
 - (iv) College of Optometrists of British Columbia;
 - (v) College of Physical Therapists of British Columbia;
 - (vi) College of Psychologists of British Columbia; and
 - (vii) College of Speech and Hearing Health Professionals of British Columbia;
- (c) the quality assurance committees for:
 - (i) College of Dietitians of British Columbia;
 - (ii) College of Occupational Therapists of British Columbia;
 - (iii) College of Opticians of British Columbia;
 - (iv) College of Optometrists of British Columbia;
 - (v) College of Physical Therapists of British Columbia;
 - (vi) College of Psychologists of British Columbia; and

- (vii) College of Speech and Hearing Health Professionals of British Columbia;
- (d) an inspector appointed under section 27 of the Act for:
 - (i) College of Dietitians of British Columbia;
 - (ii) College of Occupational Therapists of British Columbia;
 - (iii) College of Opticians of British Columbia;
 - (iv) College of Optometrists of British Columbia;
 - (v) College of Physical Therapists of British Columbia;
 - (vi) College of Psychologists of British Columbia; and
 - (vii) College of Speech and Hearing Health Professionals of British Columbia;
- (e) an assessor appointed under section 26.1 of the Act for:
 - (i) College of Dietitians of British Columbia;
 - (ii) College of Occupational Therapists of British Columbia;
 - (iii) College of Opticians of British Columbia;
 - (iv) College of Optometrists of British Columbia;
 - (v) College of Physical Therapists of British Columbia;
 - (vi) College of Psychologists of British Columbia; and
 - (vii) College of Speech and Hearing Health Professionals of British Columbia.

4.59 The exercise of a power or performance of a duty by a Committee or Officer under Bylaw 4.58 is subject to any limits or conditions imposed or directions given by the Committee or a Panel of that Committee by the applicable Former College for the purpose of facilitating completion of the exercise of the power or performance of the duty.

5.0 College Records

Application to Former Colleges' Information and Records

- 5.1 For greater certainty, this Part applies to information obtained and records generated by the College, and by any of the Former Colleges prior to the Amalgamation Date and that have passed to the College as part of the amalgamation.

Administration of the Freedom of Information and Protection of Privacy Act

- 5.2 The Registrar is the “head” of the College for the purposes of the *Freedom of Information and Protection of Privacy Act*, RSBC 1996, c. 165.
- 5.3 The Registrar may authorize a Deputy Registrar or any other person to exercise any power or perform any duty of the “head” under the *Freedom of Information and Protection of Privacy Act*.
- 5.4 The Registrar must report annually to the Board regarding the steps the College has taken to fulfil its duties under the *Freedom of Information and Protection of Privacy Act*.

Access Request Fees

- 5.5 Subject to section 75 of the *Freedom of Information and Protection of Privacy Act*, the Registrar may require a person who requests access to a College record pursuant to the *Freedom of Information and Protection of Privacy Act* to pay the applicable fees set out in the “Schedule of Maximum Fees” established in the *Freedom of Information and Protection of Privacy Regulation*, B.C. Reg. 155/2012.

Protection of Personal Information

- 5.6 The Registrar must take reasonable measures to ensure that the collection, use, and disclosure of Personal Information by the College complies with the Act, these Bylaws, and the *Freedom of Information and Protection of Privacy Act*.
- 5.7 Before sending Personal Information to any person or service provider for processing, storage or destruction, the Registrar must take reasonable measures to confirm that the person or service provider will maintain the confidentiality of that Personal Information.

Additional Information Required on the Register

- 5.8 For every Former Registrant, the following information must be entered and maintained in the Register for the purpose of section 21(2)(f) of the Act:
- (a) a statement that the person is or is not authorized to practise the Designated Health Profession(s) corresponding to their most recent registration;
 - (b) the date on which the person was first granted registration, including, as applicable, the date of first registration in a Former College;
 - (c) a notation of any certified practice designation granted or cancelled under Part 6 of these Bylaws, or the equivalent provisions of the bylaws of a Former College, and the periods for which it is or was valid;
 - (d) a notation of any unresolved Citation under section 37 of the Act that names the person as a Respondent; and
 - (e) a notation of any review or appeal underway under section 20(4.1), 33(3), 35(5) or 40 of the Act respecting the person, until the final disposition of the review or appeal.
- 5.9 For every Registrant, the following information must be entered and maintained in the Register for the purpose of section 21(2)(f) of the Act:
- (a) all of the information set out in Bylaw 5.8;
 - (b) if the person's business address and business telephone number are that of an employer(s) of the person, the name of the employer(s);
 - (c) a notation of the name of any Health Profession Corporation in which the Registrant is a Designated Registrant, Director, Officer, or Shareholder; and
 - (d) any limit or condition on, or suspension of, the Registrant's practice of a Designated Health Profession, including any limit, condition, or suspension arising as a result of a voluntary undertaking.

Registrar Authority

- 5.10 The Registrar is authorized to act for the purposes of section 22(3) of the Act.
- 5.11 In accordance with section 22(2) of the Act, the Registrar may refuse to grant a person access to a Registrant's business address contained in the Register if the business address is the Registrant's primary residence.

Access to the Register

5.12 The Registrar may make some or all of the information contained in the Register available on the College website.

Retention of Records

5.13 The Registrar must ensure that College records are retained in accordance with any relevant Board Policy.

Disclosure of Registration Status

5.14 If the College receives an inquiry about the registration status of a person, the Registrar:

- (a) must disclose whether the person is a Registrant or a Former Registrant, including a Former Registrant of a Former College;
- (b) must disclose the details of any action taken against the person which attracted public notification under section 39.3 of the Act;
- (c) may disclose, if the person is or was entitled to practice the Designated Health Professions of Dietetics, Audiology, Hearing Instrument Dispensing, or Speech-Language Pathology, whether the person has ever signed a consent order under section 36 of the Act with respect to the applicable Designated Health Profession, and if so, the details of the consent order if it pertains to a change in the person's registration status or a restriction on practice;
- (d) may disclose any other information respecting the person that is set out in the Register as of the date the inquiry is made, unless access to that information is refused under section 22(2) of the Act; and
- (e) must not release information which might reasonably enable a person to identify:
 - (i) a Complainant, patient or client; or
 - (ii) another person, other than the Registrant or Former Registrant, affected by the matter, except with the consent of the Complainant, patient, client or other person.

Disclosure of Information About Health Profession Corporations

5.15 If the College receives an inquiry about a Health Profession Corporation, the Registrar may disclose:

- (a) the legal name of the Health Profession Corporation;
- (b) the names of all shareholders, including any Holding Companies;

- (c) the names of all directors; and
- (d) the name and contact information of the Designated Registrant.

Disclosure of Complaints and Investigations

5.16 Bylaws 5.17 and 5.18 apply to information and records that form part of the assessment or investigation of:

- (a) a complaint under section 32 of the Act;
- (b) a report under section 32.2 to 32.4 of the Act; or
- (c) a matter under section 33(2) or 33(4) of the Act.

5.17 The Registrar may do any of the following in respect of information or a record to which this Bylaw applies:

- (a) disclose the information or record to any person or body or the public, with the consent of the Registrant or Former Registrant who is the subject of the complaint, report or matter;
- (b) disclose the information or record to:
 - (i) another college under the Act; or
 - (ii) any other entity, in British Columbia, another province or a foreign jurisdiction, that regulates a health profession;
- (c) if the complaint, report or matter has become known to the public, disclose to any person or the public:
 - (i) the existence of the assessment or investigation;
 - (ii) a general description of the nature of the complaint, report or matter;
 - (iii) the status of the complaint, report or matter, including, if it is closed, the general basis on which it was closed; and
 - (iv) any additional information necessary to correct material inaccuracies in information that has become known to the public; and
- (d) if a Registrant has given to the Registrar or the Inquiry Committee an undertaking by which the Registrant agrees to a limit or condition on, or a suspension of, the Registrant's practice of a Designated Health Profession during an assessment or investigation or pending a hearing of the Discipline Committee, disclose to any person or the public the fact that the undertaking has been given and its effect on the Registrant's practice.

5.18 If the Inquiry Committee reasonably believes that information or a record to which might be evidence of an offence under the laws of any jurisdiction, the Inquiry Committee may direct the Registrar to disclose the information or record to an appropriate law enforcement agency.

Disclosure of Citations

5.19 Once a Citation has been delivered to the Respondent in accordance with section 37(2) of the Act, the Registrar may disclose the Citation to the public and its status including without limitation whether it has been cancelled or dismissed.

5.20 At least 14 days before the date set for the hearing of a Citation, the Registrar must Publish the Citation accompanied by a notice to the public including:

- (a) the date the Citation was issued;
- (b) the name of the Respondent;
- (c) a basic description of the nature of the matter which is to be the subject of the hearing;
- (d) the date, time and place of the hearing; and
- (e) how a member of the public may attend the hearing, unless an order has been made under section 38(3) of the Act.

5.21 In acting under Bylaws 5.19 and 5.20, the Registrar must not disclose the names or personal health information of Complainants, clients, patients, witnesses, or their families, or information which might otherwise enable the identity of such persons to be established, except with the consent of the person affected.

Additional Notification Where Section 39.3(1) of the Act Applies

5.22 In addition to any notification required under section 39.3 of the Act, the Registrar may notify:

- (a) any entity in any other jurisdiction that regulates the Designated Health Profession of a Registrant or a Health Profession Corporation respecting which the action was taken;
- (b) any other entity, in British Columbia, or any other jurisdiction, that regulates a health profession; or
- (c) any other person who the Registrar reasonably believes may have an interest in the matter.

5.23 Notification provided under Bylaw 5.22:

- (a) must include all information included in the public notification made under section 39.3 of the Act; and

- (b) unless otherwise directed by the Inquiry Committee or the Discipline Committee, may include information that is not otherwise releasable to the public under these Bylaws or that has been withheld from the public notification under section 39.3(3) or 39.3(4) of the Act.

Disclosure of Unauthorized Practice

5.24 The Registrar may Publish or otherwise disclose information related to the unauthorized practice of a Designated Health Profession in British Columbia contrary to section 13 of the Act where:

- (a) the Registrar reasonably believes that unauthorized practice is ongoing and may present a risk to the public;
- (b) a person has signed an undertaking or other document committing not to engage in unauthorized practice; or
- (c) a court order has been issued with respect to the matter.

5.25 The Registrar may Publish or otherwise disclose information related to the unauthorized use of a reserved title in British Columbia contrary to section 12.1 of the Act where:

- (a) the Registrar reasonably believes that unauthorized use of a reserved title is ongoing and may lead to public confusion;
- (b) a person has signed an undertaking or other document committing not to engage in the unauthorized use of a reserved title; or
- (c) a court order has been issued with respect to the matter.

Disposal of Records Containing Personal Information

5.26 The Registrar must take reasonable steps to ensure that a College record containing Personal Information is disposed of only by:

- (a) effectively destroying a physical record by utilizing a shredder or complete burning;
- (b) erasing information recorded or stored by any electronic method in a manner that reasonably prevents the information from being reconstructed;
- (c) transferring the record to the person to whom the information pertains; or
- (d) transferring the record to the Registrant who compiled the information.

Disclosure of Aggregate Data

5.27 The College may compile and disclose to the Ministry of Health, Registrants, other interested stakeholders, or the public aggregate information from the College's records if the Registrar

considers that such compilation, usage, or disclosure would advance the College's duties and objects under section 16 of the Act.

- 5.28 Aggregate information disclosed under Bylaw 5.27 must not include personally identifiable information concerning any individual Registrant or other identifiable individual.

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6.0 Registration

Classes of Registrants

- 6.1 The following classes of Registrants are established for the Designated Health Profession of Dietetics:
- (a) Dietetics: Full;
 - (b) Dietetics: Emergency;
 - (c) Dietetics: Temporary; and
 - (d) Dietetics: Non-Practicing.
- 6.2 The following classes of Registrants are established for the Designated Health Profession of Occupational Therapy:
- (a) Occupational Therapy: Full;
 - (b) Occupational Therapy: Provisional;
 - (c) Occupational Therapy: Temporary; and
 - (d) Occupational Therapy: Non-Practising.
- 6.3 The following classes of Registrants are established for the Designated Health Profession of Opticianry:
- (a) Opticianry: Registered Optician;
 - (b) Opticianry: Registered Contact Lens Fitter;
 - (c) Opticianry: Temporary; and
 - (d) Opticianry: Non-Practising.
- 6.4 The following classes of Registrants are established for the Designated Health Profession of Optometry:
- (a) Optometry: Therapeutic Qualified;
 - (b) Optometry: Non-Therapeutic Qualified;
 - (c) Optometry: Limited;
 - (d) Optometry: Academic; and
 - (e) Optometry: Non-Practising.

- 6.5 The following classes of Registrants are established for the Designated Health Profession of Physical Therapy:
- (a) Physical Therapy: Full;
 - (b) Physical Therapy: Student; and
 - (c) Physical Therapy: Temporary.
- 6.6 The following classes of Registrants are established for the Designated Health Profession of Psychology:
- (a) Psychology: Registered Psychologist;
 - (b) Psychology: Associate Psychologist (corrections);
 - (c) Psychology: School Psychologist;
 - (d) Psychology: Psychology Assistant;
 - (e) Psychology: Temporary (supervised);
 - (f) Psychology: Temporary (visitor);
 - (g) Psychology: Temporary (emergency); and
 - (h) Psychology: Non-Practising.
- 6.7 The following classes of Registrants are established for the Designated Health Professions of Audiology, Hearing Instrument Dispensing, and Speech Language Pathology:
- (a) Audiology: Full;
 - (b) Audiology: Conditional;
 - (c) Audiology: Temporary;
 - (d) Audiology: Non-Practising;
 - (e) Hearing Instrument Dispensing: Full;
 - (f) Hearing Instrument Dispensing: Conditional;
 - (g) Hearing Instrument Dispensing: Temporary;
 - (h) Hearing Instrument Dispensing: Non-Practising;
 - (i) Speech-Language Pathology: Full;
 - (j) Speech-Language Pathology: Conditional;
 - (k) Speech-Language Pathology: Temporary; and
 - (l) Speech-Language Pathology: Non-Practising.

Status of Registrant Classes upon Amalgamation

- 6.8 For the purposes of sections 25.07(1)(a) and 25.07(3)(a) of the Act, a person who, as of the Amalgamation Date, was a registrant of a Former College in a Former Class of Registration is deemed on the Amalgamation Date to be a Registrant of the College in the applicable Current Class of Registration set out in Schedule 9.

Registration Applications

- 6.9 Every Applicant must:
- (a) deliver an application to the Registrar in the form and manner specified by the Registrar for the Registrant class in which the person is seeking registration; and
 - (b) make payment of the Fee required as set out in Schedule 1, including any Fees for Examinations.

Registration Requirements: General

- 6.10 For the purposes of these Bylaws and Section 20(2) of the Act:
- (a) the conditions and requirements for registration, renewal, reinstatement, Examinations, and professional liability insurance for all Designated Health Professions are prescribed in Schedules 2 through 8; and
 - (b) every Registrant or Applicant must satisfy all applicable requirements as set out in the Schedule applying to the Designated Health Profession for such class.

Registration Requirements by Designated Health Profession

Dietetics

- 6.11 The conditions and requirements for registration for all classes in the Designated Health Profession of Dietetics are prescribed in Schedule 2.

Occupational Therapy

- 6.12 The conditions and requirements for registration for all classes in the Designated Health Profession of Occupational Therapy are prescribed in Schedule 3.

Opticianry

- 6.13 The conditions and requirements for registration for all classes in the Designated Health Profession of Opticianry are prescribed in Schedule 4.

Optometry

- 6.14 The conditions and requirements for registration for all classes in the Designated Health Profession of Optometry are prescribed in Schedule 5.

Physical Therapy

- 6.15 The conditions and requirements for registration for all classes in the Designated Health Profession of Physical Therapy are prescribed in Schedule 6.

Psychology

- 6.16 The conditions and requirements for registration for all classes in the Designated Health Profession of Psychology are prescribed in Schedule 7.

Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology

- 6.17 The conditions and requirements for registration for all classes in the Designated Health Professions of Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology are prescribed in Schedule 8.

- 6.18 Unless otherwise addressed in these Bylaws, all matters related to Examinations are prescribed:

- (a) in Schedule 2, for the Designated Health Profession of Dietetics;
- (b) in Schedule 3, for the Designated Health Profession of Occupational Therapy;
- (c) in Schedule 4, for the Designated Health Profession of Opticianry;
- (d) in Schedule 5, for the Designated Health Profession of Optometry;
- (e) in Schedule 6, for the Designated Health Profession of Physical Therapy;
- (f) in Schedule 7, for the Designated Health Profession of Psychology; and
- (g) in Schedule 8, for the Designated Health Professions of Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology.

Publication of Registration Requirements

- 6.19 The Registrar must maintain and Publish information for each Registrant class setting out:
- (a) the forms and information required under these bylaws to be completed or included with a registration, renewal, or reinstatement application;
 - (b) the Fees for application, Examination, registration, renewal, or reinstatement payable under these Bylaws; and

- (c) the manner of delivery of applications to the Registrar for registration, renewal, or reinstatement as required in Bylaw 6.9.

Confirmation of Registration

- 6.20 Subject to Bylaw 6.23, the Registrar must enable Registrants to obtain a Confirmation of Registration.
- 6.21 For the purposes of confirming registration status to third parties, including any requirements related to such status in these Bylaws, Registrants may obtain and use their Confirmation of Registration.
- 6.22 A Confirmation of Registration must specify:
 - (a) the class in which the Registrant has been granted registration;
 - (b) the expiration date of registration; and
 - (c) any limits and conditions that:
 - (i) apply to Registrants of that class in the practice of their Designated Health Profession; or
 - (ii) were imposed on the Registrant's practice under section 20(2.1) or (3) of the Act.
- 6.23 For all purposes related to Confirmation of Registration requirements in these Bylaws, the Registrar may deem:
 - (a) any certificate of registration or similar record issued by a Former College; or
 - (b) any other record produced by the College to confirm a Registrant's registration status, as equivalent to a Confirmation of Registration for that Registrant.
- 6.24 Any requirements related to the display, posting, or return to the College of a Confirmation of Registration or equivalent record as described in Bylaw 6.23 for any class of Registrants are prescribed in Schedules 11- 17.

Registration Renewal

- 6.25 The conditions and requirements for renewal of registration for any class of Registrants for any Designated Health Profession are prescribed:
 - (a) in Schedule 2, for the Designated Health Profession of Dietetics;
 - (b) in Schedule 3, for the Designated Health Profession of Occupational Therapy;
 - (c) in Schedule 4, for the Designated Health Profession of Opticianry;

- (d) in Schedule 5, for the Designated Health Profession of Optometry;
- (e) in Schedule 6, for the Designated Health Profession of Physical Therapy;
- (f) in Schedule 7, for the Designated Health Profession of Psychology; and
- (g) in Schedule 8, for the Designated Health Professions of Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology.

Registration Reinstatement

- 6.26 The conditions and requirements for reinstatement of registration for any class of Registrants for any Designated Health Profession are prescribed:
- (a) in Schedule 2, for the Designated Health Profession of Dietetics;
 - (b) in Schedule 3, for the Designated Health Profession of Occupational Therapy;
 - (c) in Schedule 4, for the Designated Health Profession of Opticianry;
 - (d) in Schedule 5, for the Designated Health Profession of Optometry;
 - (e) in Schedule 6, for the Designated Health Profession of Physical Therapy;
 - (f) in Schedule 7, for the Designated Health Profession of Psychology; and
 - (g) in Schedule 8, for the Designated Health Professions of Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology.

Professional Liability Insurance

- 6.27 All matters relating to professional liability insurance requirements, including without limitation obtaining, maintaining, and providing proof of coverage, for any class of Registrants for any Designated Health Profession are prescribed:
- (a) in Schedule 2, for the Designated Health Profession of Dietetics;
 - (b) in Schedule 3, for the Designated Health Profession of Occupational Therapy;
 - (c) in Schedule 4, for the Designated Health Profession of Opticianry;
 - (d) in Schedule 5, for the Designated Health Profession of Optometry;
 - (e) in Schedule 6, for the Designated Health Profession of Physical Therapy;
 - (f) in Schedule 7, for the Designated Health Profession of Psychology; and
 - (g) in Schedule 8, for the Designated Health Professions of Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology.

Status of Applications Upon Amalgamation

6.28 For the purposes of sections 25.07(2) and 25.07(3)(b) of the Act, a person who, before the Amalgamation Date, applied for registration with a Former College in a Former Class of Registration but whose application, as of the Amalgamation Date, had not been granted or refused is deemed to have applied to the College for registration in the applicable Current Class of Registration set out in Schedule 9.

Examinations and Registration Committee and Registrar Policies in Effect on Amalgamation

- 6.29 All examinations, policies, and criteria related to registration of registrants established by a registration committee, board, or registrar for each of the Former Colleges that were in effect immediately before the Amalgamation Date:
- (a) remain in effect for the Designated Health Profession(s) regulated by each of the Former Colleges on and after the Amalgamation Date, unless and until amended or repealed, or others established in their place including through these Bylaws; and
 - (b) for greater certainty, are deemed to have been validly established by the Board, Registration Committee, or Registrar of the College, as the case may be.

Multi-Jurisdictional Registration

- 6.30 The Board may enter into agreements with health profession regulators in other Canadian jurisdictions, consistent with applicable law and these Bylaws, to facilitate Multi-Jurisdictional Registration for any Designated Health Profession.
- 6.31 The College may establish, by Bylaw, Registrant classes to enable Multi-Jurisdictional Registration in any Designated Health Profession.
- 6.32 Consistent with the requirements of the Act, Bylaws established in relation to Multi-Jurisdictional classes may differ as between other classes within a Designated Health Profession and as between Designated Health Professions.

7.0 Titles

Use of Titles by Designated Health Profession

Dietetics

- 7.1 Registrants in the Designated Health Profession of Dietetics may use the title or titles corresponding to their Registrant class below:
- (a) Dietetics: Full Registrants may use “Dietitian” or “Registered Dietitian” and the initials “RD”;
 - (b) Dietetics: Emergency Registrants may use “Dietitian-Emergency”, “Registered Dietitian-Emergency” and the initials “RD(E)”;
 - (c) Dietetics: Temporary Registrants may use “Dietitian-Temporary”, “Registered Dietitian-Temporary” and the initials “RD(T)”;
 - (d) Dietetics: Non-Practicing Registrants may use “Dietitian-Non-Practicing”, “Registered Dietitian-Non-Practicing” and the initials “RD(NP)”.

Occupational Therapy

- 7.2 Registrants in the Designated Health Profession of Occupational Therapy may use the title or titles corresponding to their Registrant class below:
- (a) Occupational Therapy: Full, Temporary, and Provisional Registrants may use “occupational therapist”, “registered occupational therapist”, “Reg. OT”, “Registered Occupational Therapy, (BC)”, or “Reg.OT (BC)”.

Opticianry

- 7.3 Registrants in the Designated Health Profession of Opticianry may use the title or titles corresponding to their Registrant class below:
- (a) Opticianry: Registered Optician Registrants may use “optician”, and “dispensing optician”, alone or in conjunction with the term “registered” or “licensed”, and may use the initials “LO”, or “RO”;
 - (b) Opticianry: Registered Contact Lens Fitter Registrants may use “optician”, “dispensing optician”, and “contact lens fitter”, alone or in conjunction with the term “registered” or “licensed” and may use the initials “LO” or “RO”;
 - (c) Opticianry: Temporary Registrants may use “optician”, “dispensing optician”, and “contact lens fitter” if registered in that class, alone or in conjunction with the term “registered” or “licensed”, and may use the initials “LO” or “RO”, but only in conjunction with the term “temporary”; and

- (d) Opticianry: Non-Practising Registrants may use “optician”, “dispensing optician”, and “contact lens fitter” if registered in that class, alone or in conjunction with the term “registered” or “licensed”, and may use the initials “LO” or “RO”, but only in conjunction with the term “non-practising”.

Optometry

- 7.4 Registrants in the Designated Health Profession of Optometry may use the title or titles corresponding to their Registrant class below:
- (a) Optometry: Therapeutic Qualified; Non-Therapeutic Qualified; Limited; and Academic Registrants may use “optometrist” and “doctor of optometry”; and
- (b) Optometry: Non-Practising Registrants may use “optometrist” and “doctor of optometry” but only in conjunction with the term “non-practising”.

Physical Therapy

- 7.5 Registrants in the Designated Health Profession of Physical Therapy may use the title or titles corresponding to their Registrant class below:
- (a) Physical Therapy: Full and Temporary Registrants may use any of the following titles:
- (i) “physical therapist”; and
- (ii) “physiotherapist”; or
- (iii) an abbreviation of one of those terms, alone or in conjunction with the term “registered”; and
- (b) Physical Therapy: Student Registrants may use “student physical therapist” or “student physiotherapist”.

Psychology

- 7.6 Registrants in the Designated Health Profession of Psychology may use the title or titles corresponding to their Registrant class below:
- (a) Psychology: Registered Psychologist Registrants
- (i) may use the titles “psychologist”, and “registered psychologist” and the abbreviation “R.Psych.”; and
- (ii) may use the title “school psychologist” if practising school psychology as described in Table 4 in Schedule 7;
- (b) Psychology: Associate Psychologist (corrections) Registrants may use the titles “associate psychologist (corrections)” and “associate psychologist in corrections psychology”;

- (c) Psychology: School Psychologist Registrants may use the titles “school psychologist”, and “licensed school psychologist” and the abbreviation “L.Sch.Psych.”;
- (d) Psychology: Psychology Assistant Registrants may use the title “psychology assistant”;
- (e) Psychology: Temporary (supervised) Registrants may use the titles “supervised psychologist” and “registered supervised psychologist”;
- (f) Psychology: Temporary (visitor) Registrants may use the titles “visiting psychologist” and “registered visiting psychologist”;
- (g) Psychology: Temporary (emergency) Registrants may use the title “temporary emergency psychologist”; and
- (h) Psychology: Non-Practising Registrants may use a title authorized in subparagraphs (a)-(d) if previously registered in the applicable class, but only if immediately followed by the term:
 - (i) “(non-practising)” or “(retired)”;
 - (ii) “(out of province)”, if the Registrant:
 - (1) holds current registration or licensure in another Canadian jurisdiction, or another jurisdiction acceptable to the Registration Committee as the equivalent of a member of the applicable class; and
 - (2) has provided evidence satisfactory to the Registration Committee of their registration or licensure referred to in subparagraph (h)(ii)(1).

Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology

7.7 Registrants in the Designated Health Professions of Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology may use the title or titles corresponding to their Registrant class below:

- (a) Audiology: Full Registrants may use “audiologist” if the term “registered” is used before the title;
- (b) Audiology: Conditional Registrants may use “audiologist” if followed by the term “conditional” in brackets;
- (c) Audiology: Temporary Registrants may use “audiologist” if followed by the term “temporary” in brackets;
- (d) Audiology: Non-Practising Registrants may use “audiologist” if followed by the term “non-practising” in brackets;
- (e) Hearing Instrument Dispensing: Full Registrants may use “hearing instrument practitioner” if the term “registered” is used before the title;

- (f) Hearing Instrument Dispensing: Conditional Registrants may use “hearing instrument practitioner” if followed by the term “conditional” in brackets;
 - (g) Hearing Instrument Dispensing: Temporary Registrants may use “hearing instrument practitioner” if followed by the term “temporary” in brackets;
 - (h) Hearing Instrument Dispensing: Non-Practising Registrants may use “hearing instrument practitioner” if followed by the term “non-practising” in brackets;
 - (i) Speech-Language Pathology: Full Registrants may use “speech-language pathologist” and “speech therapist” if the term “registered” is used before the title;
 - (j) Speech-Language Pathology: Conditional Registrants may use “speech-language pathologist” and “speech therapist” if followed by the term “conditional” in brackets;
 - (k) Speech-Language Pathology: Temporary Registrants may use “speech-language pathologist” and “speech therapist” if followed by the term “temporary” in brackets; and
 - (l) Speech-Language Pathology: Non-Practising Registrants may use “speech-language pathologist” and “speech therapist” if followed by the term “non-practising” in brackets.
- 7.8 Unless expressly authorized in these Bylaws, or by Regulation, Registrants are not permitted to:
- (a) use a title referenced in this Part;
 - (b) use a similar title, abbreviation, or derivative of a title referenced in this Part; or
 - (c) use any other titles, abbreviations or derivatives.
- 7.9 A Registrant entitled to use an academic or educational designation that is identical or similar to any title in these Bylaws may do so if such use conforms with any standards, limits or conditions applicable to the person’s Registrant class.
- 7.10 Registrants must not use the term “specialist” or any similar designation, reference, or abbreviation that suggests specialized status, accreditation, or practice.

8.0 Certified Practice

Certified Practice

- 8.1 All matters related to the certified practice of the Designated Health Professions of Opticianry, Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology, are prescribed in Schedule 10.
- 8.2 Registrants who are not authorized to practise in a certified practice must not perform the activities specified as part of a certified practice or hold themselves out as being authorized to so practice, including use of the term “certified” or similar designation, reference or abbreviation.

Certified Practice Upon Amalgamation

- 8.3 A Registrant who held certification for independent automated refraction issued by the College of Opticians of British Columbia as of the Amalgamation Date is deemed to continue to hold that certification on the Amalgamation Date as if it had been issued by the Registrar in accordance with Schedule 10.
- 8.4 A Registrant who held a certification for any certified practice issued by the College of Speech and Hearing Health Professionals of British Columbia as of the Amalgamation Date is deemed to continue to hold that certification on the Amalgamation Date as if it had been issued by the Registrar in accordance with Schedule 10.

9.0 Professional Responsibilities

Standards of Practice and Standards of Professional Ethics

- 9.1 All Standards of Practice and all Standards of Professional Ethics of, respectively,
- (a) the CDBC for the Designated Health Profession of Dietetics;
 - (b) the COTBC for the Designated Health Profession of Occupational Therapy;
 - (c) the College of Opticians for the Designated Health Profession of Opticianry;
 - (d) the College of Optometrists for the Designated Health Profession of Optometry;
 - (e) the CPTBC for the Designated Health Profession of Physical Therapy;
 - (f) the CPBC for the Designated Health Profession of Psychology; and
 - (g) the CSHBC for the Designated Health Professions of Audiology; Hearing Instrument Dispensing and Speech-Language Pathology,
- that were in effect immediately before the Amalgamation Date:
- (i) remain in effect for that Designated Health Profession on and after the Amalgamation Date, unless and until they are amended or repealed, or others are established in their place, and
 - (ii) for greater certainty, are deemed to have been established by the Board as Standards of Practice or Standards of Professional Ethics of the College.
- 9.2 Registrants must conduct themselves in accordance with all Standards of Practice and all Standards of Professional Ethics established for their Registrant class, including but not limited to those prescribed in:
- (a) Schedule 11 for all classes of Registrants in the Designated Health Profession of Dietetics;
 - (b) Schedule 12 for all classes of Registrants in the Designated Health Profession of Occupational Therapy;
 - (c) Schedule 13 for all classes of Registrants in the Designated Health Profession of Opticianry;
 - (d) Schedule 14 for all classes of Registrants in the Designated Health Profession of Optometry;
 - (e) Schedule 15 for all classes of Registrants in the Designated Health Profession of Physical Therapy;

- (f) Schedule 16 for all classes of Registrants in the Designated Health Profession of Psychology; and
- (g) Schedule 17 for all classes of Registrants in the Designated Health Professions of Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology.

Advertising and Marketing

- 9.3 Registrants must comply with the restrictions and requirements for advertising and marketing prescribed in:
- (a) Schedule 11 for all classes of Registrants in the Designated Health Profession of Dietetics;
 - (b) Schedule 12 for all classes of Registrants in the Designated Health Profession of Occupational Therapy;
 - (c) Schedule 13 for all classes of Registrants in the Designated Health Profession of Opticianry;
 - (d) Schedule 14 for all classes of Registrants in the Designated Health Profession of Optometry;
 - (e) Schedule 15 for all classes of Registrants in the Designated Health Profession of Physical Therapy;
 - (f) Schedule 16 for all classes of Registrants in the Designated Health Profession of Psychology; and
 - (g) Schedule 17 for all classes of Registrants in the Designated Health Professions of Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology.

Privacy and Record-Keeping

- 9.4 Registrants must ensure that their collection, protection, use, disclosure, and disposal of Personal Information meets the requirements of all privacy statutes applicable to the practice of their Designated Health Profession including, without limitation,
- (a) the *Personal Information Protection Act*; and
 - (b) the *Freedom of Information and Protection of Privacy Act*.
- 9.5 Registrants must comply with the restrictions and requirements for record-keeping prescribed in:
- (a) Schedule 11 for all classes of Registrants in the Designated Health Profession of Dietetics;

- (b) Schedule 12 for all classes of Registrants in the Designated Health Profession of Occupational Therapy;
- (c) Schedule 13 for all classes of Registrants in the Designated Health Profession of Opticianry;
- (d) Schedule 14 for all classes of Registrants in the Designated Health Profession of Optometry;
- (e) Schedule 15 for all classes of Registrants in the Designated Health Profession of Physical Therapy;
- (f) Schedule 16 for all classes of Registrants in the Designated Health Profession of Psychology; and
- (g) Schedule 17 for all classes of Registrants in the Designated Health Professions of Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology.

Delegation, Supervision and Authorization

9.6 Registrants must comply with any restrictions and requirements for delegation, supervision and authorization, including any requirements prescribed in:

- (a) Schedule 11 for all classes of Registrants in the Designated Health Profession of Dietetics;
- (b) Schedule 12 for all classes of Registrants in the Designated Health Profession of Occupational Therapy;
- (c) Schedule 13 for all classes of Registrants in the Designated Health Profession of Opticianry;
- (d) Schedule 14 for all classes of Registrants in the Designated Health Profession of Optometry;
- (e) Schedule 15 for all classes of Registrants in the Designated Health Profession of Physical Therapy;
- (f) Schedule 16 for all classes of Registrants in the Designated Health Profession of Psychology; and
- (g) Schedule 17 for all classes of Registrants in the Designated Health Professions of Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology.

Duty to Respond to College

9.7 In addition to the duty to cooperate in Bylaws 11.6 and 11.7, Registrants must respond promptly to any College communication requiring a response.

10.0 Quality Assurance

Quality Assurance in Effect on Amalgamation

10.1 All continuing competence, continuing education, and Quality Assurance Program standards, policies or criteria of, respectively,

- (a) the CDBC for the Designated Health Profession of Dietetics;
- (b) the COTBC for the Designated Health Profession of Occupational Therapy;
- (c) the College of Opticians for the Designated Health Profession of Opticianry;
- (d) the College of Optometrists for the Designated Health Profession of Optometry;
- (e) the CPTBC for the Designated Health Profession of Physical Therapy;
- (f) the CPBC for the Designated Health Profession of Psychology; and
- (g) the CSHBC for the Designated Health Professions of Audiology, Hearing Instrument Dispensing and Speech-Language Pathology,

that were in effect immediately before the Amalgamation Date:

- (i) remain in effect for that Designated Health Profession on and after the Amalgamation Date, unless and until they are amended or repealed, or others are established in their place; and
- (ii) for greater certainty, are deemed to have been established by the Board as Quality Assurance Program standards, policies or criteria of the College.

Quality Assurance Requirements for Designated Health Professions

10.2 Except as otherwise specified in these Bylaws, all requirements in relation to continuing competence, continuing education and Quality Assurance Programs are prescribed:

- (a) for the Designated Health Profession of Dietetics, in Schedule 18;
- (b) for the Designated Health Profession of Occupational Therapy, in Schedule 19;
- (c) for the Designated Health Profession of Opticianry, in Schedule 20;
- (d) for the Designated Health Profession of Optometry, in Schedule 21;
- (e) for the Designated Health Profession of Physical Therapy, in Schedule 22;
- (f) for the Designated Health Profession of Psychology, in Schedule 23; and
- (g) for the Designated Health Professions of Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology, in Schedule 24.

11.0 Inspections, Investigations, and Discipline

Authority of Registrar

11.2 The Registrar is authorized to act under section 32(3) of the Act.

Complaints

11.3 The Registrar must offer all reasonable assistance to a person who wishes to make a complaint about a Registrant in writing but is not readily able to do so.

11.4 Where there is more than one Complaint which concern the same Registrant, the Registrar or the Inquiry Committee, as applicable, may consider them together for any purpose under the Act.

11.5 Where a single Complaint concerns more than one Registrant, the Registrar or the Inquiry Committee, as applicable, may consider it as more than one separate complaint each relating to a different Registrant.

11.6 Where a single Complaint concerns a Registrant with respect to more than one Designated Health Profession, the Registrar or the Inquiry Committee, as applicable, may consider it as more than one separate Complaint each relating to the practice of one Designated Health Profession.

Duty to Cooperate

11.7 A Registrant must cooperate fully in the investigation or assessment of a Complaint by all available means, including, without limitation, responding fully and substantively, in the form specified by an Inspector, the Registrar or the Inquiry Committee:

- (a) to the Complaint; and
- (b) to all requests made during the course of an assessment or investigation.

11.8 A Registrant who is requested or required to do anything under Bylaw 11.8 or Bylaw 11.9 must comply:

- (a) in the case of information or a record, even if the information or record is confidential; and
- (b) as soon as practicable and, in any event, by the date and time set by the Registrar, an Inspector or the Inquiry Committee.

Additional Powers of Investigation

11.9 The Registrar, an Inspector, or the Inquiry Committee may do any of the following in assessing or investigating a Complaint:

- (a) require a Registrant to produce, for inspection, examination or copying:
 - (i) any equipment or materials used by the Registrant in connection with the practice of a Designated Health Profession; and/or
 - (ii) any records within the Registrant's possession or control that relate to the Registrant's practice of a Designated Health Profession or any other matter being investigated, including, without limitation, financial and communication records;
- (b) require a Registrant to:
 - (i) attend for an interview by the Registrar, an Inspector, or the Inquiry Committee at a time and place set by the Registrar, Inspector, or the Inquiry Committee; and
 - (ii) answer questions in writing or otherwise provide information relating to any matter being assessed or investigated; and
- (c) require a Registrant to provide the identity and contact information of the Registrant's employees, employers, contractors, or supervisors, if any.

11.10 The powers under Bylaw 11.8 may be exercised with respect to any Registrant who may have information that is relevant to the matters being assessed or investigated.

Limits on Inspector Observing Registrant

11.11 An Inspector must not observe a Registrant while the Registrant is providing a service to a patient or client unless:

- (a) the consent of the patient or client being treated has been obtained in advance; or
- (b) the service is being provided in a setting that is not private.

Delivery of Registrant's Response to Complainant

11.12 The Registrar may deliver to the Complainant, if any, a copy or summary of any response received from the Registrant, subject to any direction from the Inquiry Committee.

11.13 Before acting under Bylaw 11.11, the Registrar may request that the Complainant provide an undertaking satisfactory to the Registrar that the Complainant will preserve confidentiality with respect to all information or records disclosed under Bylaw 11.11 and will use such information only for the purpose of the process under the Act.

Extraordinary Action to Protect the Public

11.14 The Inquiry Committee may determine the process and procedure for considering whether to take action under section 35 of the Act, including:

- (a) whether a proceeding should be conducted in writing, in person, by electronic means, or some combination of those methods;
- (b) the timing for the proceeding, including, if applicable, the notice to the Registrant and the time available to the Registrant to respond; and
- (c) the information the Inquiry Committee will receive and consider.

Consideration of Past Action

11.15 For the purposes of section 39.2 of the Act, the Registrar, Inquiry Committee, and Discipline Committee may consider any action previously taken under Part 3 of the Act respecting a Registrant by the Registrar, Inquiry Committee, or Discipline Committee of a Former College prior to the Amalgamation Date.

Undertakings and Consents

11.16 The record of an undertaking or consent given under section 36 of the Act, a consent order under section 37.1 of the Act, or an agreement under section 32.2(4)(b) or 32.3(3)(b) of the Act must as applicable:

- (a) include any consent to a reprimand or any other action made by the Registrant under section 32.2(4)(b), 32.3(3)(b), 36, or 37.1 of the Act;
- (b) include any undertaking made by the Registrant under section 36 of the Act; and
- (c) specify the period of time, whether fixed or indeterminate, that any action, limit or condition, or undertaking or consent is binding on the Registrant.

Citations

11.17 Before the issuance of a Citation in respect of a Complaint or other matter, the Inquiry Committee may direct the Registrar to join one or more Complaints or other matters which are to be the subject of a hearing in one Citation.

11.18 After the issuance of a Citation or Citations, the Discipline Committee may direct the Registrar to:

- (a) join one or more Complaints or other matters which are to be the subject of a hearing; or
- (b) sever one or more Complaints or other matters which are to be the subject of a hearing.

11.19 A Citation may be amended:

- (a) by the Registrar prior to the commencement of a hearing; and
- (b) by the Discipline Committee on application by a party after the commencement of a hearing.

11.20 If a Citation is amended under Bylaw 11.18(a), the amended Citation must be delivered to the Respondent by personal service or sent by registered mail to the Respondent at the last address recorded in the Register as required under section 21(2) of the Act at least 30 days before the date of the hearing, unless otherwise agreed to by the Respondent.

11.21 If a Citation is amended under Bylaw 11.18(a), and the amended Citation changes the date, time or place of the hearing, the Registrar must notify any Complainant of the amendment at least 14 days before the date of the hearing.

Pre-hearing Conference

11.22 At any time before the commencement of a hearing in respect of a Citation, on its own motion or on the request of the Respondent or the College, the Discipline Committee may direct the parties to attend a pre-hearing conference.

11.23 A pre-hearing conference must be presided over by a Panel of the Discipline Committee, which Panel may, but need not, include some or all of the members of a Panel that may preside over the hearing.

11.24 No member of a Panel is seized of a matter only because they presided over a pre-hearing conference.

11.25 A pre-hearing conference under this heading must be held in private unless the Panel directs otherwise.

11.26 A Panel may make procedural orders with respect to the conduct of a pre-hearing conference as it determines appropriate, including:

- (a) after consultation with the parties, setting the time and place for a pre-hearing conference;
- (b) directing that a pre-hearing conference be conducted in-person, by telephone, or by electronic means; and
- (c) requiring the parties to provide the Panel, and the other party, with advance notice of any items they intend to raise at the pre-hearing conference.

11.27 A pre-hearing conference may proceed in the absence of the Respondent if the Panel is satisfied that reasonable notice of the pre-hearing conference was delivered to the Respondent.

11.28 At a pre-hearing conference, a Panel may make an order:

- (a) fixing or changing the date, time and place for the hearing;
- (b) directing that some or part of the hearing should be in private under section 38(3) of the Act;
- (c) making a direction under section 38(4.2)(c) of the Act;
- (d) for attendance and/or production under section 38(6) of the Act;
- (e) for the discovery and production of information or records relevant to the Citation;
- (f) respecting applications for joinder or severance of one or more matters which are to be the subject of a hearing; and
- (g) respecting any other matters that may aid in the disposition of the Citation or in promoting an orderly hearing.

11.29 If any orders are made at a pre-hearing conference where the Respondent was not in attendance, the Registrar must promptly send written notice of all such orders by registered mail to the Respondent's last address recorded in the Register.

11.30 If the Discipline Committee issues an order under section 38(6) of the Act at any time before a hearing, the party who sought the order must promptly deliver it to any person affected by it by personal service or registered mail.

Hearings of the Discipline Committee

11.31 A hearing must be presided over by a Panel of the Discipline Committee.

11.32 Subject to Bylaw 11.22, no member of the Discipline Committee may preside over the hearing of a matter in which that member has had any prior involvement.

11.33 All hearings must be recorded and any person may obtain, at their expense, a transcript of any part of the hearing which they were entitled to attend.

11.34 If a person seeks a transcript with respect to a part of a hearing they were entitled to attend but that was not open to the public, the Registrar may require the person to provide the Registrar with an undertaking to preserve confidentiality of the transcript relating to all portions of the hearing that were not open to the public.

11.35 If, by a mechanical or human failure or other accident, the transcript or audio record of a hearing is destroyed, interrupted or incomplete, the validity of the hearing is not affected.

11.36 If, after a hearing has commenced but before the Discipline Committee has rendered its decision under section 39(1) or 39(2) of the Act, a member of a Panel that was hearing the matter resigns from the Discipline Committee or is otherwise unable to continue:

- (a) the loss of that Panel member does not halt the proceedings and the remaining Panel members may proceed as if the Panel had remained intact and constituted in accordance with these Bylaws; and
- (b) the Chair of the Discipline Committee may appoint a replacement Panel member if the Respondent agrees to the appointment.

Fines

11.37 The maximum amount of a fine that may be ordered by the Discipline Committee under section 39 of the Act is \$100,000.

Costs

11.38 The tariff of costs set out in Schedule 25 to partially indemnify the College for investigations under section 33 of the Act is established pursuant to section 19(1)(v.1) of the Act.

11.39 The tariff of costs set out in Schedule 26 to partially indemnify parties for their expenses incurred in the preparation for and conduct of hearings under section 38 of the Act is established pursuant to section 19(1)(v.1) of the Act.

11.40 Any costs awarded by the Inquiry Committee under section 33(7) of the Act or in accordance with a proposal under section 37.1 of the Act, or by the Discipline Committee under section 39(4) or (5) of the Act, must be assessed by the applicable Committee with reference to Schedules 25 and 26 and the applicable tariff of costs set out therein.

11.41 For the purposes of these Bylaws, each of the following is deemed to be a debt that a Registrant owes to the College:

- (a) costs awarded against the Registrant by the Inquiry Committee under section 33(7) of the Act;
- (b) costs ordered against the Registrant by the Inquiry Committee under section 37.1 of the Act;
- (c) costs awarded against the Registrant by the Discipline Committee under section 39(5) of the Act;

- (d) a fine consented to by the Registrant in a resolution under section 36 or 37.1 of the Act; and
- (e) a fine ordered against the Registrant under section 39(2)(f) of the Act.

Action under section 39.1 of the Act

11.42 The Registrar may refer a matter to the Discipline Committee for consideration under section 39.1 of the Act.

11.43 The Discipline Committee must notify a Registrant by registered mail or personal service at least 14 days prior to making an order under section 39.1 of the Act.

11.44 In providing a Registrant an opportunity to be heard under section 39.1(3) of the Act, the Discipline Committee may determine its own procedures, including, without limitation:

- (a) the means by which the Registrant will be given an opportunity to be heard; and
- (b) whether to seek any additional information or responsive submissions from the Registrar.

Registrant Under Suspension

11.45 A Registrant whose registration is suspended must, for the duration of the suspension:

- (a) not provide the services of any Designated Health Profession regulated by the College;
- (b) not use any titles that are associated with a Designated Health Profession regulated by the College under these Bylaws, the Act, or the applicable regulations, or hold themselves out as a person entitled to practise a Designated Health Profession;
- (c) not hold office as a Board Member;
- (d) not act as a member of a Committee established in these Bylaws, an Inspector, or an examiner;
- (e) not make appointments for patients, clients or prospective patients or clients;
- (f) not contact or communicate with patients, clients or prospective patients or clients either directly or indirectly (including through a publication or communication on a website), except for the following purposes:
 - (i) to advise patients, clients or prospective patients or clients of the fact and duration of the suspension; or
 - (ii) to advise a patient, client or prospective patient or client that another Registrant will continue to operate in the suspended Registrant's place, or to refer the patient or client to another Registrant in Good Standing;

- (g) remove from the Registrant's premises and the building in which the premises are located, the Registrant's name and any sign relating to the Registrant's practice over which the Registrant has control;
- (h) prominently display, in any place over which the Registrant has control, a notice of suspension in a form and in an area approved by the Registrar, which states the duration and reasons for the suspension;
- (i) pay any Fee required by the College when due in order to remain a Registrant; and
- (j) not be given a refund of the annual fee for the portion of the suspension or of any special assessment that the Registrant has paid.

11.46 A suspended Registrant may, during the period of suspension, allow another Registrant to use their premises, provided that:

- (a) the suspended Registrant receives no income or other financial benefit from the arrangement unless:
 - (i) from rental of the premises if owned by the suspended Registrant; and
 - (ii) the Registrar approves of the specific arrangement;
- (b) evidence of the suspended Registrant's authorization to practise the applicable Designated Health Profession is removed from the premises; and
- (c) a notice of suspension, in a form approved by the Registrar, is prominently displayed in the reception area of the premises.

12.0 Health Profession Corporations

Authority of Registrar

12.1 The Registrar is authorized to act for the Board under section 43 of the Act.

Health Profession Corporation Permit Application

12.2 A corporation seeking an HPC Permit under this Part, including a Health Profession Corporation seeking renewal of an HPC Permit, must deliver an application to the Registrar in the form and manner specified by the Registrar.

Health Profession Corporation Permit Fees

12.3 A corporation seeking an HPC Permit under this Part, including a Health Profession Corporation seeking renewal of an HPC Permit, must deliver to the Registrar the full amount of all applicable application and permit Fees specified in Schedule 1.

Eligibility for Health Profession Corporation Permit

12.4 An HPC Permit may only be issued to a corporation eligible to engage in the practice of an HPC Eligible Designated Health Profession in accordance with Part 4 of the Act and these Bylaws.

12.5 A corporation may be issued an HPC Permit if, in addition to satisfying all other requirements under Part 4 of the Act:

- (a) all of the Registrants who, under section 43(1)(c)(i) of the Act, own voting shares of the corporation or who, under section 43(1)(c)(ii) of the Act, own voting shares of a Holding Company that owns voting shares of the corporation, are HPC Eligible Registrants in the same HPC Eligible Designated Health Profession;
- (b) the name of the corporation has been approved by the Registrar in accordance with Bylaw 12.11; and
- (c) the corporation delivers to the Registrar:
 - (i) any outstanding Fee owed to the College by the corporation or any Registrant who is a shareholder of the corporation;
 - (ii) a certificate of solicitor in a form approved by the Registrar;

- (iii) an acknowledgement in a form approved by the Registrar, executed by each Registrant who is a legal or beneficial voting shareholder of the corporation or of a Holding Company;
- (iv) a copy of the certificate of incorporation, filed transition application, certificate of amalgamation, or certificate of continuation, as the case may be, any certificate of name change, and any certificate of restoration issued to or filed by the corporation under the *Business Corporation Act*, SBC 2002, c. 57;
- (v) a copy of the notice of articles issued to the corporation under the *Business Corporations Act*, SBC 2002, c. 57;
- (vi) if applicable, evidence of professional liability insurance in compliance with Bylaw 12.8;
- (vii) the application form required by Bylaw 12.2;
- (viii) the applicable Fees required by Bylaw 12.3; and
- (ix) any other documents or materials required by the Registrar to establish that the corporation is eligible for an HPC Permit under Part 4 of the Act and these Bylaws.

Validity of Permit

12.6 Subject to Bylaw 12.7, an HPC Permit issued under this Part is valid until the earliest of:

- (a) the following [annual renewal date];
- (b) the Health Profession Corporation delivers a written request to the Registrar for cancellation of the HPC Permit;
- (c) the HPC Permit is revoked under section 44 of the Act; or
- (d) the Health Profession Corporation is dissolved or otherwise ceases to be a company in good standing under the Business Corporations Act.

12.7 Bylaw 12.6 applies as of the Amalgamation Date to a valid HPC Permit issued by the College of Optometrists of British Columbia or the College of Physical Therapists of British Columbia, that, on amalgamation, is deemed under section 25.08(1)(a) of the Act to be an HPC Permit issued by the College, even if the permit issued by the applicable Former College was issued with a different expiry date or without an expiry date.

Insurance Requirement

12.8 A Health Profession Corporation providing services in the Designated Health Profession of Optometry must obtain and at all times maintain insurance with a limit of no less than

\$2,000,000 per occurrence against liability from error, omission, or negligent act of an employee in connection with the practice of the Optometry in a form satisfactory to the Registrar.

Health Profession Corporation Names

12.9 The name of a Health Profession Corporation must:

- (a) contain one of the words or abbreviations “Corporation”, “Corp.”, “Incorporated”, or “Inc.”;
- (b) be approved by the Registrar; and
- (c) if the Health Profession Corporation is providing services in the Designated Health Profession of Optometry, end with the words “Optometric Corporation” and include:
 - (i) the surname and first name of at least one Registrant who is a voting shareholder; or
 - (ii) the surname and initials of the first and middle names of at least one Registrant who is a voting shareholder.

12.10 The name of a Health Profession Corporation must not:

- (a) be identical to the name of another Health Profession Corporation;
- (b) resemble the name of another Health Profession Corporation to an extent that, in the opinion of the Registrar, is likely to confuse or mislead the public; or
- (c) contravene the restrictions on advertising that apply to the applicable HPC Eligible Designated Health Profession.

12.11 The Registrar may approve a name that complies with Bylaws 12.9 and 12.10 on receipt of:

- (a) a completed application form for name approval in a form designated by the Registrar; and
- (b) the applicable application Fee specified in Schedule 1.

12.12 The name of a corporation holding a valid HPC Permit issued by the College of Optometrists of British Columbia or the College of Physical Therapists of British Columbia as of the Amalgamation Date is deemed to comply with the requirements of Bylaws 12.9-12.10, and the name may be used until:

- (a) the Health Profession Corporation’s name is changed; or
- (b) the Health Profession Corporation’s HPC Permit is revoked or not renewed.

Designated Registrant

12.13 A Health Profession Corporation must designate a person as the Health Profession Corporation's Designated Registrant, who is primarily responsible for the Health Profession Corporation's communications with the College and compliance with the administrative requirements applicable to a Health Profession Corporation.

12.14 A Health Profession Corporation's Designated Registrant must be:

- (a) an HPC Eligible Registrant in Good Standing; and
- (b) a voting shareholder of the Health Profession Corporation.

Renewal of HPC Permit

12.15 A Health Profession Corporation that seeks the renewal of its HPC Permit must do all of the following at least 14 days before its HPC Permit expires:

- (a) deliver to the Registrar the application form required by Bylaw 12.2;
- (b) deliver to the Registrar proof of insurance if required by Bylaw 12.8; and
- (c) pay all applicable Fees required by Bylaw 12.3.

12.16 The Registrar may refuse to renew an HPC Permit if the Registrar is not satisfied that the Health Profession Corporation complies with all of the requirements set out in these Bylaws and in Part 4 of the Act.

12.17 A renewed HPC Permit is valid until the following [renewal date: TBD].

12.18 A Health Profession Corporation that delivers the items required under Bylaw 12.15 less than 14 days before its HPC Permit expires must pay a late Fee as set out in Schedule 1.

12.19 A Health Profession Corporation that fails to deliver the items required under Bylaw 12.15 before its HPC Permit expires but does so within 30 days, must, in addition to delivering those items:

- (a) include an attestation in a form approved by the Registrar that it has not provided the services of an HPC Eligible Designated Health Profession to the public following the expiration of its HPC Permit; and
- (b) pay a late Fee as set out in Schedule 1.

12.20 A Health Profession Corporation that fails to deliver the items required under Bylaw 12.15 before its HPC Permit expires and does not do so within 30 days must re-apply for an HPC Permit as if it were a new applicant.

Notification of Changes

12.21 A Health Profession Corporation must:

- (a) immediately notify the Registrar in writing if there is a change to any of the following information contained in the application most recently delivered to the Registrar:
 - (i) the registered address or contact information;
 - (ii) the identity of the Designated Registrant;
 - (iii) the shareholders, in addition to the requirements of Bylaw 12.23;
 - (iv) the directors; and
 - (v) the officers;
- (b) obtain approval from the Registrar under Bylaw 12.11 before changing the name of the Health Profession Corporation;
- (c) deliver to the Registrar a true copy of any certificate of change of name issued to the Health Profession Corporation under the Business Corporations Act; and
- (d) deliver to the Registrar a new certificate of solicitor if required by the Registrar.

Disposition of Shares

12.22 The articles of a Health Profession Corporation must provide for the disposition, in accordance with section 43 of the Act and these Bylaws, of the shares of a shareholder who dies or ceases to be an eligible shareholder.

12.23 The legal or beneficial interest in any share of a Health Profession Corporation or a Holding Company must not be transferred, pledged, or assigned to any person who is not entitled to own that legal or beneficial interest in compliance with the requirements of section 43 of the Act and Bylaw 12.5(a).

12.24 If the legal or beneficial interest in any voting share of a Health Profession Corporation or a Holding Company is transferred or issued to a Registrant or a Holding Company that was not previously a voting shareholder of the Health Profession Corporation, the Health Profession Corporation must:

- (a) notify the Registrar of the transfer or issuance;
- (b) deliver to the Registrar an acknowledgement in compliance with Bylaw 12.5(c)(iii) executed by each of the following Registrants (as applicable), unless such acknowledgement executed by the Registrant has already been delivered to the Registrar:
 - (i) a Registrant to whom the shares are to be transferred or issued;

- (ii) a Registrant who is a voting shareholder of:
 - (A) the Holding Company to which the shares are to be transferred or issued; or
 - (B) a company that directly or indirectly owns a legal or beneficial interest in any voting share of the Holding Company to which the shares are to be transferred or issued.
- (c) if, following a transfer of shares, the name of a Health Profession Corporation includes the name of a Registrant who is no longer a voting shareholder of the Health Profession Corporation or a company that legally and beneficially owns the voting shares of the Health Profession Corporation, the Health Profession Corporation must:
 - (i) apply to the Registrar under Bylaw 12.11 for approval of a new name; and
 - (ii) after the Registrar approves a new name, change its name in accordance with the Business Corporations Act to the approved name.

General Obligations of a Health Profession Corporation

12.25 All of the professional obligations of a Registrant, to the extent that they may be applicable to a corporation, apply to a Health Profession Corporation, including, without limitation, the duty to respond to the College set out in Bylaw 9.7.

Business Activities by Health Profession Corporations

12.26 In addition to section 45 of the Act, a Health Profession Corporation must not engage or invest in any business that is incompatible with the proper and ethical practice of the HPC Eligible Designated Health Profession or which creates a conflict of interest for the Health Profession Corporation or any of its directors, officers, employees, or contractors.

Information to Public

12.27 A Health Profession Corporation must provide the following information to any member of the public upon request:

- (a) the legal name of the Health Profession Corporation;
- (b) the names of all shareholders, including any Holding Companies;
- (c) the names of all directors; and
- (d) the name and contact information of the Designated Registrant.

Marketing by Health Profession Corporations

- 12.28 A Health Profession Corporation that carries on the business of providing services to the public referred to in section 42(1) of the Act must:
- (a) disclose on all letterhead and business cards, and in all marketing or advertisements, that those services are being provided by a Health Profession Corporation; and
 - (b) comply with all advertising and marketing standards set out in these Bylaws that apply to Registrants of the applicable HPC Eligible Designated Health Profession, to the extent those standards may be applicable to a corporation.

HPC Permit Revocation Hearings

- 12.29 The powers and duties of the Board under section 44 of the Act are delegated to the Discipline Committee.
- 12.30 The Discipline Committee may conduct an HPC Permit Revocation Hearing on receipt of a written complaint, including, without limitation, a referral from the Inquiry Committee or the Registrar.
- 12.31 An HPC Permit Revocation Hearing may be consolidated with a hearing conducted under section 38 of the Act if there are common matters in issue, and the Discipline Committee considers consolidation to be appropriate in the circumstances.
- 12.32 The Discipline Committee may direct that an HPC Permit Revocation Hearing be conducted by an oral hearing (including an oral hearing by electronic means), by written submissions, or by any combination of these means.
- 12.33 The Registrar must provide notice of an HPC Permit Revocation Hearing by registered mail to the registered office of the Health Profession Corporation at least 30 days before the date of the HPC Permit Revocation Hearing.
- 12.34 Prior to or during an HPC Permit Revocation Hearing, the Discipline Committee may make an order under section 47 of the Act.
- 12.35 The Discipline Committee may determine its own procedures for conducting an HPC Permit Revocation Hearing, including adopting any of the provisions of section 38 of the Act or Part 11 of these Bylaws to the extent that they may be applicable to a corporation.
- 12.36 Unless otherwise directed by the Discipline Committee, any portion of an HPC Permit Revocation Hearing that is an oral hearing must be in public.

12.37 The Discipline Committee may order the College or the respondent Health Profession Corporation to pay the costs of an HPC Permit Revocation Hearing based on the tariff of costs at Schedule 26.

12.38 The outcome and reasons of an HPC Permit Revocation Hearing must be Published, subject to the Discipline Committee's discretion to direct the Registrar to withhold from publication information described in section 39.3(3)-(4) of the Act.

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Schedule 1: Fees

All pre-amalgamation Fees from the Former Colleges will be ported to a combined fee schedule for the new College.

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Schedule 2: Dietetics: Registration, Examinations, and Professional Liability Insurance

1.0 Dietetics: Full – Conditions and Requirements for Registration *[previously Bylaw 43]*

- 1.1 Graduation from an academic program of Dietetics in Table 1 to this Schedule;
- 1.2 Successful completion of a program of practical training in Table 1 to this Schedule;
- 1.3 Successful completion of the Examination for registration and the jurisprudence Examination less than three (3) years prior to the date that full registration is granted;
- 1.4 Evidence satisfactory to the Registration Committee of the good character of the Applicant consistent with the responsibilities of a Registrant and the standards expected of a Registrant;
- 1.5 Receipt by the Registrar of:
 - 1.5.1 a completed application for registration;
 - 1.5.2 the required statutory declaration;
 - 1.5.3 a notarized copy or other evidence satisfactory to the Registration Committee that the Applicant has met the requirements in paragraphs 1.1 to 1.3, if applicable, and that the individual is the person named therein; and
 - 1.5.4 payment of Fees specified in Schedule 1;
 - 1.5.5 authorization for a criminal record check in the form required under the *Criminal Records Review Act*, RSBC 1996, c. 86;
 - 1.5.6 in the case of an Applicant who is or has practiced dietetics or another health profession in another Canadian jurisdiction, a signed criminal record check authorization form for that jurisdiction;
 - 1.5.7 a declaration of meeting professional liability insurance as required under heading 12.0; and
 - 1.5.8 a letter or certificate, in a form satisfactory to the Registration Committee and dated no more than thirty (30) days before the date of application, from each body responsible for the regulation of dietetic or another health profession in a Canadian jurisdiction where the Applicant is, or has been, authorized to practice dietetics or another health profession, specifying particulars of any cancellation, suspension, limitation, or conditions on the Applicant's entitlement to practice, or any inspection, review or proceeding which could lead to cancellation, suspension, limitation or conditions on the Applicant's entitlement to practice.

- 1.6 Despite paragraphs 1.1 through 1.5, an Applicant who is authorized to practice dietetics in another Canadian jurisdiction must be granted registration in the Registrant class of Dietetics: Full by the Registration Committee if the Applicant satisfies the Registration Committee that the person:
 - 1.6.1 is currently authorized to practice dietetics in that other jurisdiction, as evidenced on the verification of registration form;
 - 1.6.2 successfully completes the jurisprudence Examination; and
 - 1.6.3 meets the requirements in paragraph 1.5.
- 1.7 Despite paragraphs 1.1 through 1.5, the Registration Committee has discretion in satisfying itself under section 20 of the Act, that the Applicant meets the conditions or requirements for registration as a Registrant of the College, to:
 - 1.7.1 consider the Applicant for assessment of competence to practice dietetics;
 - 1.7.2 consider whether the Applicant's knowledge, skills, abilities and judgment are substantially equivalent to the standards of academic or technical achievement and the competencies or other qualifications established paragraphs 1.1 and 1.2;
 - 1.7.3 consider if the Applicant meets the requirements in paragraphs 1.3, 1.4, and 1.5; and
 - 1.7.4 grant registration on that basis.

2.0 Dietetics: Emergency – Conditions and Requirements for Registration [previously Bylaw 44]

- 2.1 An emergency has been declared by the Registrar, according to criteria determined by the Board;
- 2.2 Evidence satisfactory to the Registration Committee of the good character of the Applicant consistent with the responsibilities of a Registrant and the standards expected of a Registrant;
- 2.3 Receipt by the Registrar of:
 - 2.3.1 an application for registration;
 - 2.3.2 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*;
 - 2.3.3 a declaration of meeting professional liability insurance as required under heading 12.0;
 - 2.3.4 evidence satisfactory to the Registration Committee that the Applicant either:
 - 2.3.4.1 holds registration in another jurisdiction in Canada or the United States of America as the equivalent of registration in the Registrant class of Dietetics:

Full, which is not subject to any practice limitations, restrictions or conditions in that jurisdiction that do not apply generally to Registrants in the Registrant class of Dietetics: Full in British Columbia;

2.3.4.2 is a former Registrant entitled to reinstatement in the Registrant class of Dietetics: Full under heading 8.0; or

2.3.4.3 is a member of the armed forces of Canada or the United States of America; and

2.3.5 payment of Fees specified in Schedule 1.

2.4 The Registration Committee may grant an Applicant registration under paragraph 2.1 for a period of up to ninety (90) days.

2.5 The Registration Committee may renew the registration of a person granted registration under paragraph 2.1 for a further period of up to ninety (90) days if the Registrar's declaration of an emergency continues to be in effect.

3.0 Dietetics: Temporary – Conditions and Requirements for Registration *[previously Bylaw 45]*

3.1 An Applicant for registration in the Registrant class of Dietetics: Full who submits an application for registration but does not meet the Examination and jurisprudence Examination requirement may be granted registration in the Registrant class of Dietetics: Temporary by the Registration Committee for up to one (1) year if the Registration Committee is of the opinion that the Applicant is capable of practicing dietetics without risk to public health and safety.

3.2 The registration of a person who has been granted registration in the Registrant class of Dietetics: Temporary under paragraph 3.1, may be renewed by the Registration Committee once for a period of up to one (1) year immediately following the period that the first registration in this class was granted.

3.3 A Registrant in the Registrant class of Dietetics: Temporary must write the Examination at the first scheduled sitting following their registration.

3.4 Registration in the Registrant class of Dietetics: Full may be granted by the Registration Committee to a Registrant in the Registrant class of Dietetics: Temporary upon successful completion of the Examination and jurisprudence Examination.

3.5 A Registrant in the Registrant class of Dietetics: Temporary who fails the Examination may practice only under direct supervision by a Registrant in the Registrant class of Dietetics: Full, as specified by the Registration Committee.

3.6 Registration in this class must be revoked if the Registrant in the Registrant class of Dietetics: Temporary fails the Examination on the second attempt.

4.0 Dietetics: Non-Practicing – Conditions and Requirements for Registration *[previously Bylaw 46]*

4.1 A former Registrant in the Registrant class of Dietetics: Full may be granted registration in the Registrant class of Dietetics: Non-Practicing by the Registration Committee if the former Registrant delivers to the Registrar:

4.1.1 an application for registration;

4.1.2 the Fee specified in Schedule 1; and

4.1.3 a statutory declaration that the Applicant will not provide dietetic services in BC while registered under this section.

4.2 In order to return to registration in the Registrant class of Dietetics: Full, a Registrant in the Registrant class of Dietetics: Non-Practicing must meet the requirements for reinstatement under headings 8.0, 9.0 or 10.0.

5.0 Examinations *[previously Bylaw 49]*

5.1 The requirements to write or re-write the Examinations are:

5.1.1 meeting any conditions or requirements for registration as determined by the Registration Committee and completion of all requirements for full registration in paragraphs 1.1, 1.2, 1.4, and 1.5;

5.1.2 a completed Canadian Dietetic Registration Examination declaration; and

5.1.3 payment of the Examination Fee specified in Schedule 1.

5.2 Unless an extension is granted, a current or former Registrant must write the next Examination available after meeting any eligibility conditions set by the Registration Committee.

5.3 A current or former Registrant who fails an initial Examination is entitled to two (2) opportunities to re-write the Examination.

5.4 A current or former Registrant who fails the second attempt at the Examination must be assessed and complete any assigned upgrading, as determined by the Registration Committee, before being permitted to write the Examination for a third and final time.

- 5.5 If the Registration Committee receives information that leads it to believe that a current or former Registrant has engaged in improper conduct during the course the Examination, it will investigate and may:
- 5.5.1 fail the current or former Registrant;
 - 5.5.2 pass the current or former Registrant;
 - 5.5.3 require the current or former Registrant to rewrite the Examination; or
 - 5.5.4 disqualify the current or former Registrant from participating in any Examination for a period of time.
- 5.6 The Registration Committee must provide a current or former Registrant disqualified under subparagraph 5.5.4 with written reasons for the disqualification.
- 5.7 A current or former Registrant who fails the jurisprudence Examination must retake the jurisprudence Examination until successful, prior to registration in the Registrant class of Dietetics: Full.
- 5.8 A Registrant in the Registrant class of Dietetics: Full must retake the jurisprudence Examination every five (5) years.

6.0 Registration Renewal *[previously Bylaw 50]*

- 6.1 The requirements for renewal of the registration in the Registrant classes of Dietetics: Full, Dietetics: Temporary or Dietetics: Non-Practicing are receipt by the Registrar of:
- 6.1.1 a completed registration renewal application;
 - 6.1.2 the registration renewal Fee specified in Schedule 1;
 - 6.1.3 payment of any outstanding Fees owed to the College;
 - 6.1.4 a declaration in that the Registrant is in compliance with the Act, the *Dietitians Regulation*, BC Reg. 279/2008, and the Bylaws and is in compliance with any limits or conditions consented to pursuant to section 36 of the Act or imposed under section 39(1)(c) of the Act;
 - 6.1.5 proof of compliance with any applicable requirements of the Quality Assurance Program in Schedule 18; and
 - 6.1.6 a declaration of professional liability insurance required under heading 12.0.
- 6.2 The Registrar must deliver a registration renewal notice to each Registrant in the Registrant classes of Dietetics: Full, Dietetics: Temporary or Dietetics: Non-Practicing no later than February 10.

- 6.3 Each renewing Registrant must pay the registration renewal Fee on or before March 31.
- 6.4 A Registrant in the Registrant class of Dietetics: Non-Practicing is exempt from the requirements in subparagraphs 6.1.5 and 6.1.6.
- 6.5 If a Registrant fails to meet registration renewal requirements on or before March 31, the individual ceases to be registered and is considered a former Registrant.

7.0 Reinstatement for Non-Payment of Fees [previously Bylaw 51]

- 7.1 The registration of a former Registrant in the Registrant classes of Dietetics: Full or Dietetics: Temporary who ceased to be registered under paragraph 6.5 may be reinstated if the former Registrant:
 - 7.1.1 was in Good Standing upon the expiry of the Applicant's previous registration in the Registrant classes of Dietetics: Full or Dietetics: Temporary;
 - 7.1.2 is not in contravention of the Act, the *Dietitians Regulation*, or the Bylaws; and
 - 7.1.3 submits to the Registrar no later than May 31:
 - 7.1.3.1 a reinstatement application;
 - 7.1.3.2 proof of completion of any applicable requirements of the Quality Assurance Program in Schedule 18 as though the Applicant had not ceased to be registered under paragraph 6.5;
 - 7.1.3.3 the late registration and renewal Fees specified in Schedule 1;
 - 7.1.3.4 any other Fee owed to the College under the Act, *Dietitians Regulation*, or the Bylaws; and
 - 7.1.3.5 a declaration of professional liability insurance as required under heading 12.0.
- 7.2 The registration of a former Registrant in the Registrant classes of Non-Practicing who ceased to be registered under paragraph 6.5 may be reinstated if the former Registrant submits to the Registrar:
 - 7.2.1 a reinstatement application;
 - 7.2.2 the Fee specified in Schedule 1; and
 - 7.2.3 if the Applicant is making application for reinstatement more than 60 days after ceasing to be registered, a statutory declaration that the Applicant will not provide dietetic services in BC while registered under this section.

8.0 Reinstatement Within Three (3) Years [previously Bylaw 52]

- 8.1 Despite paragraphs 1.1 through 1.5 and heading 4.0, the registration of a former Registrant in the Registrant classes of Dietetics: Full or Dietetics: Non-Practicing who ceased to be registered as a Registrant in the Registrant class of Dietetics: Full under paragraph 6.5 for less than three (3) years may be reinstated by the Registration Committee if the former Registrant:
- 8.1.1 was in Good Standing upon the expiry of their previous registration in the Registrant classes of Dietetics: Full or Dietetics: Non-Practicing;
 - 8.1.2 is not in contravention of the Act, the *Dieticians Regulation*, the Bylaws; and
 - 8.1.3 submits to the Registrar no later than three (3) years after the expiry of their full registration:
 - 8.1.3.1 a reinstatement application;
 - 8.1.3.2 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*;
 - 8.1.3.3 proof of completion of all requirements of the Quality Assurance Program in Schedule 18, as though the former Registrant had not ceased to be registered under paragraph 6.5;
 - 8.1.3.4 the reinstatement Fees specified in Schedule 1;
 - 8.1.3.5 a declaration of professional liability insurance as required under heading 12.0; and
 - 8.1.3.6 evidence satisfactory to the Registration Committee that the Applicant is a person in good character consistent with the responsibilities of a Registrant and the standards expected of a Registrant.
- 8.2 Despite paragraphs 7.1, 8.1, 9.1, and 11.1, the registration of a former Registrant in the Registrant class of Dietetics: Full who is currently authorized to practice dietetics in another Canadian jurisdiction under paragraph 1.6 or in an international dietetic education program under paragraph 1.7 or the Bylaws, and who ceased to be registered under paragraph 6.5, may be reinstated if the former Registrant satisfies the Registration Committee that they:
- 8.2.1 are currently authorized to practice dietetics in that other jurisdiction;
 - 8.2.2 meet the requirements in subparagraphs 8.1.1, 8.1.2 and 8.1.3.2 to 8.1.3.6; and
 - 8.2.3 submit a reinstatement application.

9.0 Reinstatement Within Six (6) Years [previously Bylaw 53]

9.1 Despite paragraphs 1.1 through 1.5 and heading 4.0, the registration of a former Registrant in the Registrant classes of Dietetics: Full or Dietetics: Non-Practicing who ceased to be registered as a Registrant in the Registrant class of Dietetics: Full under paragraph 6.5 for less than six (6) years but more than three (3) years may be reinstated by the Registration Committee if the former Registrant:

- 9.1.1 was in Good Standing upon the expiry of the Applicant's previous registration in the Registrant classes of Dietetics: Full or Dietetics: Non-Practicing;
- 9.1.2 is not in contravention of the Act, the *Dietitians Regulation*, or the Bylaws;
- 9.1.3 successfully completes the Examination and the jurisprudence Examination less than three (3) years prior to the date registration is granted; and
- 9.1.4 submits to the Registrar no later than six (6) years after the expiry of their full registration:
 - 9.1.4.1 a reinstatement application;
 - 9.1.4.2 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*;
 - 9.1.4.3 the reinstatement Fees specified in Schedule 1;
 - 9.1.4.4 a declaration of professional liability insurance as required under heading 12.0; and
 - 9.1.4.5 evidence satisfactory to the Registration Committee that the Applicant is a person in good character consistent with the responsibilities of a Registrant and the standards expected of a Registrant.

10.0 Reinstatement After More than Six (6) Years [previously Bylaw 54]

10.1 Despite paragraphs 1.1 through 1.5 and heading 4.0, the registration of a former Registrant in the Registrant classes of Dietetics: Full or Dietetics: Non-Practicing who ceased to be registered as a Registrant in the Registrant class of Dietetics: Full under paragraph 6.5 for more than six (6) years may be reinstated by the Registration Committee if the former Registrant:

- 10.1.1 was in Good Standing upon the expiry of their previous registration in the Registrant classes of Dietetics: Full or Dietetics: Non-Practicing;
- 10.1.2 is not in contravention of the Act, the *Dietitians Regulation*, or the Bylaws;

- 10.1.3 submitted an application for assessment of competence to practice dietetics and was assessed by the Registration Committee to determine whether the Applicant's knowledge, skills, abilities and judgment to practice dietetics are current;
- 10.1.4 completes any academic and practical training required by the Registration Committee following the assessment in subparagraph 10.1.3;
- 10.1.5 completes the Examination and jurisprudence Examination less than three (3) years prior to the date registration is granted; and
- 10.1.6 submits to the Registrar:
 - 10.1.6.1 a reinstatement application;
 - 10.1.6.2 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*;
 - 10.1.6.3 the reinstatement Fees specified in Schedule 1;
 - 10.1.6.4 a declaration of professional liability insurance as required under heading 12.0; and
 - 10.1.6.5 evidence satisfactory to the Registration Committee that the Applicant is a person in good character consistent with the responsibilities of a Registrant and the standards expected of a Registrant.

11.0 Reinstatement Following Disciplinary Action [previously Bylaw 55]

- 11.1 The registration of a disciplined person may, subject to sections 20, 37.1, 39 and 39.1 of the Act, be reinstated by the Registration Committee if the disciplined person:
 - 11.1.1 is not in contravention of the Act, the *Dietitians Regulation*, or the Bylaws;
 - 11.1.2 submits to the registrar:
 - 11.1.2.1 a reinstatement application;
 - 11.1.2.2 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*;
 - 11.1.2.3 the reinstatement Fees specified in Schedule 1;
 - 11.1.2.4 any other Fee to the College under the Act, *Dietitians Regulation*, the Bylaws or this Schedule;
 - 11.1.2.5 a declaration of professional liability insurance as required under heading 12.0;

- 11.1.2.6 evidence satisfactory to the Registration Committee that the former Registrant is a person in good character consistent with the responsibilities of a Registrant and the standards expected of a Registrant; and
- 11.1.2.7 evidence satisfactory to the Registration Committee that the reinstatement of the former Registrant will not pose an undue risk to public health and safety.
- 11.1.3 successfully completes the Examination and jurisprudence Examination less than three (3) years prior to the date that full registration is granted.

12.0 Professional Liability Insurance *[previously Bylaw 57]*

- 12.1 All Registrants in the Registrant classes of Dietetics: Full, Dietetics: Temporary and Dietetics: Emergency must obtain and at all times maintain professional liability insurance coverage in an amount of at least two million dollars (\$2,000,000) per occurrence in a form that is satisfactory to the Registrar.

Table 1: Recognized Dietetic Education Programs

COMBINED UNDERGRADUATE DEGREE AND PRACTICUM PROGRAMS

Acadia University, Wolfville, NS: BSc Nutrition, Dietetics

St. Francis Xavier University, Antigonish, NS: BSc Human Nutrition, Dietetics

University of Alberta, Edmonton, AB: BSc Nutrition and Food Science, Dietetics Specialization

University of British Columbia, Vancouver, BC: BSc Food, Nutrition and Health, Dietetics Major

Université de Moncton, Moncton, NB: BSc Nutrition (Baccalauréat en sciences (nutrition) avec internat)

Université d'Ottawa, Ottawa, ON: BSc Nutrition (Baccalauréat spécialisé en sciences des aliments et de la nutrition - Diététique)

University of Prince Edward Island, Charlottetown, PEI: BSc Foods and Nutrition

University of Saskatchewan, Saskatoon, SK: BSc Nutrition

BACHELOR “ACADEMIC ONLY” DEGREES AND PROGRAMS

Mount St. Vincent University, Halifax, NS: BSc Applied Human Nutrition, Dietetics

Toronto Metropolitan University, Toronto, ON: BSc Nutrition and Food

University of Guelph, Guelph, ON: BSc Applied Human Nutrition

University of Manitoba, Winnipeg, MB: BSc Human Nutritional Sciences

Western University, Brescia School of Food and Nutritional Sciences, London, ON: BSc Foods and Nutrition – Specialization in Nutrition and Dietetics

COMBINED GRADUATE DEGREES AND PRACTICUM PROGRAMS

Toronto Metropolitan University, ON: Master of Nutrition Communication

University of Guelph, Guelph, ON: Master of Applied Nutrition

University of Toronto, Toronto, ON: Master of Public Health Nutrition and Dietetics

Western University, Brescia School of Food and Nutritional Sciences, London, ON: MSc Foods and Nutrition

POST-DEGREE INTERNSHIP PROGRAMS

Horizon Health Network, The Moncton Hospital, Post-dietetic Internship, Moncton, NB

Mount St. Vincent University, Halifax, NS: Internship Education Program

Newfoundland and Labrador Health Services Dietetic Internship, St. John's, NL

Northern Ontario School of Medicine University, Northern Ontario Dietetic Internship Program, Thunder Bay, ON

Nova Scotia Health Authority, Central Zone Dietetic Internship Program, Halifax, NS

Toronto Metropolitan University, Professional Masters Diploma in Dietetics (PMDip), Toronto, ON

Western University, Brescia School of Food and Nutritional Sciences, Diploma in Dietetic

Education and Practical Training, London, ON

Winnipeg Regional Health Authority, Manitoba Partnership Dietetic Internship Program, Winnipeg, MB

Schedule 3: Occupational Therapy: Registration, Examinations, and Professional Liability Insurance

1.0 Occupational Therapy: Full [previously Bylaw 42]

- 1.1 An Applicant for registration in the Registrant class of Occupational Therapy: Full must satisfy the Registration Committee that they:
- 1.1.1 have graduated from one of the recognized programs of Occupational Therapy in Table 1 to this Schedule, or obtained an academic qualification from a program or institution outside Canada considered substantially equivalent by the Registration Committee;
 - 1.1.2 have successfully completed a minimum of one thousand (1,000) hours fieldwork or a clinical practicum acceptable to the Registration Committee;
 - 1.1.3 have successfully completed an entry to practice Examination approved by the Registration Committee in Table 2 to this Schedule;
 - 1.1.4 are a person of good character and fit to practise consistent with the responsibilities of a Registrant and the standards of practice and conduct expected of a Registrant;
 - 1.1.5 are proficient in the English language; and
 - 1.1.6 have delivered to the Registrar:
 - 1.1.6.1 a signed application for registration in the form required, together with the initial registration Fees set out in Schedule 1;
 - 1.1.6.2 an official transcript which specifies the degree earned or other evidence satisfactory to the Registration Committee of completion of educational requirements;
 - 1.1.6.3 proof of successful completion of the required Examination;
 - 1.1.6.4 a completed authorization for release of information in the required form, to be sent to the regulatory authority in any jurisdiction in which the Applicant has practiced, for confirmation of the registration status of the Applicant;
 - 1.1.6.5 proof that the Applicant has Canadian citizenship or is a permanent resident of Canada or otherwise authorized to work in Canada in a health care profession;
 - 1.1.6.6 any other outstanding Fee owed to the College;
 - 1.1.6.7 meets the requirements for a criminal record check authorization required by the *Criminal Records Review Act*, RSBC 1996, c. 86; and

1.1.6.8 proof of professional liability insurance under heading 5.0.

1.2 Where the Applicant has completed the requirements in paragraphs 1.1.1 and 1.1.2 more than eighteen (18) months before the date the application for registration is received by the College, the Applicant must provide, in addition to the requirements in paragraphs 1.1.3 through 1.1.6 evidence of one of the following:

1.2.1 successful completion of at least six hundred (600) hours of service within the scope of practice of the profession in the three (3) years immediately preceding the date of the application for registration; or

1.2.2 successful completion of a refresher or upgrading program approved by the Registration Committee within the eighteen (18) months immediately preceding the date of the application for registration.

1.3 Paragraph 1.2 does not apply to Applicants who apply for registration within the first eighteen (18) months after their graduation from one of the recognized programs of occupational therapy in Table 1 to this Schedule or who have obtained an academic qualification from a program or institution outside Canada considered substantially equivalent by the Registration Committee.

1.4 Notwithstanding paragraph 1.1 where the Registration Committee determines that:

1.4.1 the Applicant's entitlement to practise occupational therapy has been cancelled or suspended or limited in this or any other jurisdiction at any time;

1.4.2 at the time of the application an investigation, review or proceeding is taking place in this or any other jurisdiction which could result in the suspension, cancellation or limitation of the Applicant's authorization to practice;

1.4.3 the Applicant has contravened the Act, the *Occupational Therapists Regulation*, BC Reg. 286/2008, or the Bylaws; or

1.4.4 the Applicant has been convicted in Canada or elsewhere of any offence which would be an act of professional misconduct,

the Registration Committee may refuse to grant registration or grant registration with terms, limits and conditions.

2.0 Occupational Therapy: Provisional [previously Bylaw 43]

2.1 An Applicant for registration in the Registrant class of Occupational Therapy: Provisional must satisfy the Registration Committee that they:

- 2.1.1 have graduated from one of the recognized programs of Occupational Therapy in Table 1 to this Schedule or obtained an academic qualification from a program or institution outside Canada considered substantially equivalent by the Registration Committee;
- 2.1.2 have successfully completed a minimum of one thousand (1,000) hours of fieldwork or a clinical practicum acceptable to the Registration Committee;
- 2.1.3 have, in the event they are not able to satisfy the requirements established in section subparagraph 1.1.3 or paragraph 1.2:
 - 2.1.3.1 been found by the Registration Committee to require minimal educational upgrading to achieve an equivalent educational status established in subparagraph 2.1.1 and are enrolled in a program to complete the educational requirements specified by the Registration Committee; and
 - 2.1.3.2 signed an undertaking with the College to complete a re-entry program approved by the Registration Committee and any additional requirements that may be imposed by the Registration Committee;
- 2.1.4 are a person of good character and fit to practice consistent with the responsibilities of a Registrant and the standards of practice and conduct expected of a Registrant;
- 2.1.5 are proficient in the English language;
- 2.1.6 are able to practice without any significant risk to public health and safety; and
- 2.1.7 have delivered to the Registrar:
 - 2.1.7.1 a signed application for registration in the form required, together with the initial registration Fees set out in Schedule 1;
 - 2.1.7.2 an official transcript which specifies the degree earned or other evidence satisfactory to the Registration Committee of completion of education requirements;
 - 2.1.7.3 a completed authorization for release of information in the form required, to be sent to the regulatory authority in any jurisdiction in which the Applicant has practiced, for confirmation of the registration status of the Applicant;
 - 2.1.7.4 such other information as in the opinion of the Registration Committee is required to make a determination regarding the eligibility for registration of the Applicant;
 - 2.1.7.5 proof that the Applicant has Canadian citizenship or is a permanent resident of Canada or otherwise authorized to work in Canada in a health care profession;

- 2.1.7.6 any other outstanding Fee owed to the College;
 - 2.1.7.7 proof that the Applicant meets the requirements for a criminal record check authorization required by the *Criminal Records Review Act*; and
 - 2.1.7.8 proof of professional liability insurance under section 5.0.
- 2.2 A Registrant in the Registrant class of Occupational Therapy: Provisional who fails to complete the conditions for registration in the Registrant class of Occupational Therapy: Full within two (2) years from the date of initial registration ceases to be registered.
- 2.3 Registration in the Registrant class of Occupational Therapy: Full must be granted by the Registration Committee to an Applicant who has been granted registration in the Registrant class of Occupational Therapy: Provisional under paragraph 2.1, has applied for full registration, and has:
- 2.3.1 successfully completed the required Examination approved by the College, and
 - 2.3.2 successfully completed any other requirements of the Registration Committee

3.0 Occupational Therapy: Temporary [previously Bylaw 44]

- 3.1 The Registration Committee may grant registration in the Registrant class of Occupational Therapy: Temporary to an Applicant who is registered or licensed to practice occupational therapy by a regulatory authority in another Canadian jurisdiction acceptable to the Registration Committee, for a period not to exceed ninety (90) consecutive days which may be divided into two (2) periods of forty-five (45) days in any twelve (12) month period, if the committee is satisfied that the Applicant is qualified to be so registered. The Registration Committee will require the Applicant to:
- 3.1.1 undertake to practise occupational therapy in British Columbia only during a specified time;
 - 3.1.2 provide proof of professional liability insurance under heading 5.0 for the period of the proposed registration in the Registrant class of Occupational Therapy: Temporary;
 - 3.1.3 agree to practise under terms acceptable to the Registration Committee; and
 - 3.1.4 deliver to the Registrar:
 - 3.1.4.1 proof of current and valid registration in good standing in the Canadian jurisdiction where they are currently registered or licensed;
 - 3.1.4.2 a signed application for temporary registration in the required form, together with the temporary Fee set out in Schedule 1;

- 3.1.4.3 meets the requirements for a criminal record check authorization required by the *Criminal Records Review Act*; and
- 3.1.4.4 any other outstanding Fee owed to the College.

4.0 Occupational Therapy: Non-Practising [previously Bylaw 45]

4.1 The Registration Committee may grant registration in the Registrant class of Occupational Therapy: Non-Practising to an Applicant who:

- 4.1.1 submits an application in the required form and pays the Fees for registration in Schedule 1; and
- 4.1.2 was previously a Registrant in the Registrant class of Occupational Therapy: Full under the requirements of heading 1.0 or otherwise meets the requirements for registration in the Registrant class of Occupational Therapy: Full under the requirements of heading 1.0 at the time of their application for registration in the Registrant class of Occupational Therapy: Non-Practising.

5.0 Professional Liability Insurance [previously Bylaw 48]

5.1 Registrants in the Registrant classes of Occupational Therapy: Full, Occupational Therapy: Provisional, and Occupational Therapy: Temporary must obtain and at all times maintain professional liability insurance with a limit of liability of not less than five million dollars (\$5,000,000) per occurrence insuring against liability arising from an error.

5.2 Registrants must provide written proof of professional liability insurance to the Registrar on request.

6.0 Entry to Practice Examinations [previously Bylaw 50]

6.1 The approved entry to practice Examination are set out in Table 2 to this Schedule.

6.2 The Registration Committee is responsible for all matters relating to entry to practice Examinations, including but not limited to:

- 6.2.1 content of the entry to practice Examinations; and
- 6.2.2 selection of a provider of the Examination.

7.0 Annual Registration Renewal [previously Bylaw 51]

7.1 On or before May 30 each year, the Registrar must notify Registrants of:

- 7.1.1 the annual renewal deadline of June 30;

- 7.1.2 the requirement to pay the annual registration Fee by June 30 of each year; and
 - 7.1.3 the consequences for failure to renew registration by the June 30 renewal deadline.
- 7.2 The Registration Committee must renew registration if a Registrant:
- 7.2.1 provides an application for renewal in the required form by June 30 each year together with the annual registration renewal Fee set out in Schedule 1;
 - 7.2.2 provides evidence of successful completion of:
 - 7.2.2.1 six hundred (600) hours of service within the scope of practice of the profession in the three (3) years immediately preceding the date of application; or
 - 7.2.2.2 has evidence of successful completion of a re-entry program approved by the Registration Committee within eighteen (18) months immediately preceding the date of application;
 - 7.2.3 pays any other outstanding Fee owed to the College;
 - 7.2.4 provides a declaration in the required form that the Applicant is in compliance with the Act, the *Occupational Therapists Regulation*, BC Reg. 286/2008, and the Bylaws, and is in compliance with any limits or conditions imposed on their registration;
 - 7.2.5 meets the quality assurance requirements under Schedule 19;
 - 7.2.6 meets the requirements for a criminal record check authorization required by the *Criminal Records Review Act*; and
 - 7.2.7 provides proof of professional liability insurance under heading 5.0,
and as a result of receipt of those materials, the Registration Committee is satisfied the Applicant meets the requirements for renewal.
- 7.3 The Registrar must cancel the registration of a Registrant who fails to renew by the June 30 deadline.
- 7.4 A Registrant who ceases to be registered under paragraph 7.3, may apply for reinstatement under heading 8.0, where they:
- 7.4.1 apply for reinstatement of registration in the required form not later than sixty (60) days following the expiration of their registration;
 - 7.4.2 are not in contravention of the Act, the *Occupational Therapists Regulation*, or the Bylaws; and
 - 7.4.3 pay the reinstatement of registration Fee and an additional late registration Fee in an amount equal to thirty-five percent (35%) of the annual registration Fee.

8.0 Reinstatement [previously Bylaw 53]

8.1 A Registrant in the Registrant class of Occupational Therapy: Non-Practising or a former Registrant whose registration is not suspended or cancelled under the Act, and who has been out of practice less than three (3) years may be restored to registration in the Registrant class of Occupational Therapy: Full by the Registration Committee where the Registrant in the Registrant class of Occupational Therapy: Non-Practising or former Registrant:

- 8.1.1 satisfies the requirements of paragraph 1.2;
- 8.1.2 provides a signed application for reinstatement in the required form, together with the reinstatement of registration Fee set out in Schedule 1;
- 8.1.3 pays any other outstanding Fee owed to the College;
- 8.1.4 provides proof of having met the quality assurance requirements in Schedule 19 as though they had not ceased to be registered;
- 8.1.5 provides evidence satisfactory to the Registration Committee of their good character and fitness to practise consistent with the responsibilities of a Registrant and the standards expected of a Registrant;
- 8.1.6 provides a completed authorization for release of information in the required form, to be sent to the regulatory authority in any jurisdiction in which the Applicant has practiced since registration with the College;
- 8.1.7 meets the requirements for a criminal record check authorization required by the *Criminal Records Review Act*; and
- 8.1.8 provides proof of professional liability insurance under heading 5.0.

8.2 A Registrant in the Registrant class of Occupational Therapy: Non-Practising or a former Registrant whose registration is not suspended or cancelled under the Act and who has been out of practice for three (3) years or more may be restored to full registration by the Registration Committee where the non-practising Registrant or former Registrant:

- 8.2.1 applies for provisional registration for the purpose of completing a re-entry program;
- 8.2.2 provides a signed application for reinstatement in the required form, together with the reinstatement of registration Fee set out in Schedule 1;
- 8.2.3 pays any other outstanding Fee owed to the College;
- 8.2.4 provides evidence satisfactory to the Registration Committee of his or her good character and fitness to practise consistent with the responsibilities of a Registrant and the standards expected of a Registrant;

- 8.2.5 provides a completed authorization for release of information in the required form, to be sent to the regulatory authority in any jurisdiction in which the Applicant has practiced since registration with the College;
- 8.2.6 meets the requirements for a criminal record check authorization required by the *Criminal Records Review Act*;
- 8.2.7 provides proof of professional liability insurance under heading 5.0; and
- 8.2.8 successfully completes a re-entry program established by the Registration Committee.

9.0 Reinstatement Following Disciplinary Action [previously Bylaw 54]

- 9.1 Under this heading, “Disciplined Person” means a former Registrant whose previous registration was cancelled under Part 3 of the Act, and who is eligible for reinstatement of registration.
- 9.2 Subject to paragraph 9.3, a Disciplined Person must be reinstated if they:
 - 9.2.1 meet the requirements for registration under heading 1.0;
 - 9.2.2 are not in contravention of the Act, *Occupational Therapists Regulation* or the Bylaws;
 - 9.2.3 provide evidence satisfactory to the Registration Committee:
 - 9.2.3.1 of their good character and fitness to practice consistent with the responsibilities of a Registrant and the standards expected of a Registrant;
 - 9.2.3.2 that their registration will not pose an undue risk to public health or safety; and
 - 9.2.3.3 that their registration will not otherwise be contrary to the public interest; and
 - 9.2.4 deliver to the Registrar:
 - 9.2.4.1 a signed reinstatement application in the required form, together with the reinstatement of registration Fee set out Schedule 1;
 - 9.2.4.2 a completed authorization for release of information in the form required, to be sent to the regulatory authority in any jurisdiction in which the Applicant has practiced;
 - 9.2.4.3 proof that the person meets the requirements for a criminal record check authorization required by the *Criminal Records Review Act*;
 - 9.2.4.4 any other Fee owed to the College; and
 - 9.2.4.5 proof of professional liability insurance as required under heading 5.0.

- 9.3 In the case of a Disciplined Person whose previous registration has been cancelled for three (3) or more consecutive years, they must successfully complete a re-entry program approved by the Registration Committee.

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Table 1: Recognized Occupational Therapy Programs in Canada

All degrees conferred within the dates identified are recognized as meeting entry to practice requirements.

University	Entry Level Degree	Date Degree FIRST Conferred	Date Degree LAST Conferred
Dalhousie University	BSc(OT) → Bachelor of Science in Occupational Therapy MSc(OT) → Master of Science in Occupational Therapy	1985 2008	2008
Université du Québec à Trois-Rivières	Maîtrise en ergothérapie (M. Sc.)	2012	
Université Laval	B. Sc. Santé (ergothérapie) □ Baccalauréat ès sciences de la santé (ergothérapie) Maîtrise en ergothérapie (M. Erg.)	1973 2012	2010
Université de Sherbrooke	Maîtrise en ergothérapie (M. ERG.)	2011	
Université de Montréal	B. Sc. (ergothérapie) □ Baccalauréat ès sciences (ergothérapie) Maîtrise ès sciences en ergothérapie (M. Sc.)	1972 2009	2009
McGill University	B. Sc. (Occ. Ther.) □ Bachelor of Science in Occupational Therapy Master of Science, Applied, in Occupational Therapy (M.Sc.A. (O.T.))	1975 2010	2009
University of Ottawa	BSc(OT) → Bachelor of Science in Occupational Therapy MSc(OT) → Master of Health Sciences in Occupational Therapy	1991 2009	2009
Queen's University	BSc(OT) → Bachelor of Science in Occupational Therapy MSc(OT) → Master of Science in Occupational Therapy	1973 2006	2006

University of Toronto	BSc(OT) → Bachelor of Science in Occupational Therapy	1974	2002
	MSc(OT) → Master of Science in Occupational Therapy	2003	
McMaster University	BHSc(OT) → Bachelor of Health Science in Occupational Therapy	1992	2001
	MSc(OT) → Master of Science in Occupational Therapy	2000	
University of Western Ontario	BSc(OT) → Bachelor of Science in Occupational Therapy	1974	1998
	M.Cl.Sc.,OT → Master of Clinical Science in Occupational Therapy	1998	2003
	MSc(OT) → Master of Science in Occupational Therapy	2003	
University of Manitoba	BMR(OT) → Bachelor of Medical Rehabilitation (Occupational Therapy)	1979	2004
	MOT → Master of Occupational Therapy	2005	
University of Alberta	BSc(OT) → Bachelor of Science in Occupational Therapy	1978	2008
		2003	
	MSc(OT) → Master of Science in Occupational Therapy		
University of British Columbia	BSc(OT) → Bachelor of Science in Occupational Therapy	1986	2005
	MOT → Master of Occupational Therapy	2006	

Table 2: Entry to Practice Examinations

National Occupational Therapy Certification Exam (NOTCE)

The approved examination is the “National Occupational Therapy Certification Exam (NOTCE) – (formerly CAOT Exam) offered under the auspices of the Canadian Association of Occupational Therapists (CAOT). The purpose of the NOTCE *“is to ensure that all individuals who enter occupational therapy in Canada meet a minimum standard in the written application of theoretical and applied knowledge and professional behaviour in a practice situation.”*

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Schedule 4: Opticianry: Registration, Examinations, and Professional Liability Insurance

1.0 Opticianry: Registered Optician – Conditions and Requirements for Registration

[previously Bylaw 41]

- 1.1 Proof of graduation from one of the recognized opticianry education programs in Table 1 to this Schedule within three (3) years prior to the date of application;
- 1.2 Proof of successful completion within three (3) years prior to the date of application of the eyeglasses Examination conducted by the National Alliance of Canadian Optician Regulators;
- 1.3 Evidence satisfactory to the Registration Committee of the good character of the Applicant consistent with the responsibilities of a Registrant and the standards expected of a Registrant; and
- 1.4 Receipt by the Registrar of:
 - 1.4.1 a statutory declaration in in the required form;
 - 1.4.2 the application Fee specified in Schedule 1;
 - 1.4.3 an authorization for a criminal record check in the form required by *the Criminal Records Review Act*, RSBC 1996, c. 86; and
 - 1.4.4 proof of professional liability insurance as required under heading 9.0.
- 1.5 Despite paragraphs 1.1 through 1.4, an Applicant who is authorized to practice as the equivalent of an optician in another Canadian jurisdiction may be granted registration in the Registrant class of Opticianry: Registered Optician by the Registration Committee if the Applicant:
 - 1.5.1 satisfies the Registration Committee that they are currently authorized to practise as an optician in that other jurisdiction; and
 - 1.5.2 meets the requirements of paragraphs 1.3 and 1.4.
- 1.6 For the purpose of meeting the requirements established in paragraph 1.5, the Applicant must provide the Registrar with a letter or certificate of the Applicant's good standing from each body responsible for the regulation of opticianry or another health profession in a Canadian jurisdiction where the Applicant is, authorized to practice.
- 1.7 Despite paragraphs 1.1 through 1.4, the Registration Committee has discretion, to consider whether the Applicant's knowledge, skills and abilities are substantially equivalent to the

standards of academic or technical achievement and the competencies or other qualifications established in paragraph 1.1, and to grant registration on that basis, if the Applicant also meets the requirements established in paragraphs 1.2, 1.3, and 1.4.

2.0 Opticianry: Registered Contact Lens Fitter - Conditions and Requirements for Registration *[previously Bylaw 42]*

- 2.1 Proof of current registration in the Registrant class of Opticianry: Registered Optician under the requirements of heading 1.0;
- 2.2 Proof of graduation from one of the recognized contact lens fitter education programs in Table 1 to this Schedule within three (3) years prior to the date of application;
- 2.3 Proof of successful completion of the contact lens Examination conducted by the National Alliance of Canadian Optician Regulators within three (3) years prior to the date of application;
- 2.4 Evidence satisfactory to the Registration Committee of the good character of the Applicant consistent with the responsibilities of a Registrant and the standards expected of a Registrant; and
- 2.5 Receipt by the Registrar of:
 - 2.5.1 a statutory declaration in in the form required;
 - 2.5.2 the application Fee specified in Schedule 1;
 - 2.5.3 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*; and
 - 2.5.4 proof of professional liability insurance as required under heading 9.0.
- 2.6 Despite paragraphs 2.1 through 2.5, an Applicant who is authorized to practice as the equivalent of a contact lens fitter in another Canadian jurisdiction may be granted registration in the Registrant class of Opticianry: Registered Contact Lens Fitter by the Registration Committee if the Applicant:
 - 2.6.1 satisfies the Registration Committee that they are currently authorized to practise as an optician in that other jurisdiction; and
 - 2.6.2 meets the requirements of paragraphs 2.3 and 2.4.
- 2.7 For the purpose of meeting the requirements established in paragraph 2.6, the Applicant must provide the Registrar with a letter or certificate of the Applicant's good standing from each

body responsible for the regulation of opticianry or another health profession in a Canadian jurisdiction where the Applicant is, authorized to practice opticianry.

- 2.8 Despite paragraphs 2.1 through 2.5, the Registration Committee has discretion, to consider whether the Applicant's knowledge, skills and abilities are substantially equivalent to the standards of academic or technical achievement and the competencies or other qualifications established in paragraph 2.1, and to grant registration on that basis, if the Applicant also meets the requirements established in paragraphs 2.2, 2.3, and 2.4.

3.0 Opticianry: Non-Practising – Conditions and Requirements for Registration *[previously Bylaw 44]*

- 3.1 The Applicant is currently registered in the Registrant classes of Opticianry: Registered Optician or Opticianry: Registered Contact Lens Fitter.

- 3.2 Receipt by the Registrar of:

- 3.2.1 an application for registration in the Registrant classes of Opticianry: Non-Practising as specified by the Registrar;
- 3.2.2 any Fee specified in Schedule 1 for change in registration status from practising Registrant to non-practising Registrant;
- 3.2.3 any other Fee owed to the College; and
- 3.2.4 a statutory declaration in the form required.

- 3.3 The conditions and requirements for a Registrant in the Registrant class of Opticianry: Non-Practising to return to full registration under the Registrant classes of Opticianry: Registered Optician, Opticianry: Registered Contact Lens Fitter or for return of certification for independent automated refraction, despite paragraphs 1.1 through 1.5, paragraphs 2.1 through 2.6 and paragraph 1.2 in Schedule 10 *[Certified Practice]*, as the case may be, are:

- 3.3.1 the Registrant is not in contravention of the Act, the *Opticians Regulation*, BC Reg. 118/2010, the Bylaws or this Schedule; and

- 3.3.2 receipt by the Registrar of:

- 3.3.2.1 an application as specified by the Registrar pursuant to paragraphs 1.1 through 1.7 to return to registration in the Registrant classes of Opticianry: Registered Optician, Opticianry: Registered Contact Lens Fitter or for certification for independent automated refraction;

- 3.3.2.2 a letter or certificate, in a form satisfactory to the Registration Committee and dated within 60 days prior to the date of application, from each body responsible for the regulation of opticianry or another health profession in a

jurisdiction where the non-practising Registrant is, or has been, authorized to practise opticianry or another health profession, specifying particulars of any cancellation, suspension, limitation or conditions on the Registrant's entitlement to practise, or any investigation, review or proceeding which could lead to cancellation, suspension, limitation or conditions on the Registrant's entitlement to practise;

- 3.3.2.3 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*;
- 3.3.2.4 proof of completion of the requirements in Schedule 20 [*Quality Assurance*];
- 3.3.2.5 the Fee for change in registration status from Registrant class of Opticianry: Non-Practising to Registrant class of Opticianry: Registered Optician specified in Schedule 1;
- 3.3.2.6 any other Fee owed to the College;
- 3.3.2.7 proof of professional liability protection or insurance coverage as required under heading 9.0; and
- 3.3.2.8 evidence satisfactory to the Registration Committee that the Registrant in the Registrant class of Opticianry: Non-Practising remains a person of good character and fitness suitable for registration as a member of the College.

3.4 A person must be registered in the Registrant class of Opticianry: Non-Practising if the person is not employed in the Province of British Columbia in a position in which they are performing the activities stated in the scope of practice set out in section 4 of the *Opticians Regulation*.

4.0 Opticianry: Temporary – Conditions and Requirements for Registration [*previously Bylaw 45*]

4.1 An Applicant may be granted registration in the Registrant class of Opticianry: Temporary by the Registration Committee for a period of up to 90 days in any 12-month period where the Applicant:

- 4.1.1 is currently registered as an optician or a contact lens fitter in good standing in another Canadian jurisdiction; and
- 4.1.2 upon receipt by the Registrar of:
 - 4.1.2.1 an application for registration in the Registrant class of Opticianry: Temporary as specified by the Registrar;
 - 4.1.2.2 a notarized copy or other evidence satisfactory to the Registration Committee and dated within 60 days prior to the date of application, from each body

responsible for the regulation of opticianry in a jurisdiction where the Applicant is, or has been, authorized to practise opticianry, confirming the Applicant's status in that jurisdiction and evidence satisfactory to the Registration Committee that the Applicant is the person named therein;

- 4.1.2.3 the application Fee specified in Schedule 1;
- 4.1.2.4 any other Fee owed to the College;
- 4.1.2.5 proof of liability insurance as required under heading 9.0; and
- 4.1.2.6 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*.

4.2 A Registrant in the Registrant class of Opticianry: Temporary may apply to the Registration Committee for one renewal of temporary registration.

5.0 Renewal of Registration [previously Bylaw 47]

5.1 No later than thirty (30) days before an annual Fee is due, the Registrar must deliver to Registrants notice of the amount of the Fee, and the day on which the Fee is due.

5.2 The Registrar must renew a registration if the Registrant:

- 5.2.1 applies to the Registrar and pays the Fee for renewal of registration;
- 5.2.2 pays any other outstanding Fees owed to the College; and
- 5.2.3 attests that the Registrant is in compliance with the Act, the *Opticians Regulation*, and the Bylaws, and is in compliance with any limits or conditions imposed under section 32.2, 32.3, 33, 35, 36, 37.1, 38, 39 or 39.1 of the Act; and
- 5.2.4 has met the requirements of the College's continuing education program in Schedule 20 [*Quality Assurance*].

6.0 Cancellation for Non-Payment [previously Bylaw 48]

6.1 Where a Registrant fails to pay an annual renewal of registration Fee on or before March 31, their registration is cancelled unless the Registrar otherwise directs.

7.0 Reinstatement – Failure to Renew Registration [previously Bylaw 49]

7.1 The conditions and requirements for reinstatement of the registration of a former Registrant whose previous registration was cancelled within the last three (3) years under the requirements of heading 1.0 are, despite paragraphs 1.1 through 1.4 or 1.5, 2.1 through 2.5 or 2.6, or 3.3:

- 7.1.1 the former Registrant was a Registrant in Good Standing upon the cancellation of their previous registration;
- 7.1.2 the former registrant is not in contravention of the Act, the *Opticians Regulation*, or the Bylaws; and
- 7.1.3 receipt by the Registrar of:
 - 7.1.3.1 a reinstatement application in the form required by the Registrar;
 - 7.1.3.2 proof of completion of all applicable requirements of the Quality Assurance Program in Schedule 20;
 - 7.1.3.3 the reinstatement of certificate of registration Fee as specified in Schedule 1;
 - 7.1.3.4 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*;
 - 7.1.3.5 any other Fee owed to the College, including without limitation any Fee still owing under paragraph 5.2.2; and
 - 7.1.3.6 proof of professional liability protection or insurance coverage as required under heading 9.0.
- 7.2 In the case that requirements under subparagraph 7.1.3.2 are not met, the Registration Committee will determine whether the Applicant must meet any Examination and continuing education or continuing competency program requirements of the Registration Committee in order to be reinstated.
- 7.3 The conditions and requirements for reinstatement of the registration of a former Registrant whose previous registration was cancelled three (3) or more years ago are, despite sections 1.1 through 1.4 or 1.5, or 2.1 through 2.5 or 2.6, or 3.3:
 - 7.3.1 the former Registrant was registered in the Registrant classes of Opticianry: Registered Optician, Opticianry: Registered Contact Lens Fitter, or Opticianry: Non-Practising in Good Standing upon cancellation of their previous registration;
 - 7.3.2 the former Registrant is not in contravention of the Act, the *Opticians Regulation*, or the Bylaws;
 - 7.3.3 evidence satisfactory to the Registration Committee of good character and fitness of the Applicant consistent with the responsibilities of a Registrant and the standards expected of a Registrant;
 - 7.3.4 receipt by the Registrar of:
 - 7.3.4.1 a reinstatement application in the form required by the Registrar;

- 7.3.4.2 a letter or certificate, in a form satisfactory to the Registration Committee and dated within 60 days prior to the date of application, from each body responsible for the regulation of opticianry or another health profession in a jurisdiction where the former Registrant is, or has been, authorized to practise opticianry or another health profession, specifying particulars of any cancellation, suspension, limitation or conditions on the former Registrant's entitlement to practise, or any investigation, review or proceeding which could lead to cancellation, suspension, limitation or conditions on the former Registrant's entitlement to practise;
- 7.3.4.3 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*;
- 7.3.4.4 the reinstatement Fee and the reinstatement of registration Fee specified in Schedule 1;
- 7.3.4.5 any other Fee owed to the College, including without limitation any Fee still owing under section paragraph 5.2.2; and
- 7.3.4.6 proof of professional liability protection or insurance coverage as required under heading 9.0; and
- 7.3.5 completion of an assessment approved by the Registration Committee, who will determine whether the Applicant must meet any Examination and continuing education or continuing competency program requirements of the Registration Committee in order to be reinstated.

8.0 Reinstatement Following Disciplinary Action [previously Bylaw 50]

8.1 In this section, "Disciplined Person" means:

- 8.1.1 a former Registrant in the Registrant classes of Opticianry: Registered Optician, Opticianry: Registered Contact Lens Fitter or Opticianry: Non-Practising whose previous registration was cancelled or suspended:
 - 8.1.1.1 under section 32.2, 32.3, 33, 35, 36, 37.1, 38, 39 or 39.1 of the Act; or
 - 8.1.1.2 under heading 6.0 or on the agreement or request of the former Registrant at a time when it was suspended under section 32.2, 32.3, 33, 35, 36, 37.1, 38, 39 or 39.1 of the Act,

of which the expiration date of the suspension or cancellation of registration has passed.

- 8.2 The conditions and requirements for reinstatement of the registration of a Disciplined Person, despite the requirements under headings 1.0, 2.0, 4.0, or 7.0, and subject to any applicable order or agreement under the Act, are:
- 8.2.1 the Disciplined Person is not in contravention of the Act, the *Opticians Regulation*, or the Bylaws;
 - 8.2.2 provision of information satisfactory to the Registration Committee:
 - 8.2.2.1 of the good character and fitness of the Disciplined Person consistent with the responsibilities of a Registrant and the standards expected of a Registrant;
 - 8.2.2.2 that the goals of deterrence and rehabilitation have been met; and
 - 8.2.2.3 that the Disciplined Person's registration will not
 - 8.2.2.3.1 pose an undue risk to public health or safety; or
 - 8.2.2.3.2 otherwise be contrary to the public interest;
 - 8.2.3 receipt by the Registrar of:
 - 8.2.3.1 a reinstatement application in the form required by the Registrar;
 - 8.2.3.2 a letter or certificate, in a form satisfactory to the Registration Committee and dated within 60 days prior to the date of application, from each body responsible for the regulation of opticianry or another health profession in a jurisdiction where the Disciplined Person is, or has been, authorized to practise opticianry or another health profession, specifying particulars of any cancellation, suspension, limitation or conditions on the Disciplined Person's entitlement to practise, or any investigation, review or proceeding which could lead to cancellation, suspension, limitation or conditions on the Disciplined Person's entitlement to practise;
 - 8.2.3.3 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*;
 - 8.2.3.4 proof that the Disciplined Person has successfully completed all applicable Quality Assurance Program requirements;
 - 8.2.3.5 the applicable registration reinstatement Fee specified in Schedule 1;
 - 8.2.3.6 any other Fee owed to the College, including without limitation any Fee still owing under section paragraph 5.2.2; and
 - 8.2.3.7 proof of professional liability protection or insurance coverage as required under heading 9.0; and

8.2.4 in the case of a Disciplined Person who is a former Registrant whose previous registration has been cancelled for three (3) consecutive years or more prior to the date of application under this section, completion of an assessment approved by the Registration Committee, who will determine whether the Applicant must meet any Examination and continuing education or continuing competency program requirements of the Registration Committee in order to be reinstated.

8.3 Evidence of rehabilitation is not required where the Registration Committee decides, on other grounds, not to reinstate the Applicant.

9.0 Liability Protection or Insurance Coverage *[previously Bylaw 64]*

9.1 All Registrants must obtain and at all times maintain insurance coverage for negligence in an amount of at least \$1,000,000.00 dollars per claim in a form that is satisfactory to the Registrar.

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Table 1: Recognized Opticianry Education Programs

1.0 The accredited opticianry education programs of the following education providers are recognized by the College, as meeting the standards of academic or technical achievement required for registration, for the purposes of this Schedule:

- Georgian College
- Douglas College
- Seneca College
- Northern Alberta Institute of Technology
- Southern Alberta Institute of Technology
- Stenberg College
- Collège La Cité

2.0 The following education providers are recognized by the College, under terms and conditions established by the Board, as meeting the standards of academic or technical achievement required for certification in automated refraction, for the purposes of this Schedule:

- Northern Alberta Institute of Technology
- Stenberg College
- Douglas College

Schedule 5: Optometry: Registration, Examinations, and Professional Liability Insurance

1.0 Definitions

1.1 In this Schedule:

“**Full Registrant**” means:

- (a) a Registrant in the Registrant class of Optometry: Therapeutic Qualified established by Bylaw 5.4(a);
- (b) a Registrant in the Registrant class of Optometry: Non-Therapeutic Qualified established by Bylaw 5.4(b); or
- (c) a Registrant in the Registrant class of Optometry: Limited established by Bylaw 5.4(c);

“**Jurisprudence Examination**” means the jurisprudence Examination approved by the Registration Committee;

“**National Qualifying Examination**” means the entry to practice Examination administered by the Optometry Examining Board of Canada from time to time;

“**National Qualifying Examination Equivalent**” means Examinations offered in other jurisdictions which are equivalent to the National Qualifying Examination in the opinion of the Registration Committee;

“**Recognized Jurisdiction**” means a jurisdiction recognized by the Registration Committee under heading 13.0 and specified under Table 2 to this Schedule;

“**Recognized School of Optometry**” means a program recognized by the Registration Committee under heading 12.0 and specified under Table 1 to this Schedule;

“**Therapeutic Pharmaceutical Agents**” means therapeutic pharmaceutical agents as defined in the Regulation.

2.0 Application for Registration *[previously Bylaw 52]*

2.1 An Applicant must deliver to the Registrar:

- 2.1.1 a registration application in the required form including all documents required by that form;

- 2.1.2 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*, RSBC 1996, c. 86;
 - 2.1.3 proof that the Applicant is a Canadian citizen or a permanent resident of Canada or otherwise authorized to work in Canada in a health care profession;
 - 2.1.4 in the case of an Applicant who has practised optometry or another health profession in another jurisdiction, an authorization for a criminal record check in that jurisdiction or a criminal record report in a form satisfactory to the Registrar;
 - 2.1.5 the registration application Fee set out in Schedule 1; and
 - 2.1.6 any other Fee owed to the College.
- 2.2 An Applicant who has practised or is practising optometry in another jurisdiction, or who has practised or is practising another health profession in British Columbia or another jurisdiction, must deliver to the Registrar:
- 2.2.1 a letter from each regulatory body that has registered, licensed, certified or otherwise authorized the person to practise optometry or another health profession, confirming the person's good standing in the other jurisdiction at the time the Applicant ceased practising in the other jurisdiction or ceased practising the other health profession or both, as applicable, and confirming the person's good standing in any health profession in which they are currently practising; and
 - 2.2.2 a statement from the Applicant that lists all outstanding complaints, claims, actions, inquiries or proceedings against them in British Columbia, or in any other jurisdiction; and
 - 2.2.3 both as the case may be, in relation to the practice of a health profession.
- 2.3 Despite subparagraph 3.1.3, and paragraphs 4.1, and 5.1, an Applicant who has not successfully completed the National Qualifying Examination or the National Qualifying Examination Equivalent on up to three attempts may be granted registration in the Registrant class to which the person applies if that person:
- 2.3.1 successfully completes a supplementary Examination as directed by the Registration Committee; and
 - 2.3.2 completes retraining as specified by the Registration Committee.
- 2.4 An Applicant who fails a supplementary Examination three times will not be granted registration in any Registrant class.

3.0 Optometry: Therapeutic Qualified [previously Bylaw 53]

- 3.1 An Applicant applying for registration in the Registrant class of Optometry: Therapeutic Qualified must satisfy the Registration Committee that they:
- 3.1.1 have graduated from a recognized school of optometry;
 - 3.1.2 have passed the Jurisprudence Examination;
 - 3.1.3 have passed the National Qualifying Examination or the National Qualifying Examination Equivalent;
 - 3.1.4 are a person of good character suitable for registration as a Registrant of the College; and
 - 3.1.5 are qualified, through meeting the requirements set out in Table 3 to this Schedule, to prescribe, dispense and administer Therapeutic Pharmaceutical Agents as set out in the *Optometrists Regulation*, BC Reg. 33/2009.
- 3.2 Despite paragraph 3.1, an Applicant who is currently authorized to practice optometry in a recognized jurisdiction at the time of submitting their application must only satisfy the Registration Committee that they:
- 3.2.1 meet the requirements under heading 2.0;
 - 3.2.2 have passed the Jurisprudence Examination; and
 - 3.2.3 are a person of good character suitable for registration as a Registrant of the College.
- 3.3 Despite subparagraphs 3.1.1 and 3.1.3, the Registration Committee has discretion in satisfying itself that the Applicant meets the conditions or requirements for registration, to consider whether the Applicant's knowledge, skills and abilities are substantially equivalent to the standards of academic or technical achievement and the competencies or other qualifications established in paragraph 3.1, and to grant registration on that basis.

4.0 Optometry: Non-Therapeutic Qualified [previously Bylaw 54]

- 4.1 An Applicant applying for registration in the Registrant class of Optometry: Non-Therapeutic Qualified must satisfy the Registration Committee that they meet all of the requirements for registration as a Registrant in the Registrant class of Optometry: Therapeutic Qualified as set out under heading 3.0, except 3.1.5.
- 4.2 An Applicant who is qualified for registration under heading 2.0 must not be granted registration in the Registrant class of Optometry: Non-Therapeutic Qualified unless they:
- 4.2.1 practised optometry in British Columbia or another jurisdiction prior to April 1, 2009, and

- 4.2.2 were not eligible to prescribe pharmaceutical agents in the course of their previous practice of optometry.
- 4.3 Despite paragraph 4.1, an Applicant who is currently authorized to practice optometry in a recognized jurisdiction at the time of submitting their application must only satisfy the Registration Committee that they:
 - 4.3.1 meet the requirements under heading 2.0;
 - 4.3.2 have passed the Jurisprudence Examination; and
 - 4.3.3 are a person of good character suitable for registration as a Registrant of the College.
- 4.4 Despite paragraph 4.1, the Registration Committee has discretion in satisfying itself that the Applicant meets the conditions or requirements for registration, to consider whether the Applicant's knowledge, skills and abilities are substantially equivalent to the standards of academic or technical achievement and the competencies or other qualifications established in paragraph 4.1, and to grant registration on that basis.

5.0 Optometry: Academic *[previously Bylaw 55]*

- 5.1 An Applicant applying for registration in the Registrant class of Optometry: Academic must meet all the requirements for registration under the Registrant class of Optometry: Therapeutic Qualified as set out under heading 3.0.

6.0 Optometry: Non-Practising *[previously Bylaw 56]*

- 6.1 An Applicant applying for registration under the Registrant class of Optometry: Non-Practising must satisfy the Registration Committee that they:
 - 6.1.1 are currently registered as a Full Registrant or a Registrant in the Registrant class of Optometry: Academic, or are qualified for registration as a Full Registrant or a Registrant in the Registrant class of Optometry: Academic; and
 - 6.1.2 have passed the Jurisprudence Examination, and deliver to the Registration Committee a statutory declaration in the required form confirming that the Applicant will not provide optometric services in British Columbia while registered under this heading.
- 6.2 An Applicant may only be granted registration in the Registrant class of Optometry: Non-Practising for a limit of three consecutive years subject to the discretion of the Registration Committee.

7.0 Optometry: Limited *[previously Bylaw 60]*

- 7.1 The Registration Committee may grant registration in the Registrant class of Optometry: Limited to any Applicant who does not meet the requirements established under headings 3.0 or 4.0 for a period of up to one year where the Applicant:
- 7.1.1 may, in the opinion of the Registration Committee, be reasonably expected to satisfy the requirements set out in subparagraphs 3.1.1 and 3.1.3, within the period of registration in Registrant class of Optometry: Limited;
 - 7.1.2 may, in the opinion of the Registration Committee, practise in the Registrant class of Optometry: Limited without any risk to public health and safety;
 - 7.1.3 provides a signed application for registration under the Registrant class of Optometry: Limited in a form approved by the Registration Committee;
 - 7.1.4 pays the application Fee set out in Schedule 1; and
 - 7.1.5 pays any other Fee owed to the College.
- 7.2 Registration under the Registrant class of Optometry: Limited may be renewed once for a period of up to one year.
- 7.3 Registration in the Registrant classes of Optometry: Therapeutic Qualified and Optometry: Non-Therapeutic Qualified may be granted by the Registration Committee to an Applicant who has been granted registration in the Registrant class of Optometry: Limited under paragraph 7.1 who completes the period of supervised practice and meets the requirements under headings 3.0 or 4.0 as applicable.

8.0 Professional Liability Insurance Requirement *[previously Bylaw 61]*

- 8.1 Each Full Registrant or Registrant in the Registrant class of Optometry: Academic must obtain and at all times maintain professional liability insurance with a limit of liability not less than \$2,000,000 per occurrence insuring against liability arising from an error, omission or negligent act of the Registrant.
- 8.2 Each Full Registrant or Registrant in the Registrant class of Optometry: Academic must obtain and at all times maintain professional liability insurance with a limit of liability not less than \$2,000,000 per occurrence insuring against liability arising from an error, omission or negligent act of an employee of the Registrant.
- 8.3 Each Full Registrant or Registrant in the Registrant class of Optometry: Academic must provide written proof of professional liability insurance to the Registrar on request.

9.0 Registration Renewal *[previously Bylaw 63]*

- 9.1 A Registrant seeking renewal of their registration must deliver to the Registrar:
 - 9.1.1 a registration renewal application in the required form;
 - 9.1.2 the registration renewal Fee set out in Schedule 1;
 - 9.1.3 any other outstanding Fee owed to the College;
 - 9.1.4 proof of completion of all applicable requirements of the Quality Assurance Program in Schedule 21; and
 - 9.1.5 in the case of application for renewal as a Full Registrant or a Registrant in the Registrant class of Optometry: Academic, proof of professional liability insurance.
- 9.2 A Registrant seeking renewal of registration under this heading must ensure that the documents and monies required under paragraph 8.1 are received by the Registrar on or before October 31 in each year.
- 9.3 A Registrant whose documents or monies described in paragraph 9.1 are received by the Registrar in whole or in part after October 31 in a year must ensure that the late Fee set out in Schedule 1 is received by the Registrar on or before November 30 in the year.
- 9.4 The Registrar must renew the registration of each Registrant in Good Standing who complies with the requirements under this heading and must issue to the Registrant a receipt in the required form.
- 9.5 Registration renewed under this heading expires on December 1 in the following year.
- 9.6 A Registrant whose registration is not renewed under this heading on or before November 30 in a year ceases to be registered.
- 9.7 The Registrar must deliver notice of the renewal and late Fees referred to under this heading, together with a copy of the required form, to each Registrant no later than October 1 in each year.

10.0 Reinstatement *[previously Bylaw 64]*

- 10.1 A former Registrant or Registrant in the Registrant class of Optometry: Non-Practising whose registration is not suspended or cancelled under section 39 of the Act and who has been out of practice for less than one year may be restored to the Register by the Registration Committee where the Registrant:
 - 10.1.1 provides a signed application for reinstatement in the required form;

- 10.1.2 provides proof of completion of all applicable requirements of the Quality Assurance Program in Schedule 21 as though they had not ceased to be registered;
 - 10.1.3 pays the registration renewal Fee set out in Schedule 1; and
 - 10.1.4 pays any other Fee owed to the College.
- 10.2 A former Registrant or Registrant in the Registrant class of Optometry: Non-Practising whose registration is not suspended or cancelled under section 39 of the Act and who has been out of practice for more than one year but less than three years may be restored to the Register by the Registration Committee where the Registrant:
- 10.2.1 provides a signed application for reinstatement in the required form;
 - 10.2.2 successfully completes an Examination which may be required by the Registration Committee in its discretion;
 - 10.2.3 provides proof of completion of all applicable requirements of the Quality Assurance Program in Schedule 21;
 - 10.2.4 pays the registration renewal Fee set out in Schedule 1; and
 - 10.2.5 pays any other Fee owed to the College.
- 10.3 A former Registrant or Registrant in the Registrant class of Optometry: Non-Practising whose registration is not suspended or cancelled under section 39 of the Act and who has been out of practice for more than three years may be granted registration under the Registrant class of Optometry: Limited by the Registration Committee where the Registrant:
- 10.3.1 provides a signed application for reinstatement in the required form;
 - 10.3.2 successfully completes an Examination required by the Registration Committee;
 - 10.3.3 provides proof of completion of all applicable requirements of the Quality Assurance Program in Schedule 21;
 - 10.3.4 in the opinion of the Registration Committee may practice as a Registrant in the Registrant class of Optometry: Limited without any risk to public health and safety;
 - 10.3.5 pays the registration renewal Fee set out in Schedule 1; and
 - 10.3.6 pays any other Fee owed to the College.
- 10.4 The registration of a person who has been granted registration in the Registrant class of Optometry: Limited under paragraph 10.3 may be renewed for a further period of up to one year by the Registration Committee.

- 10.5 A person who has been granted registration in the Registrant class of Optometry: Limited under paragraph 10.3 may only perform the services of a Full Registrant under the supervision of a Full Registrant.
- 10.6 A person who has been granted registration in the Registrant class of Optometry: Limited under paragraph 10.3 and who was formerly a Full Registrant may be restored or reinstated to the Register upon completion of a one year period of supervised practice.

11.0 Reinstatement following Disciplinary Action *[previously Bylaw 66]*

11.1 In this section, “**Disciplined Person**” means:

- 11.1.1 a former Registrant whose registration was suspended or cancelled under section 32.2, 32.3, 33, 35, 36, 37.1, 38, 39 or 39.1 of the Act; or
- 11.1.2 a person whose certificate of registration was suspended or cancelled under section 30 of the *Optometrists Act*, RSBC 1996, c. 342, and who is eligible to apply for reinstatement of registration.
- 11.2 The registration of a Disciplined Person must, subject to sections 20 and 39 of the Act and paragraph 4.2 of this Schedule, be reinstated by the Registration Committee if the Disciplined Person:
- 11.2.1 is not in contravention of the Act, the regulations and the Bylaws;
- 11.2.2 delivers to the Registrar:
- 11.2.2.1 a registration reinstatement application in the required form;
- 11.2.2.2 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*;
- 11.2.2.3 in the case of an Applicant who has practised optometry or another health profession in another jurisdiction, an authorization for a criminal record check in that jurisdiction;
- 11.2.2.4 in the case of an application for reinstatement as a Full Registrant, proof of completion of all requirements under heading 4.0 of Schedule 21 *[Quality Assurance]* as though the Applicant had been a Full Registrant for the period in which they were out of practice;
- 11.2.2.5 the registration reinstatement Fee set out in Schedule 1;
- 11.2.2.6 any other Fee owed to the College;

- 11.2.2.7 evidence satisfactory to the Registration Committee that the Applicant is a person of good character suitable for registration as a Registrant of the College; and
- 11.2.2.8 a letter from each regulatory body that has previously registered, licensed, certified or otherwise authorized the person to practice optometry or another health profession, confirming the person's good standing in the other jurisdiction, the other health profession, or both as applicable; and
- 11.2.3 successfully completes an assessment of optometry at the discretion of the Registration Committee; and
- 11.2.4 satisfies the Registration Committee that their registration will not:
 - 11.2.4.1 pose an undue risk to public health or safety; or
 - 11.2.4.2 otherwise be contrary to the public interest.

12.0 Jurisprudence Examination *[previously Bylaw 67]*

- 12.1 The Registration Committee must approve a Jurisprudence Examination for Applicants for registration under this Schedule which may be scheduled at the discretion of the Registrar.

13.0 Recognition of Schools of Optometry *[previously Bylaw 68]*

- 13.1 The Registration Committee may review an optometry program in a Canadian province or another jurisdiction for the purpose of making a recommendation to the Board that the program be a recognized school of optometry for the purposes of this Schedule.
- 13.2 The Board may, upon recommendation from the Registration Committee under paragraph 13.1, recognize an optometry program in a Canadian province or another jurisdiction as a recognized school of optometry for the purposes of this Schedule.
- 13.3 The Registration Committee must publish and maintain a list of all recognized programs of optometry in Table 1 to this Schedule.

14.0 Recognition of Other Jurisdictions *[previously Bylaw 69]*

- 14.1 The Registration Committee may review the practice and regulation of optometry in a Canadian province or another jurisdiction for the purpose of recognizing a jurisdiction for the purposes of this Schedule.

- 14.2 The Board may, upon recommendation from the Registration Committee under paragraph 14.1, recognize a jurisdiction as a recognized jurisdiction for the purposes of this Schedule.
- 14.3 The Registrar must publish and maintain a list of all recognized jurisdictions in Table 2 to this Schedule.

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Table 1: Recognized Schools of Optometry

The optometry programs of the following institutions are recognized schools of optometry for the purposes of this Schedule:

CANADA

École d'Optométrie, University of Montreal

University of Waterloo School of Optometry and Vision Science

UNITED STATES

Ferris State University Michigan College of Optometry

Illinois College of Optometry

Indiana University School of Optometry

Inter American University of Puerto Rico School of Optometry

MCPHS University School of Optometry

Midwestern University Arizona College of Optometry

New England College of Optometry

Northeastern State University Oklahoma College of Optometry

Nova Southeastern University College of Optometry

Ohio State University College of Optometry

Pacific University College of Optometry

Pennsylvania College of Optometry at Salus University

Southern California College of Optometry at Marshall B. Ketchum University

Southern College of Optometry

State University of New York, State College of Optometry

University of Alabama at Birmingham School of Optometry

University of California, Berkeley, School of Optometry

University of Houston, College of Optometry

University of Missouri - St. Louis, School of Optometry

University of the Incarnate Word Rosenberg School of Optometry

Western University of Health Sciences College of Optometry

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Table 2: Recognized Jurisdictions

The following jurisdictions are recognized for the purposes of this Schedule:

- Alberta
- Manitoba
- New Brunswick
- Newfoundland and Labrador
- Northwest Territories
- Nova Scotia
- Nunavut
- Ontario
- Prince Edward Island
- Quebec
- Saskatchewan
- Yukon Territory

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Table 3: TPA Requirements for Therapeutic Qualified Registration

For the purpose of meeting the requirement in subparagraph 3.1.5, an Applicant for registration in the Registrant class of Optometry: Therapeutic Qualified under heading 3.0 must satisfy the Registration Committee that one of the following applies:

- 1.0 Within ten years of applying for registration under this class, graduation from a recognized school of optometry;
- 2.0 The Applicant has:
 - 2.1 at any time, graduated from a recognized school of optometry,
 - 2.2 within ten years of applying for registration under this class, practised optometry in a Canadian or American jurisdiction in which the Applicant was authorized to prescribe, dispense and administer Therapeutic Pharmaceutical Agents; and
 - 2.3 completed, in the jurisdiction referred to in subparagraph 3.2, the required continuing education and the minimum practice hours required in that jurisdiction, to retain the Applicants authorization to prescribe, dispense and administer Therapeutic Pharmaceutical Agents;
- 3.0 Within ten years of applying for registration under this class, successfully completed the ocular therapeutics section of the National Qualifying Examination;
- 4.0 Within ten years of applying for registration under this class, successfully completed the Treatment and Management of Ocular Disease section of the National Board of Examiners in Optometry;
- 5.0 Within five years of applying for registration under this class, successfully completed a 100 hour course in ocular therapeutics;
- 6.0 Successfully completed a 20 hour therapeutic pharmaceutical agent updating course given at any time after January 1, 2004 and has also successfully completed one of the following:
 - 6.1 a 100 hour course in ocular therapeutics;
 - 6.2 the Treatment and Management of Ocular Disease section of the National Board of Examiners in Optometry; or
 - 6.3 the ocular therapeutics section of the national qualifying examination.

Schedule 6: Physical Therapy: Registration, Examinations, and Professional Liability Insurance

1.0 Definitions

1.1 In this Schedule:

“**Jurisprudence Examination**” means the provincial regulatory knowledge examination approved by the Registration Committee;

2.0 Application for Registration *[previously Bylaw 42]*

2.1 An Applicant for registration in any Registrant class must deliver the following to the Registrar:

- 2.1.1 a completed registration application, applicable to the class of registration applied for, in the required form;
- 2.1.2 evidence satisfactory to the Registration Committee of the good character of the Applicant consistent with the responsibilities and standards required of a Registrant;
- 2.1.3 an authorization for an initial criminal record check and re-checks as required by the *Criminal Records Review Act*, RSBC 1996, c. 86;
- 2.1.4 the registration application Fee set out in Schedule 1;
- 2.1.5 any other outstanding Fee owed to the College;
- 2.1.6 a notarized copy of their degree or other evidence satisfactory to the Registration Committee of the completion of educational requirements; and
- 2.1.7 evidence of professional liability insurance in accordance with the requirements under heading 10.0.

3.0 Physical Therapy: Full *[previously Bylaw 43]*

3.1 The requirements for registration in the Registrant class of Physical Therapy: Full are the following:

- 3.1.1 graduation from an entry-level academic program set out in Table 1 to this Schedule or an academic program otherwise considered to be substantially equivalent by the Registration Committee;
- 3.1.2 successful completion of the Physiotherapy Competency Examination or other entry-level assessment set out in Table 2 to this Schedule;

- 3.1.3 successful completion of the Jurisprudence Examination set out in Table 2 to this Schedule;
 - 3.1.4 payment of Fees as set out in Schedule 1;
 - 3.1.5 successful completion of an English-language proficiency examination acceptable to the Registration Committee if the Applicant did not complete their physical therapy education in English; and
 - 3.1.6 evidence satisfactory to the Registration Committee that the Applicant has completed 1200 practice hours in the five (5) year period preceding the date of the application unless the applicant has completed an entry-level Examination set out in Table 2 to this Schedule within five (5) years prior to the date of the application.
- 3.2 Despite paragraph 3.1, an Applicant who is authorized to practise physical therapy in another Canadian jurisdiction may be granted registration in the Registrant class of Physical Therapy: Full by the Registration Committee if the Applicant does the following:
- 3.2.1 satisfies the Registration Committee that they are currently authorized to practise physical therapy in that other Canadian jurisdiction as the equivalent of a registrant in the Registrant class of Physical Therapy: Full under the Bylaws and this Schedule;
 - 3.2.2 has successfully completed the Jurisprudence Examination set out in Table 2 to this Schedule;
 - 3.2.3 provides the necessary application materials set out under heading 2.0; and
 - 3.2.4 provides a completed and signed regulatory history using the required form within ninety (90) calendar days of the date of the application and from each applicable regulatory or licensing authority in every jurisdiction where the Applicant is or was at any time registered or licensed for the practice of physical therapy within the preceding ten (10) years.
- 3.3 Despite paragraph 3.1, an Applicant who can provide evidence that they were fully registered and practising in a Canadian province as a physical therapist prior to December 31, 1993, may be granted registration in the Registrant class of Physical Therapy: Full by the Registration Committee if they provide:
- 3.3.1 evidence satisfactory to the Registration Committee that the Applicant has completed 1200 practice hours in the five (5) year period preceding the date of the application;
 - 3.3.2 the necessary application materials set out under heading 2.0; and
 - 3.3.3 evidence of successful completion of the Jurisprudence Examination set out in Table 2 to this Schedule.

4.0 Physical Therapy: Student *[previously Bylaw 45]*

- 4.1 The requirements for registration in the Registrant class of Physical Therapy: Student are:
- 4.1.1 enrollment as a student in a physical therapy educational program set out in Table 1 to this Schedule; or
 - 4.1.2 enrollment as a student in an academic program recognized by the World Confederation for Physical Therapy (WCPT).

5.0 Physical Therapy: Temporary *[previously Bylaw 46]*

- 5.1 The Registration Committee may grant registration in the Registrant class of Physical Therapy: Temporary to an Applicant who is registered or licensed to practise physical therapy by a regulatory authority in another jurisdiction acceptable to the Registration Committee, for education purposes, emergency services or a purpose to be approved by the Registrar.
- 5.2 The permit expires 30 days after the date of initial registration, on the date on which the purpose is attained or when the Registrant is no longer engaged in attaining that purpose, whichever is the earliest.

6.0 Reinstatement of Former Registrants *[previously Bylaw 47]*

- 6.1 A former Registrant in the Registrant class of Physical Therapy: Full whose registration is not suspended or cancelled under the Act and who has been out of practice for five (5) years or less may be reinstated to the Registrant class of Physical Therapy: Full if they meet the requirements under heading 2.0 and:
- 6.1.1 provide evidence satisfactory to the Registration Committee that they have completed at least 1200 practice hours as a registered physical therapist in the five (5) year period, or a pro-rated number of practice hours if registered for less than five (5) years, preceding the date of application for reinstatement; and
 - 6.1.2 have successfully completed a Quality Assurance Examination(s) required by the Registration Committee in the five (5) year period immediately preceding the date of application for reinstatement.
- 6.2 A former Registrant whose registration is not suspended or cancelled under the Act and who has been out of practice for more than five (5) years may be reinstated to Registrant class of Physical Therapy: Full if they do the following:
- 6.2.1 meet the requirements under heading 2.0; and
 - 6.2.2 successfully complete any Examination, assessment, or education program directed by the Registration Committee.

7.0 Reinstatement following Disciplinary Action *[previously Bylaw 48]*

- 7.1 A former Registrant whose previous registration was cancelled under Part 3 of the Act and who is eligible for reinstatement of registration may be reinstated if they do the following:
- 7.1.1 meet the requirements for registration under headings 2.0 and 3.0;
 - 7.1.2 satisfy the Registration Committee that their registration will not pose an undue risk to public health or safety; and
 - 7.1.3 satisfy the Registration Committee that their registration will not otherwise be contrary to the public interest.

8.0 Registration Renewal *[previously Bylaw 49]*

- 8.1 A Registrant seeking renewal of their registration must deliver the following to the Registrar:
- 8.1.1 a completed renewal Form;
 - 8.1.2 payment of the registration renewal Fee set out in Schedule 1;
 - 8.1.3 payment of any other outstanding Fee owed to the College;
 - 8.1.4 evidence satisfactory to the Registration Committee of:
 - 8.1.4.1 completion of all applicable requirements of the Quality Assurance Program in Schedule 22; and
 - 8.1.4.2 completion of 1200 practice hours of physical therapy in the five (5) year period immediately preceding the date of the renewal unless the Registrant has completed an entry-level Examination set out in Table 2, or completed an education program approved by the Registration Committee, within five (5) years prior to date of the application; and
 - 8.1.5 evidence of professional liability insurance in accordance with the requirements under heading 10.0.
- 8.2 A Registrant seeking renewal of registration under this heading must ensure that the documents and monies required under paragraph 8.1 are received by the Registrar on or before the end of business day on May 31 or the last business day prior to May 31 if the deadline falls on a non-business day.
- 8.3 A Registrant whose registration is not renewed under this heading on or before the end of business day on May 31 or the last business day prior to May 31 if the deadline falls on a non-business day ceases to be registered on June 1.

9.0 Reinstatement within Two Months of Failure to Renew *[previously Bylaw 50]*

- 9.1 A former Registrant who fails to renew by May 31 or the last business day prior to May 31, may apply for reinstatement no later than July 31 or the last business day prior to July 31 if the deadline falls on a non-business day of the same year if they meet the requirements under heading 2.0 and the following:
 - 9.1.1 were in Good Standing at the date of the expiration of their former registration; and
 - 9.1.2 in the case of a former Registrant in the Registrant class of Physical Therapy: Full, provide evidence satisfactory to the Registration Committee of:
 - 9.1.2.1 completion of all applicable requirements of the Quality Assurance Program in Schedule 22 as though the former Registrant's previous registration had not expired under heading 7.0; and
 - 9.1.2.2 completion of 1200 practice hours of physical therapy in the five (5) year period immediately preceding the date of application for reinstatement; and
 - 9.1.3 pay the reinstatement Fee set out in Schedule 1.

10.0 Professional Liability Insurance *[previously Bylaw 82]*

- 10.1 All Registrants in Registrant classes of Physical Therapy: Full, Physical Therapy: Student and Physical Therapy: Temporary must hold professional liability insurance in an amount of at least \$3,000,000 per occurrence.

Table 1: Physical Therapy Academic Programs

Master of Physical Therapy, Department of Physical Therapy, Faculty of Medicine, University of British Columbia, VANCOUVER, BC

Physio Refresh, Department of Physical Therapy, Faculty of Medicine, University of British Columbia, VANCOUVER, BC

Master of Science in Physical Therapy, Department of Physical Therapy, Faculty of Rehabilitation Medicine, University of Alberta, EDMONTON, AB

Master of Physical Therapy, School of Physical Therapy, College of Medicine, University of Saskatchewan, SASKATOON, SK

Master of Physical Therapy, College of Rehabilitation Sciences, Faculty of Health Sciences, University of Manitoba, WINNIPEG, MB

Master of Science (Physiotherapy), School of Rehabilitation Science, Faculty of Health Sciences, McMaster University, HAMILTON, ON

Master of Science in Physical Therapy, School of Rehabilitation Therapy, Faculty of Health Sciences, Queen's University, KINGSTON, ON

Maîtrise ès sciences de la santé en physiothérapie, École des sciences de la réadaptation, Faculté des sciences de la santé, University of Ottawa, OTTAWA, ON

Master of Science in Physical Therapy Department of Physical Therapy, Faculty of Medicine, University of Toronto, TORONTO, ON

Master of Physical Therapy, School of Physical Therapy, Faculty of Health Sciences, University of Western Ontario, LONDON, ON

Master of Science in Physical Therapy (Applied), School of Physical & Occupational Therapy, Faculty of Medicine, McGill University, MONTREAL, QC

Continuum baccalauréat-maîtrise en physiothérapie, Département de réadaptation, Faculté de médecine, Université Laval, QUÉBEC, QC

Continuum baccalauréat-maîtrise en physiothérapie, École de réadaptation, Faculté de médecine, Université de Montreal, MONTREAL, QC

Maîtrise en physiothérapie, École de réadaptation, Faculté de médecine et des sciences de la santé, École de réadaptation, Université de Sherbrooke, SHERBROOKE, QC

Maîtrise ès sciences appliquées (physiothérapie), Unité d'enseignement en physiothérapie, Université du Québec à Chicoutimi, CHICOUTIMI, QC

Master of Science (Physiotherapy), School of Physiotherapy, Faculty of Health, Dalhousie University, HALIFAX, NS

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Table 2: Approved Examinations

1.0 ENTRY LEVEL EXAMINATIONS PHYSIOTHERAPY

COMPETENCY EXAMINATION

- i. Part A Qualifying Examination and Part B Physiotherapy National Examination;
- ii. Part A Qualifying Examination and a clinical evaluation administered by the University of British Columbia that assesses entry-level competence when, Part B, the Physiotherapy National Examination, is unavailable;
- iii. In the case of Quebec graduates, successful completion of the requirements in Article 1.14 <http://legisquebec.gouv.qc.ca/fr/ShowDoc/cr/C-26,%20r.%202?>; or
- iv. In the case of graduates outside of Quebec, successful completion of the requirements in Article 3: <https://www.legisquebec.gouv.qc.ca/fr/document/rc/C-26,%20r.%20203/>.

2.0 JURISPRUDENCE EXAMINATION

Schedule 7: Psychology: Registration, Examinations, and Professional Liability Insurance

1.0 Definitions *[Previously Bylaw 41]*

1.1 In this Schedule:

“**BCASP**” means the British Columbia Association of School Psychologists;

“**Code of Conduct**” means the code of conduct established for the Designated Health Profession of Psychology;

“**Doctoral Degree in Psychology**” means:

- (a) the highest graduate-level degree in psychology, including but not limited to a Ph.D., that is granted by a Canadian post-secondary educational institution and recognized by the Registration Committee as meeting the criteria specified in Table 1 to this Schedule for evaluating the content of a doctoral program of study, for the purposes of the applicable class of Registrants; or
- (b) a degree from a non-Canadian educational institution considered by the Registration Committee to be equivalent to a degree referred to in paragraph (a), in accordance with the criteria specified in Table 1 to this Schedule;

“**EPPP**” means the Examination for Professional Practice in Psychology offered by the Association of State and Provincial Psychology Boards or any successor Examination that is acceptable to the Board;

“**Master’s Degree in Psychology**” means:

- (a) a graduate-level degree in psychology that is granted by a Canadian post-secondary educational institution and recognized by the Registration Committee as meeting the criteria specified in Table 1 to this Schedule for evaluating the content of a master’s program of study, for the purposes of the applicable class of Registrants; or
- (b) a degree from a non-Canadian educational institution considered by the Registration Committee to be equivalent to a degree referred to in paragraph (a), in accordance with the criteria specified in Table 1 to this Schedule;

“**National School Psychology Examination**” means the Praxis School Psychologist Examination administered by the Educational Testing Service and recognized by the National Association of School Psychologists, or any successor Examination that is acceptable to the Board;

“**Oral Examination**” means an oral Examination in professional psychology practice prepared and administered by or under the direction of the Registration Committee;

“**Pre-doctoral Internship**” means an organized training program in psychology, completed prior to or as a condition of completion of a Doctoral Degree in Psychology, which is recognized by the Registration Committee as meeting the criteria specified in Table 1 to this Schedule;

“**Readiness for Practice Examination**” means an oral or written Examination, or an Examination with both oral and written components, prepared and administered by or under the direction of the Registration Committee to assess an Applicant’s readiness for professional practice;

“**Regulation**” means the *Psychologists Regulation*, BC Reg. 289/2008;

“**School Psychology Internship**” means an organized training program in school psychology, completed prior to or as a condition of completion of a Master’s Degree in Psychology, which is recognized by the Registration Committee as meeting the criteria specified in Table 1 to this Schedule;

“**WJE**” means the Written Jurisprudence Examination prepared and administered by or under the direction of the Registration Committee.

2.0 General Registration Requirements [previously Bylaw 43]

2.1 An Applicant for registration in any class of Registrants for the Designated Health Profession of Psychology must deliver the following to the Registrar:

- 2.1.1 any outstanding Fee owed to the College;
- 2.1.2 evidence satisfactory to the Registration Committee that the Applicant is of good character and fit to engage in the practice of psychology;
- 2.1.3 an original transcript, or other evidence satisfactory to the Registration Committee, of any undergraduate or graduate degrees or equivalent qualifications completed by the Applicant, and that the Applicant is the person named therein;
- 2.1.4 evidence satisfactory to the Registration Committee of the Applicant’s English language proficiency;
- 2.1.5 an authorization for a criminal record check or, if permitted by the Registration Committee, a criminal record check verification in the form required by the *Criminal Records Review Act*, RSBC 1996, c. 86, accompanied by any required payment;

- 2.1.6 original documentation providing the results of a national police check or the equivalent for every jurisdiction in which the Applicant resided during the five-year period immediately before the date of application, unless it is not reasonably practicable to obtain such documentation for the applicable jurisdiction;
- 2.1.7 a certificate, letter, or other evidence in a form satisfactory to the Registration Committee, dated within three months of the date of application, from each applicable regulatory or licensing authority in every jurisdiction where the Applicant is or was, at any time, registered or licensed for the practise of psychology or another health profession, certifying that:
- 2.1.7.1 the Applicant's entitlement to practise psychology or the other health profession has not been cancelled, suspended, limited, restricted or made subject to conditions in the applicable jurisdiction at any time, or specifying particulars of any such cancellation, suspension, limitation, restriction or conditions;
 - 2.1.7.2 there is no investigation, review or other proceeding underway in the applicable jurisdiction that could result in the Applicant's entitlement to practise psychology or the other health profession being cancelled, suspended, limited, restricted or made subject to conditions, or specifying particulars of any such investigation, review or other proceeding; and
 - 2.1.7.3 the Applicant's entitlement to practise psychology or the other health profession has not been voluntarily relinquished in the applicable jurisdiction with the effect of preventing the commencement or completion of an investigation, review or other proceeding that could have resulted in the Applicant's entitlement to practise psychology or the other health profession in the applicable jurisdiction being cancelled, suspended, limited, restricted or made subject to conditions, or specifying particulars of any such relinquishment;
- 2.1.8 letters of reference and such further information from referees relating to the Applicant's character, fitness to practise and professional competence as may be required by the Registration Committee;
- 2.1.9 evidence satisfactory to the Registration Committee of professional liability insurance coverage as required under heading 14.0;
- 2.1.10 a valid e-mail address for the purpose of receiving communications from the College to the Applicant, and, without limitation, all other personal contact or emergency contact information for the Applicant that the Registrar requires reasonably in the circumstances;

- 2.1.11 any information within the control of the Registrant that is required to be maintained in the Register under section 21(2) of the Act or under the requirements Bylaw 5.9, to the extent that such information is not required to be delivered to the College under another provision of this Schedule; and
 - 2.1.12 any supplementary or supporting information or records about the Applicant that is relevant to other information or another item that the Applicant is required to deliver to the Registrar in, with, or in support of their registration application, which the Registrar or the Registration Committee requires to be submitted in, with, or in support of registration applications, generally or by class, from time to time.
- 2.2 Subparagraphs 2.1.3 to 2.1.9 do not apply to Applicants for registration in the Registrant class of Psychology: Temporary (visitor) under heading 8.0 or for registration in the Registrant class of Psychology: Non-Practising under heading 10.0.
- 2.3 Paragraph 2.1 does not apply to:
- 2.3.1 applicants for renewal under heading 11.0 or Applicants for reinstatement under heading 12.0, except as provided under headings 11.0 or 12.0; or
 - 2.3.2 Applicants for registration in the Registrant class of Psychology: Temporary (emergency) under heading 9.0.

3.0 Psychology: Registered Psychologist *[previously Bylaw 44]*

- 3.1 The conditions and requirements for registration in the Registrant class of Psychology: Registered Psychologist are:
- 3.1.1 a Doctoral Degree in Psychology;
 - 3.1.2 successful completion of a Pre-doctoral Internship;
 - 3.1.3 for applications received after a date specified by the Registration Committee for the purpose of this subparagraph, completion of a minimum number of hours of post-degree supervised practice of psychology in the area of psychology practice referred to in subparagraph 3.1.7.2, under the supervision of a Registrant in the Registrant class of Psychology: Registered Psychologist approved by the Registration Committee, in accordance with criteria specified by the Registration Committee;
 - 3.1.4 successful completion of the EPPP;
 - 3.1.5 successful completion of an Oral Examination;
 - 3.1.6 successful completion of the WJE and any other oral, computerized, or written Examinations concerning jurisprudence, including but not limited to the Act, the Regulation, the Bylaws, including this Schedule and Schedules 16 and 23, the Code of

Conduct, and other applicable laws, as may be required by the Registration Committee for Applicants under this paragraph;

3.1.7 receipt by the Registrar of:

3.1.7.1 evidence satisfactory to the Registration Committee of the Applicant's satisfaction of the conditions and requirements established in subparagraphs 3.1.1 to 3.1.6;

3.1.7.2 a declaration of competence in an area of psychology practice described in Table 2 of this Schedule in a form acceptable to the Registration Committee;

3.1.7.3 any other evidence as may be required by the Registration Committee to satisfy it that the Applicant meets the criteria specified in Table 3 of this Schedule for core competencies and foundational knowledge in psychology; and

3.1.7.4 the items required under paragraph 2.1.

3.2 Despite paragraph 3.1, an Applicant may be granted registration in the Registrant class of Psychology: Registered Psychologist if the Applicant:

3.2.1 holds registration or licensure in another Canadian jurisdiction as the equivalent of this class of Registrant, which is not subject to any practice limitations, restrictions or conditions in that jurisdiction that do not apply generally to Registrants in the Registrant class of Psychology: Registered Psychologist in British Columbia;

3.2.2 successfully completes the WJE and any other oral, computerized, or written Examinations concerning jurisprudence, including but not limited to the Act, the Regulation, the Bylaws, including this Schedule and Schedules 16 and 23, the Code of Conduct, and other applicable laws, as may be required by the Registration Committee for Applicants under this paragraph; and

3.2.3 delivers to the Registrar:

3.2.3.1 notarized evidence, or other evidence satisfactory to the Registration Committee, of the Applicant's registration or licensure referred to in subparagraph 3.2.1 and that the Applicant is the person named therein;

3.2.3.2 evidence satisfactory to the Registration Committee of the Applicant's satisfaction of the conditions and requirements established in subparagraph 3.2.2;

3.2.3.3 a declaration of competence in an area of psychology practice described in Table 2 to this Schedule in a form acceptable to the Registration Committee; and

3.2.3.4 the items required under paragraph 2.1.

3.3 Despite paragraph 3.1, an Applicant may be granted registration in the Registrant class of Psychology: Registered Psychologist if the Applicant:

3.3.1 holds registration or licensure in a United States jurisdiction as the equivalent of this class of Registrant, which is not subject to any practice limitations, restrictions or conditions in that jurisdiction that do not apply generally to Registrants in the Registrant class of Psychology: Registered Psychologist in British Columbia;

3.3.2 has a current Certificate of Professional Qualification awarded by the Association of State and Provincial Psychology Boards, or is registered with the National Register of Health Service Psychologists;

3.3.3 successfully completes the WJE and any other oral, computerized, or written Examinations concerning jurisprudence, including but not limited to the Act, the Regulation, the Bylaws, including this Schedule and Schedules 16 and 23, the Code of Conduct, and other applicable laws, as may be required by the Registration Committee for Applicants under this paragraph; and

3.3.4 delivers to the Registrar:

3.3.4.1 notarized evidence, or other evidence satisfactory to the Registration Committee, of the Applicant's registration or licensure referred to in subparagraph 3.3.1 and the Applicant's certificate or registration referred to in subparagraph 3.3.2, and that the Applicant is the person named therein;

3.3.4.2 evidence satisfactory to the Registration Committee of the Applicant's satisfaction of the conditions and requirements established in subparagraph 3.3.3;

3.3.4.3 a declaration of competence in an area of psychology practice described in Table 2 to this Schedule in a form acceptable to the Registration Committee;

3.3.4.4 any other evidence as may be required by the Registration Committee to satisfy it that the Applicant meets the criteria specified in Table 3 to this Schedule for core competencies and foundational knowledge in psychology; and

3.3.4.5 the items required under paragraph 2.1.

3.4 Despite paragraph 3.1, the Registration Committee has discretion, in satisfying itself that an Applicant meets the conditions and requirements for registration in the Registrant class of Psychology: Registered Psychologist, to consider whether the Applicant's knowledge, skills and abilities are substantially equivalent to the standards of academic or technical achievement

and the competencies or other qualifications established in subparagraph 3.1.1 to 3.1.3 and Table 3 to this Schedule, and to grant registration in the Registrant class of Psychologist: Registered Psychologist on that basis, if the Applicant:

- 3.4.1 has successfully completed the Examinations required under subparagraphs 3.1.4 to 3.1.6; and
- 3.4.2 meets the conditions and requirements established in subparagraphs 3.1.7.2 to 3.1.7.4.

4.0 Psychology: Associate Psychologist (corrections) *[previously Bylaw 45]*

- 4.1 Subject to the requirements under heading 11.0, a person is entitled to registration in the Registrant class of Psychology: Associate Psychologist (corrections) if the person:
 - 4.1.1 held registration as an associate psychologist (corrections) registrant of the College of Psychologists of British Columbia immediately before the Amalgamation Date; and
 - 4.1.2 has held registration in this Registrant class continuously from the Amalgamation Date, or satisfies all applicable conditions and requirements under heading 12.0 for reinstatement in the Registrant class of Psychology: Associate Psychologist (corrections).

5.0 Psychology: School Psychologist *[previously Bylaw 46]*

- 5.1 The conditions and requirements for registration in the Registrant class of Psychology: School Psychologist are:
 - 5.1.1 a Master's Degree in Psychology;
 - 5.1.2 successful completion of a School Psychology Internship;
 - 5.1.3 for applications received after a date specified by the Registration Committee for the purpose of this subparagraph, completion of a minimum number of hours of post-degree supervised practice in school psychology under the supervision of a Registrant approved by the Registration Committee, in accordance with criteria specified by the Registration Committee;
 - 5.1.4 successful completion of the National School Psychology Examination;
 - 5.1.5 successful completion of the Readiness for Practice Examination;
 - 5.1.6 successful completion of the WJE and any other oral, computerized, or written Examinations concerning jurisprudence, including but not limited to the Act, the Regulation, the Bylaws, including this Schedule and Schedules 16 and 23, the Code of Conduct, and other applicable laws, as may be required by the Registration Committee for Applicants under this paragraph; and

- 5.1.7 receipt by the Registrar of:
 - 5.1.7.1 evidence satisfactory to the Registration Committee of the Applicant's satisfaction of the conditions and requirements established in subparagraphs 5.1.1 to 5.1.6;
 - 5.1.7.2 a declaration of competence in school psychology, as described in Table 2 to this Schedule, in a form acceptable to the Registration Committee;
 - 5.1.7.3 any other evidence as may be required by the Registration Committee to satisfy it that the Applicant meets the criteria specified in Table 4 to this Schedule for core competencies and foundational knowledge in school psychology; and
 - 5.1.7.4 the items required under paragraph 2.1.
- 5.2 Despite paragraph 5.1, an Applicant may be granted registration in the Registrant class of Psychology: School Psychologist if the Applicant:
 - 5.2.1 holds registration or licensure in another Canadian jurisdiction as the equivalent of this class of Registrant, which is not subject to any practice limitations, restrictions or conditions in that jurisdiction that do not apply generally to Registrants in the Registrant class of Psychology: School Psychologist in British Columbia;
 - 5.2.2 successfully completes the WJE and any other oral, computerized, or written Examinations concerning jurisprudence, including but not limited to the Act, the Regulation, the Bylaws, including this Schedule and Schedules 16 and 23, the Code of Conduct, and other applicable laws, as may be required by the Registration Committee for Applicants under this paragraph; and
 - 5.2.3 delivers to the Registrar:
 - 5.2.3.1 notarized evidence, or other evidence satisfactory to the Registration Committee, of the Applicant's registration or licensure referred to in subparagraph 5.2.1 and that the Applicant is the person named therein;
 - 5.2.3.2 evidence satisfactory to the Registration Committee of the Applicant's satisfaction of the conditions and requirements established in subparagraph 5.2.2;
 - 5.2.3.3 a declaration of competence in school psychology, as described in Table 2 to this Schedule, in a form acceptable to the Registration Committee; and
 - 5.2.3.4 the items required under paragraph 2.1.
- 5.3 Despite paragraph 5.1, an Applicant may be granted registration in the Registrant class of Psychology: School Psychologist if the Applicant:

- 5.3.1 held active membership in BCASP in good standing under BCASP's bylaws, unencumbered by any limitations, conditions or restrictions on the Applicant's rights as an active member of BCASP, on August 1, 2023, and has continued to hold such active membership in good standing, unencumbered by any limitations, conditions or restrictions on the Applicant's rights as a member of BCASP, continuously from that date;
- 5.3.2 delivered the following items to the College of Psychologists of British Columbia within the time that was required under section 46(3)(b) and (4) of its former bylaws, or, if the Registration Committee extends the time for the Applicant to deliver one or more of those items under paragraph 5.4, delivers the applicable item or items within the time specified by the Registration Committee:
- 5.3.2.1 the Applicant's registration application under Bylaw 5.12 (a) and applicable application and registration Fees under Bylaw 5.12 (b);
 - 5.3.2.2 notarized evidence, or other evidence satisfactory to the Registration Committee, of the Applicant's membership referred to in subparagraph 5.3.1 and that the Applicant is the person named therein;
 - 5.3.2.3 a declaration of competence in school psychology, as described in Table 2 to this Schedule, in a form acceptable to the Registration Committee; and
 - 5.3.2.4 the items required under paragraph 2.1, except subparagraph 2.1.9;
- 5.3.3 successfully completes the WJE and any other oral, computerized, or written Examinations concerning jurisprudence, including but not limited to the Act, the Regulation, the Bylaws, including this Schedule and Schedules 16 and 23, the Code of Conduct, and other applicable laws, as may be required by the Registration Committee for Applicants under this paragraph;
- 5.3.4 attends one or more orientation workshops required by the Registration Committee for Applicants under this paragraph; and
- 5.3.5 delivered the following items to the College of Psychologists of British Columbia within the time that was required under section 46(3)(e) and (4) of its former bylaws, or, if the Registration Committee extends the time for the Applicant to deliver one or both of those items under paragraph 5.4, delivers the applicable item or items within the time specified by the Registration Committee:
- 5.3.5.1 evidence satisfactory to the Registration Committee of the Applicant's satisfaction of the conditions and requirements established in subparagraphs 5.3.3 and 5.3.4; and

- 5.3.5.2 satisfactory evidence of professional liability insurance coverage under subparagraph 2.1.9 and any additional information or records required under subparagraph 2.1.12.
- 5.4 In special circumstances, the Registration Committee may extend the time for an Applicant under paragraph 5.3 to deliver one or more of the items specified in subparagraph 5.3.2 or 5.3.5, provided that all items specified in subparagraph 5.3.2 or 5.3.5 must be delivered to the Registrar by no later than November 1, 2025.
- 5.5 Despite paragraph 5.1, the Registration Committee has discretion, in satisfying itself that an Applicant meets the conditions and requirements for registration in the Registrant class of Psychology: School Psychologist, to consider whether the Applicant's knowledge, skills and abilities are substantially equivalent to the standards of academic or technical achievement and the competencies or other qualifications established in subparagraphs 5.1.1 to 5.1.3 and Table 4 to this Schedule, and to grant registration on that basis, if the Applicant:
 - 5.5.1 has successfully completed the Examinations required under subparagraphs 5.1.4, 5.1.5 and 5.1.6; and
 - 5.5.2 meets the conditions and requirements established in subparagraphs 5.1.7.2 to 5.1.7.4.
- 5.6 The effective date of any grant of registration in the Registrant class of Psychologist: School Psychologist under this section is the later of:
 - 5.6.1 May 1, 2024; or
 - 5.6.2 the effective date of the Registration Committee's decision to grant the Applicant's application for registration.

6.0 Psychology: Psychology Assistant *[previously Bylaw 47]*

- 6.1 Subject to the requirements under heading 11.0, a person is entitled to registration in the Registrant class of Psychology: Psychology Assistant if the person:
 - 6.1.1 held registration as a psychology assistant registrant of the College of Psychologists of British Columbia immediately before the Amalgamation Date; and
 - 6.1.2 has held registration in this Registrant class continuously from the Amalgamation Date, or satisfies all applicable conditions and requirements under heading 12.0 for reinstatement in the Registrant class of Psychology: Psychology Assistant.

7.0 Psychology: Temporary (Supervised) *[previously Bylaw 48]*

- 7.1 An Applicant for renewal or reinstatement in the Registrant class of Psychology: Registered Psychologist may be granted registration in the Registrant class of Psychology: Temporary (supervised) if the following conditions and requirements, are satisfied:
- 7.1.1 the Applicant meets the applicable conditions and requirements established in:
 - 7.1.1.1 paragraph 11.2, except subparagraph 11.2.5; or
 - 7.1.1.2 paragraph 12.2 and 12.7, except subparagraph 12.2.7; and
 - 7.1.2 receipt by the Registrar of:
 - 7.1.2.1 an undertaking to complete any outstanding continuing competency and quality assurance requirements in Schedule 23, or any alternative remediation requirements specified by the Quality Assurance Committee;
 - 7.1.2.2 evidence satisfactory to the Registration Committee that the Applicant is capable, in the opinion of the committee, of practising in this Registrant class without any risk to public health or safety;
 - 7.1.2.3 any other evidence as may be required by the Registration Committee to satisfy it that the Applicant meets the criteria specified in Table 3 to this Schedule for core competencies and foundational knowledge in psychology; and
 - 7.1.2.4 the items required under paragraph 2.1.
- 7.2 Registration in the Registrant class of Psychology: Temporary (supervised) may be granted under paragraph 7.1 for a period of up to one year.
- 7.3 Registration in the Registrant class of Psychology: Temporary (supervised) may be renewed, provided that the total period of registration in this class must not exceed three years.

8.0 Psychology: Temporary (Visitor) *[previously Bylaw 49]*

- 8.1 An Applicant who has not previously been granted registration in the Registrant class of Psychology: Temporary (visitor) more than once during the same calendar year may be granted registration in this class if the following conditions and requirements, are satisfied:
- 8.1.1 the Applicant holds registration or licensure in another Canadian or a United States jurisdiction as the equivalent of the Registrant class of Psychology: Registered Psychologist, which is not subject to any practice limitations, restrictions or conditions in that jurisdiction that do not apply generally to Registrants in the Registrant class of Psychology: Registered Psychologist in British Columbia; and

- 8.1.2 receipt by the Registrar of:
 - 8.1.2.1 notarized evidence, or other evidence satisfactory to the Registration Committee, of the Applicant's registration or licensure referred to in subparagraph 8.1.1 and that the Applicant is the person named therein;
 - 8.1.2.2 a declaration, in a form acceptable to the Registration Committee, that the Applicant is applying for registration in the Registrant class of Psychology: Temporary (visitor) solely for the purpose of:
 - 8.1.2.2.1 acting as an expert witness;
 - 8.1.2.2.2 conducting a psychological assessment;
 - 8.1.2.2.3 participating in, or acting as an instructor for, a course, conference, or other time-limited educational event; or
 - 8.1.2.2.4 another temporary purpose acceptable to the Registration Committee; and
 - 8.1.2.3 the items required under subparagraphs 2.1.1, 2.1.2 and 2.1.10 to 2.1.12.
- 8.2 Registration in the Registrant class of Psychology: Temporary (visitor) may be granted under paragraph 8.1 for a period of up to 15 consecutive days.
- 8.3 Despite paragraphs 8.1 and 8.2, in special circumstances, the Registration Committee may:
 - 8.3.1 grant registration in the Registrant class of Psychology: Temporary (visitor) under paragraph 8.1 for a period longer than 15 consecutive days, as specified by the Registration Committee;
 - 8.3.2 renew registration in the Registrant class of Psychology: Temporary (visitor) for a period specified by the Registration Committee;
 - 8.3.3 grant registration in the Registrant class of Psychology: Temporary (visitor) to an Applicant who has previously been granted registration in this class twice or more during the same calendar year; or
 - 8.3.4 grant registration in the Registrant class of Psychology: Temporary (visitor) to an Applicant who holds registration or licensure in another Canadian or United States jurisdiction as the equivalent of the Registrant class of Psychology: School Psychologist, which is not subject to any practice limitations, restrictions or conditions in that jurisdiction that do not apply generally to Registrants in the class of Psychology: School Psychologist in British Columbia.

9.0 Psychology: Temporary (Emergency) [previously Bylaw 49.1]

- 9.1 Registration in the Registrant class of Psychology: Temporary (emergency) may be granted if the Registrar makes a declaration of an emergency situation in accordance with criteria established by the Board.
- 9.2 An Applicant may be granted registration in the Registrant class of Psychology: Temporary (emergency) if the following conditions and requirements, are satisfied with the respect to the application:
- 9.2.1 the Applicant:
- 9.2.1.1 is a Registrant in the Registrant class of Psychology: Non-Practising or former Registrant who previously held registration as a Registrant in the Registrant class of Psychology: Registered Psychologist, who was in Good Standing immediately before they ceased to hold registration in that class and whose registration was not cancelled in circumstances described in subparagraph 12.7.1, 12.7.2 or 12.7.3; or
 - 9.2.1.2 holds registration or licensure in another Canadian or a United States jurisdiction as the equivalent of the Registrant class of Psychology: Registered Psychologist, which is not subject to any practice limitations, restrictions or conditions in that jurisdiction that do not apply generally to Registrants in the Registrant class of Psychology: Registered Psychologist in British Columbia; and
- 9.2.2 receipt by the Registrar of:
- 9.2.2.1 evidence satisfactory to the Registration Committee of the Applicant's registration or licensure referred to in subparagraph 9.2.1 and that the Applicant is the person named therein;
 - 9.2.2.2 a declaration in a form acceptable to the Registration Committee that the Applicant is applying for registration in the Registrant class of Psychology: Temporary (emergency) solely for the purpose of providing services in the emergency situation; and
 - 9.2.2.3 evidence satisfactory to the Registration Committee that the Applicant is of good character and fit to engage in the practice of psychology.
- 9.3 Registration in the Registrant class of Psychology: Temporary (emergency) is cancelled immediately, and registration in the Registrant class of Psychology: Non-Practising is restored for any Registrant who was granted registration in the Registrant class of Psychology: Temporary (emergency) on the basis of their registration in the Registrant class of Psychology: Non-practising, on the date determined by the Registrar or the Board.

10.0 Psychology: Non-Practising *[previously Bylaw 50]*

- 10.1 The conditions and requirements for registration in the Registrant class of Psychology: Non-practising are:
- 10.1.1 current or previous registration in the Registrant classes of Psychology: Registered Psychologist, Psychology: Associate Psychologist (corrections), Psychology: School Psychologist or Psychology: Psychology Assistant; and
 - 10.1.2 receipt by the Registrar of:
 - 10.1.2.1 a declaration, in a form acceptable to the Registration Committee, that the Applicant will not provide any services included in the practice of psychology in British Columbia while registered under this section; and
 - 10.1.2.2 the items required under subparagraphs 2.1.1, 2.1.2, and 2.1.10 to 2.1.12.

11.0 Registration Renewal *[previously Bylaw 51]*

- 11.1 Subject to paragraph 7.3, registration other than in the Registrant classes of Psychology: Temporary (visitor) or Psychology: Temporary (emergency) is subject to annual renewal on December 31 of each year in accordance with the requirements under this heading.
- 11.2 Subject to paragraph 7.3, the conditions and requirements for renewal of registration, other than in the Registrant classes of Psychology: Temporary (visitor) or Psychology: Temporary (emergency), are receipt by the Registrar of:
- 11.2.1 any outstanding Fee owed to the College;
 - 11.2.2 a declaration of confirmation of appointment of professional executor in a form acceptable to the Registration Committee;
 - 11.2.3 if the Registrant is responsible for any practice records respecting any work performed by the Registrant in an institutional setting in British Columbia, a declaration of institutional contact in a form acceptable to the Registration Committee in respect of each applicable institution;
 - 11.2.4 a declaration, in a form acceptable to the Registration Committee, attesting to the Registrant's compliance with the Act, the Regulations, the Bylaws, this Schedule, and any limits or conditions imposed under section 20, 32.2, 32.3, 33, 35, 36, 37.1, 38, 39 or 39.1 of the Act;
 - 11.2.5 evidence satisfactory to the Registration Committee of meeting any applicable continuing competency and quality assurance requirements in Schedule 23; and
 - 11.2.6 evidence satisfactory to the Registration Committee of professional liability insurance coverage as required under heading 14.0.

- 11.3 If the Registration Committee determines that an applicant for renewal of registration under this section has failed to meet the conditions and requirements established in subparagraph 11.2.5, the Applicant must pay to the College the administration Fee specified in Schedule 1, which is due and payable within 30 days of the Applicant being notified thereof.
- 11.4 The Registrar must deliver an annual notice of renewal to each Registrant eligible for renewal under subsection (1) by November 30 of each year, which must state the applicable renewal Fees payable by the Registrant under Bylaw 5.12 (b) and describe the consequences of late payment or non-payment of renewal Fees.
- 11.5 Each Registrant eligible for renewal under paragraph 11.1 must pay to the College the applicable renewal Fees on or before December 31 of each year.
- 11.6 Subject to paragraph 7.1, if a Registrant eligible for renewal under paragraph 11.1 fails to pay the applicable renewal Fees on or before the date specified in paragraph 11.5, or otherwise fails to meet the applicable conditions and requirements for renewal of registration on or before that date, the Registrant's registration is cancelled.

12.0 Reinstatement of Registration *[previously Bylaw 52]*

- 12.1 In this heading, "Former Psychology Registrant" means an Applicant, including a Registrant currently registered in the Registrant class of Psychology: Temporary (supervised) or Psychology: Non-Practising, who was previously registered in one of the Registrant classes of Psychology: Registered Psychologist, Psychology: Associate Psychologist (corrections), Psychology: School Psychologist or Psychology: Psychology Assistant.
- 12.2 The conditions and requirements for reinstatement of a Former Psychology Registrant's registration in the Registrant classes of Psychology: Registered Psychologist, Psychology: Associate Psychologist (corrections), Psychology: School Psychologist or Psychology: Psychology Assistant are receipt by the Registrar of the following, either within six months of the date on which the Applicant's previous registration in the applicable class of registration was cancelled or, in respect of an application for reinstatement in the Registrant class of Psychology: Registered Psychologist, within the time specified by the Registration Committee under paragraph 12.3:
- 12.2.1 any outstanding Fee;
- 12.2.2 evidence satisfactory to the Registration Committee that the Applicant is of good character and fit to engage in the practice of psychology;
- 12.2.3 any additional evidence required under paragraph 12.4, 12.5 or 12.7;

- 12.2.4 a declaration of confirmation of appointment of professional executor in a form acceptable to the Registration Committee;
 - 12.2.5 if the Former Psychology Registrant is responsible for any practice records respecting any work performed by the Former Psychology Registrant in an institutional setting in British Columbia, a declaration of institutional contact in a form acceptable to the Registration Committee in respect of each applicable institution;
 - 12.2.6 a declaration, in a form acceptable to the Registration Committee, attesting to the Applicant's compliance with the Act, the Regulations, the Bylaws, this Schedule, and any limits or conditions imposed under section 20, 32.2, 32.3, 33, 35, 36, 37.1, 38, 39 or 39.1 of the Act;
 - 12.2.7 evidence satisfactory to the Registration Committee that the Applicant has satisfied:
 - 12.2.7.1 all applicable continuing competency and quality assurance requirements in Schedule 23 for any calendar year ending between the date the Applicant's previous registration in the applicable class of registration was cancelled and the date of the Applicant's application for reinstatement, as if the Applicant were registered in the applicable class of registration during that calendar year; and
 - 12.2.7.2 any other applicable continuing competency and quality assurance requirements Schedule 23; and
 - 12.2.8 evidence satisfactory to the Registration Committee of professional liability insurance coverage as required under heading 14.0.
- 12.3 The Registration Committee may extend the time for a Former Psychology Registrant to apply for reinstatement of registration in the Registrant classes of Psychology: Registered Psychologist or Psychology: School Psychologist under paragraph 12.2 if, in addition to the items required under paragraph 12.2, the Applicant delivers to the Registrar:
- 12.3.1 subject to paragraphs 12.8 and 12.9, the items referred to in subparagraphs 2.1.5 to 2.1.7 and 2.1.9 to 2.1.12;
 - 12.3.2 a declaration of competence as described in subparagraph 3.1.7.2 or 5.1.7.2, as applicable; and
 - 12.3.3 any additional evidence that may be required by the Registration Committee to satisfy it that the Applicant:
 - 12.3.3.1 continues to meet the criteria specified in Table 3 to this Schedule for core competencies and foundational knowledge in psychology or the criteria specified in Table 4 to this Schedule for core competencies and foundational knowledge in school psychology, as applicable; and

- 12.3.3.2 has maintained current knowledge, skills and abilities that are substantially equivalent to the standards of academic technical achievement and the competencies or other qualifications required for initial Applicants in the applicable Registrant class of Psychology: Registered Psychologist or Psychology: School Psychologist.
- 12.4 An Applicant for reinstatement of registration under this heading who was granted registration in the Registrant class of Psychology: Temporary (supervised) under paragraph 7.1 must provide additional evidence to satisfy the Registration Committee that the Applicant has satisfied all outstanding requirements of any undertaking under subparagraph 7.1.2.1.
- 12.5 An Applicant for reinstatement of registration under this heading whose registration in the applicable class of Registrants was cancelled under paragraph 11.6 following a determination by the Registration Committee that they failed to meet the conditions and requirements for renewal of registration established in subparagraph 11.2.5 must provide additional evidence to satisfy the Registration Committee that the Applicant has satisfied all outstanding conditions and requirements established in subparagraph 11.2.5 or any alternative remediation requirements specified by the Quality Assurance Committee.
- 12.6 If the Registration Committee determines that an Applicant for reinstatement under this heading has failed to meet the conditions and requirements established in subparagraph 12.2.7 or paragraph 12.4 or 12.5:
- 12.6.1 the Applicant must pay to the College the administration Fee specified in Schedule 1, which is due and payable within 30 days of the Applicant being notified thereof; and
- 12.6.2 the Applicant is ineligible for reinstatement of registration in the applicable class of Registrants until the Applicant satisfies all outstanding conditions and requirements established in subparagraph 12.2.7 or paragraph 12.4 or 12.5, or any alternative remediation requirements specified by the Quality Assurance Committee, in addition to meeting all other applicable conditions and requirements established in this heading.
- 12.7 An Applicant for reinstatement under this heading must provide additional evidence to satisfy the Registration Committee that reinstatement of the Applicant's registration will not pose an undue risk to public health or safety, if:
- 12.7.1 the Applicant's previous registration was cancelled under section 32.2, 32.3, 33, 36, 37.1, 38, 39 or 39.1 of the Act;
- 12.7.2 the Applicant's previous registration was cancelled under paragraph 11.6 or with the agreement or at the request of the Applicant while the Applicant's previous

registration was suspended under section 32.2, 32.3, 33, 35, 36, 37.1, 38, 39 or 39.1 of the Act; or

12.7.3 the Applicant voluntarily relinquished their previous registration under the Act in circumstances as described in section 20(2.1)(b.1) of the Act.

12.8 If an Applicant for reinstatement holds current registration in the Registrant class of Psychology: Non-Practising, the Registrant is exempt from the requirements:

12.8.1 to pay the reinstatement Fee referred to in Schedule 1; and

12.8.2 to deliver the items referred to in subparagraphs 2.1.5 and 2.1.6 to the Registrar under subparagraph 12.3.1.

12.9 If an Applicant for reinstatement holds current registration in the Registrant class of Psychology: Temporary (supervised), the Registrant is exempt from the requirements:

12.9.1 to pay the reinstatement Fee referred to in Schedule 1; and

12.9.2 to deliver the items referred to in subparagraph 2.1.5 to 2.1.7 to the Registrar under subparagraph 12.3.1.

12.10 The Registration Committee may waive all or part of the reinstatement Fee referred to in Schedule 1 for an Applicant who is not exempt from the requirement to pay that Fee under subparagraph 12.8.1 or 12.9.1 if the Registration Committee is satisfied that imposition of the Fee would cause undue financial hardship for the Applicant.

12.11 A Registrant must display, at the premises routinely used by the Registrant to practice psychology, the Registrant's current annual certificate of registration.

13.0 Examinations *[previously Bylaw 55.2]*

13.1 The Registration Committee must establish procedures for conducting and evaluating Examinations under this Schedule, including but not limited to procedures:

13.1.1 providing for the security of the Examination environment;

13.1.2 for reviewing the results of an Examination and determining an Applicant's qualifications for registration;

13.1.3 providing an opportunity for an Applicant to repeat an Examination up to a maximum number of times allowed by the Registration Committee for that Examination; and

13.1.4 for notifying Applicants of the results of an Examination.

- 13.2 An Applicant for registration in the Registrant class of Psychology: Registered Psychologist who, to the satisfaction of the Registration Committee, has met all applicable registration requirements except delivery of the items required under subparagraphs 2.1.6 and 2.1.9 and successful completion of the Examinations required under subparagraphs 3.1.4 to 3.1.6:
- 13.2.1 is eligible to take the EPPP, the WJE, and any other Examinations required under subparagraph 3.1.6; and
 - 13.2.2 is eligible to take the Oral Examination after successfully completing the Examinations referred to in subparagraph 13.2.1 and attending any orientation workshop that may be required by the Registration Committee.
- 13.3 An Applicant for registration in the Registrant class of Psychology: School Psychologist who, to the satisfaction of the Registration Committee, has met all applicable registration requirements except delivery of the items required under subparagraphs 2.1.6 and 2.1.9 and successful completion of the Examinations required under subparagraphs 5.1.5 and 5.1.6:
- 13.3.1 is eligible to take the WJE and any other Examinations required under subparagraph 5.1.6; and
 - 13.3.2 is eligible to take the Readiness for Practice Examination after successfully completing the Examinations referred to in subparagraph 13.3.1 and attending any orientation workshop that may required by the Registration Committee.
- 13.4 An Applicant who takes an Examination under this Schedule must pay any applicable Examination Fee specified in Schedule 1.
- 13.5 If an invigilator for an Examination has reason to believe that an Applicant has engaged in improper conduct during the course of the Examination, the invigilator must make a report to the Registration Committee and may recommend that the Registration Committee take one or more of the following courses of action:
- 13.5.1 fail the Applicant;
 - 13.5.2 pass the Applicant;
 - 13.5.3 require the Applicant to repeat the Examination; and
 - 13.5.4 disqualify the Applicant from participating in any Examination for a period of time specified by the Registration Committee.
- 13.6 After considering a report made under paragraph 13.5, the Registration Committee may take one or more of the courses of action specified in that subsection.

14.0 Professional Liability Insurance *[Previous Bylaw 61 (under Part 6)]*

- 14.1 All Registrants must maintain or be included in coverage under a policy of professional liability insurance, in an amount not less than \$1,000,000 per occurrence, in a form that is satisfactory to the Registrar.

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Table 1: Criteria for Evaluating Degrees, Programs of Study (including Practica), and Internships

In evaluating the content of a doctoral or master's program of study (including practica) offered by a Canadian post-secondary educational institution or the equivalency of a degree from a non-Canadian educational institution for the purpose of assessing whether an Applicant's degree meets the conditions and requirements for registration in the Registrant classes of Psychology: Registered Psychologist or Psychology: School Psychologist under this Schedule, the Registration Committee must be guided by the applicable criteria in this Table.

The Registration Committee must also be guided by the applicable criteria in this Table when assessing whether an internship meets the College's conditions and requirements for a pre-doctoral internship for the purpose of registration in the Registrant class of Psychology: Registered Psychologist, or for a school psychology internship for the purpose of registration in the Registrant class of Psychology: School Psychologist.

For further guidance, the Registration Committee may also refer to psychology training standards established by the Canadian Psychological Association (CPA), the American Psychological Association (APA), the National Association of School Psychologists (NASP) or other relevant authorities.

I. **Psychology: Registered Psychologist Registration**

The following institutional, coursework, program characteristics, program content, and supervised experience criteria apply to the evaluation of a doctoral program of study for the purpose of subparagraph 3.1.1 of Schedule 7:

A. Institutional Criteria:

1. Doctoral degree must be from an institution, which, at the time of the Applicant's convocation, was:
 - a) a government-approved or government-authorized degree-granting institution of higher education in Canada;
 - b) a regionally-accredited institution of higher education in the U.S.; or
 - c) a recognized institution (for institutions outside Canada or the U.S.) assessed by a credential assessment agency, acceptable to the Registration Committee, as offering a degree equivalent to a graduate degree from a government-approved or government authorized degree-granting institution of higher education in Canada.

2. Applicants who have graduated from Canadian Psychological Association (CPA) or American Psychological Association (APA) accredited doctoral programs will be deemed to have met the institutional criteria.

B. Coursework Criteria:

1. Coursework completed in a doctoral program in psychology must be sufficient to prepare its students for professional practice in psychology. This includes providing foundational knowledge and training in core competencies for the professional practice of psychology, as defined in Table 3 to Schedule 7, or as required by Registration Committee policies, including sufficient coursework in the areas of:
 - a) biological bases of behaviour,
 - b) cognitive/affective bases of behaviour,
 - c) social bases of behaviour,
 - d) individual differences,
 - e) ethics and standards in professional psychology,
 - f) research design and methodology,
 - g) statistics,
 - h) psychometrics,
 - i) professional practice of assessment,
 - j) professional practice of intervention, and
 - k) any other coursework required by Registration Committee policies.
2. Applicants who have graduated from Canadian Psychological Association (CPA) or American Psychological Association (APA) accredited doctoral programs will be deemed to have met the coursework criteria.

C. Program Characteristics Criteria:

1. Psychology program: The program is a clinical, counselling or school psychology doctoral program, or a doctoral program in another area of psychology practice acceptable to the Registration Committee, within a department or recognizable and coherent unit of psychologists that assume responsibility for it.

2. Degree in psychology: The degree issued to any student in the program is listed on the student's transcript as a doctorate degree in psychology.
3. Body of resident students: The program has an identifiable body of resident students who are matriculated in the clinical, counselling, school or other acceptable psychology program for the doctoral degree.
4. Psychology faculty: The program has an identifiable psychology faculty, with a majority of the faculty consisting of psychologists licensed or registered to practice the profession of psychology ("Core Faculty"):
 - a) Core Faculty credentials and training: Core Faculty members have completed their own degrees in clinical, counselling or school psychology, or in another area of psychology practice acceptable to the Registration Committee, meeting the standards in place at the time of their training, which standards required completion of an internship. Core Faculty members, especially members administratively responsible for the program, have completed their doctoral and internship training at programs accredited by the CPA or its equivalent. Core Faculty includes a minimum of five FTE psychology faculty members.
 - b) Core Faculty commitment to psychology: Core Faculty consists of experienced and productive members whose teaching, research and other professional activities (e.g., course loads, publications, professional participation and practice) demonstrate commitment to the intellectual, scientific and applied enterprises of psychology.
 - c) Core Faculty commitment to the program: Core Faculty members are committed to and identify with the program so that effective leadership, modeling, supervision, and instruction of students can be ensured.
 - d) Complementary and adjunct faculty availability and credentials: Program offerings are augmented by the contributions of faculty whose primary affiliations are within another area of psychology (complementary faculty), faculty who are affiliated with other often practice-related settings (adjunct faculty), and/or by faculty from other departments or faculties. Core Faculty, complementary faculty, and adjunct faculty who supervise students in the provision of professional services are appropriately credentialed and registered in the jurisdiction where the services are provided.
 - e) Training Committee: A number of the core faculty combine to form a Training Committee from among whom a Director of Training is appointed. The Director of Training models the professional role to faculty and students through active registration as a psychologist in the jurisdiction in which the

program is located as well as through other professional activities. Members of the Training Committee hold tenured or tenure-track appointments at the institution in which the program is housed. Additionally, the Director of Training holds a senior tenured appointment at the institution in which the program is housed.

5. Professional training program: The expressed purpose of the program (e.g., as evidenced in pertinent institutional catalogues, websites and brochures) is to educate and train students in the profession of psychology.
6. Sequence of instruction: The program incorporates an integrated, organized sequence of instruction that meets the following criteria:
 - a) Practice, theory and research are integrated early in the program.
 - b) Training in these areas proceeds in sequence and presents information, and exacts requirements, which are cumulative and increasingly complex over the course of the program.
 - c) In advancing these requirements, the program ensures that it offers an integrated, organized plan of study and ensures a breadth of exposure to the field of psychology.
 - d) The program helps to ensure that its students are sufficiently prepared for advanced professional training (e.g., doctoral internships, postdoctoral fellowships) and postdoctoral employment.
 - e) Research training enables students to formulate and solve problems, acquire new knowledge and evaluate practice. Accordingly, students are trained to employ the methodological paradigms appropriate to their research questions and the merits of their research are evaluated on the basis of the paradigm indicated and employed.
7. Publicly available performance criteria: The program provides publicly available criteria for admission to practica and internships, which criteria include personal and intellectual skills, attitudes and values, and a core of professional knowledge. The program clearly identifies baseline competences with clearly articulated development goals. The program provides publicly available outcome data describing key information about program graduates.
8. Supervision: The program defines individual and group supervision as follows:
 - a) Individual supervision: Individual supervision is provided by the supervisor who is accountable for the psychological service the student delivers directly to

patients/clients, and consists of visual and/or verbal communication in person between a supervisor and supervisee in which:

- (1) the supervisor observes the supervisee deliver psychological service (i.e., either in the room with the supervisee and/or patient/client or with the use of one-way mirrors),
 - (2) the supervisor and supervisee review audio or video recordings of the supervisee's delivery of psychological service, and
 - (3) the supervisor and supervisee engage in case discussion (i.e., the supervisee provides an oral report of their delivery of psychological service to an identified patient/client).
- b) Group supervision: Group supervision is provided through activities or meetings in which students participate in the supervision received by another student, intern or trainee, or some combination of students and supervisors meet to review or discuss some method or technique of psychological service delivery, particular problems or disorders, or a professional or ethical issue affecting practice.
9. Policies and procedures: The program has developed policies and procedures, communicated in writing to each student at the start of their graduate training, for:
- a) evaluation of students' competencies,
 - b) developing, implementing and monitoring remediation plans, and
 - c) handling of students' academic, practice and/or interpersonally related difficulties.
10. Program oversight:
- a) Program training director: A Core Faculty member acts as program training director.
 - b) Practicum and internship settings and progress: At least one faculty member is designated primarily responsible for monitoring and evaluating practicum facilities and internship settings, and for overseeing student progress within them.

- c) Practicum supervision coordination: Each student's practicum experience is coordinated by a Core Faculty member, or by an adjunct professor, associated with the practicum setting.
11. Role-modeling: The psychologist(s) administratively responsible for the program hold tenured and senior appointments at the institution that houses the program, and serve as professional role models for faculty, staff, and students (e.g., as demonstrated by their leadership, competence, and participation in, and recognition by, professional Associations or learned societies).
12. Resident study and training: The program requires resident study and training, consisting of in-person participation in courses, seminars, practica and internships with face-to-face, in person, contact with faculty and other students, in order to develop trainee assessment, therapy and interpersonal skills, to permit faculty to directly observe trainee interactions with clients, other trainees and supervisors, and to provide opportunity for in-person, face-to-face faculty supervision of trainees. If distance education or electronically mediated formats are incorporated into the program, residency requirements, as set out below, must still be met:
- a) Residency requirement: The Applicant is required to complete a minimum of three academic years of full-time resident study and training, or equivalent part-time study and training, at the educational institution granting the doctoral degree during the enrolment in the doctoral program.
 - b) Quantity of resident study and training: One year of resident study consists of at least 18 semester hours, exclusive of internship requirements, taken on a full-time or part-time basis at the educational institution granting the degree, accumulated in not less than 9 months and not more than 18 months, and includes student-to faculty contact involving face-to-face, in person, group courses. Such educational meetings:
 - (1) include both faculty-to-student and student-to-student interaction,
 - (2) are conducted by the psychology faculty of the institution at least 90% of the time,
 - (3) are fully documented by the institution, and
 - (4) relate substantially to the program and course content.
 - c) Distribution of resident study and training: The program distributes education and training over the days and weeks of an academic year, at the educational

institution granting the degree, and provides students with access to a core psychology faculty, with its members' primary time and employment responsibilities being to the educational institution, as well as access to other students matriculated in the program.

13. Applicants who have graduated from Canadian Psychological Association (CPA) or American Psychological Association (APA) accredited doctoral programs that satisfy the criteria for resident study and training in paragraph 12 will be deemed to have met the other program characteristics criteria.

D. Program Content Criteria:

1. **Broad training:** The program provides broad training in the practice of psychology, including a range of assessment and intervention procedures and is not restricted to a single type. Although programs may emphasize different theoretical models and skills, the program must train students in the diversity of major assessment and intervention techniques in common use along with their theoretical bases. Programs must include training in evidence-based interventions as well as training in more than one therapeutic modality (i.e., individual, couple, family, group).
2. **Core competencies.** The core competencies as defined in Table 3 to Schedule 7 must be covered.
3. **Research-based dissertation:** The program requires completion of a research-based dissertation.
4. Applicants who have graduated from Canadian Psychological Association (CPA) or American Psychological Association (APA) accredited doctoral programs will be deemed to have met the program content criteria.

E. Supervised Experience Criteria:

1. **Practicum:** The program includes a minimum of 600 hours of pre-degree practical experience in the delivery of psychological services completed under the direct supervision of a psychologist registered in the jurisdiction in which the supervision takes place, and satisfying the following criteria:
 - a) At least half of the supervised practicum training is devoted to direct, face-to-face patient/client contact (defined as time students spend interviewing, assessing, or intervening with clients directly).

- b) Students must receive a minimum of one hour of supervision for every four hours of client contact.
 - c) In addition to direct service and supervision, students participate in support activities during their practica. Support activities are defined as clinically relevant activities in support of the direct service, such as writing progress and process notes, report writing, case treatment planning, consultation, session review, case presentations, case-relevant literature reviews, rounds, case conferences, psychometric test scoring and interpretation, learning new psychological measures and/or interventions/treatments and professional development/continuing education that supports specific patient/client care.
 - d) The balance between direct service, supervision and support hours required by the student evolves with developing competence.
 - e) Practicum students are supervised by psychologists who are registered for independent psychological practice in the jurisdiction in which the services are provided.
 - f) Any supervision of practicum students provided by graduate students as part of their doctoral training program is carried out under the supervision of a doctoral level, registered psychologist specifically for this activity.
 - g) 75% of the required supervision provided to a student during practicum training will be individual supervision as defined above.
 - h) 25% of the supervision provided can be either individual or group supervision.
2. Applicants who have graduated from Canadian Psychological Association (CPA) or American Psychological Association (APA) accredited doctoral programs will be deemed to have met the supervised experience criteria.

The following additional criteria apply to recognition of a pre-doctoral internship for the purpose of subparagraph 3.1.2 of Schedule 7:

F. Pre-Doctoral Internship Criteria:

1. Organization: A psychology internship is an organized training program which, in contrast to supervised experience or on-the-job training, is designed to provide the intern with a planned, programmed sequence of training experiences and activities, providing exposure to a variety of problems and populations. The primary focus and purpose is assuring breadth and quality of training.

2. **Accountability:** The internship agency has a clearly designated staff psychologist (“Director of Training”) who is responsible for the integrity and quality of the training program and present at the training facility for a minimum of 20 hours a week. This psychologist has graduated with a doctorate from a psychology program in clinical, counselling or school psychology, or in another area of psychology practice acceptable to the Registration Committee, and has been registered or licensed as a registered psychologist registrant or the equivalent of a registered psychologist registrant and in good standing with the psychology regulatory body in the jurisdiction in which the program is located for a minimum of two years immediately prior to the time the intern starts the pre-doctoral internship.
3. **Director:** The Director of Training is an experienced and senior professional who has had prior and substantive experience in the provision of training. The Director is advised by a training committee of other psychologists who are themselves significantly involved in the internship program.
4. **Intern cohort:** The internship agency has at least two interns completing the internship at the same time.
5. **Primary supervisors:** The internship agency training staff consists of at least two full time equivalent psychologists who serve as primary supervisors, who are doctoral prepared, and have been registered or licensed as registered psychologist registrants or the equivalent of registered psychologist registrants and in good standing with the psychology regulatory body in the jurisdiction in which the program is located for a minimum of two years immediately prior to the time the intern starts the pre-doctoral internship.
6. **Structure of supervision:** Intern supervision is provided by staff members or qualified affiliates of the internship agency who are accountable to the internship director regarding their supervision of the intern. These supervisors carry clinical responsibility for the cases being supervised and are identified as such (e.g., countersigning documentation or identified as a supervisor on treatment plans, or reports). The minimum amount of supervision provided is at a ratio of one hour of supervision for each four hours of client contact per week. At least three hours per week of regularly scheduled face-to-face individual supervision are provided by psychologists who are doctoral prepared, and have been registered or licensed as registered psychologist registrants or the equivalent of registered psychologist registrants and in good standing with the psychology regulatory body in the jurisdiction in which the program is located for a minimum of two years immediately prior to the time the intern starts the pre-doctoral internship.

7. Content of supervision: Supervision is provided with the specific intent of dealing with psychological services rendered directly by the intern. Administrative supervision and/or personal growth experiences are not included as part of the required supervision.
8. Range of experience: The internship provides training in a range of psychological assessment and intervention activities and is not restricted to a single type. Exposure to a variety of problems and client populations is provided. This includes exposure to different theoretical models and treatment modalities (e.g., group, individual, couple, family) as well as different age groups and levels of severity. Interns become familiar with the diversity of major assessment and intervention techniques in common use and their theoretical bases. Experiences are designed to prepare the intern for practice in various settings including hospitals, private practice, outpatient clinics and other private and public institutions. The training is conducted directly with recipients of psychological services.
9. Training plan: A written training plan detailing general and individualized training goals and objectives is completed at the beginning of the training year and signed by both the intern and the designated psychologist responsible for the training program. The plan includes descriptions regarding client populations, types of assessments and interventions and caseload expectations.
10. Required patient contact: At least 30% of the intern's time is in providing direct psychological services to patients/clients, seeing a sufficient number of clients to ensure that the intern reaches a level of competent clinical service in the area in which they plan to practice.
11. Didactic component: The internship must provide at least two hours per week in didactic activities such as case conferences, seminars, in service training, or grand rounds, and excluding supervision
12. Timing of internship: Internship training is subsequent to required clerkships, practica, and/or externships. For psychologists, it must be obtained while enrolled in a doctoral program or post-doctorate.
13. Title of trainee: The internship level psychology trainees have a title such as "Intern", "Resident", "Fellow," or other designation of trainee status.
14. Program description: The internship agency has a written statement or brochure which provides a clear description of the nature of the training program, including

the goals and content of the internship and clear expectations for quantity and quality of the intern's work, and is made available to prospective interns.

15. Due process: Internship programs have documented due process procedures that describe separately how programs deal with concerns about intern performance, and interns' concerns about training. These procedures include the steps of notice, hearing and appeal and are given to the interns at the beginning of the training period.
16. Required time: The internship is a full-time commitment over the course of one calendar year or, half-time over the course of two, consecutive calendar years. The full-time and half-time experiences each provide, at a minimum, 1600 hours of supervised experience. If a student elects for a half-time experience over two years, both years must take place at the same internship program. Therefore, programs offering half-time experiences must be prepared to accommodate the student for two consecutive years.
17. Evaluation: At least twice a year the internship program conducts formal written evaluations of each intern's performance.
18. Payment for supervision: The terms of payment for supervision are explicit and agreed upon prior to the onset of supervision. The payment contract includes explicit agreement that payment for supervision in no way implies a positive evaluation by the supervisor of the intern.
19. Dual relationships: Relationships between supervisors and interns are in compliance with prevailing ethical standards with regard to dual relationships (as reflected in the Code of Conduct). Supervision cannot be provided in the context of a professional relationship where the objectivity or competency of the supervisor is, or could reasonably be expected to be impaired because of the supervisor's present or previous familial, social, sexual, emotional, financial, supervisory, political, administrative, or legal relationship with the supervisee or a relevant person associated with or related to the supervisee.
20. Internships accredited by the Canadian Psychological Association (CPA) or American Psychological Association (APA) will be deemed to have met the pre-doctoral internship criteria.

II. Psychology: School Psychologist Registration

The following institutional, coursework, program characteristics, program content, and supervised experience criteria apply to the evaluation of a master's program of study for the purpose of subparagraph 5.1.1 of Schedule 7:

A. Institutional Criteria:

Master's degree must be from an institution, which, at the time of the Applicant's convocation, was:

- a) a government-approved or government-authorized degree-granting institution of higher education in Canada,
- b) a regionally-accredited institution of higher education in the U.S., or
- c) a recognized institution (for institutions outside Canada or the U.S.) assessed by a credential assessment agency, acceptable to the Registration Committee, as offering a degree equivalent to a graduate degree from a government-approved or government-authorized degree-granting institution of higher education in Canada.

B. Coursework Criteria:

Coursework completed in a master's degree program in psychology must be sufficient to ensure foundational knowledge and training in core competencies for the professional practice of psychology restricted to the practice area of school psychology, as required by Registration Committee policies or as the Registration Committee may otherwise require after taking into account the relevant criteria set out in Table 4 to Schedule 7. At a minimum, coursework must provide sufficient instruction in the areas of psychoeducational assessment, psychometrics, consultation, and ethics in professional practice, as well as any other coursework the Registration Committee may require under its policies.

C. Program Characteristics Criteria:

1. Psychology program: The program is a school psychology master's program, or a master's program in another area of psychology practice acceptable to the Registration Committee, within a department or recognizable and coherent unit of psychologists that assume responsibility for it.
2. Degree in psychology: The degree issued to any student in the program is listed on the student's transcript as a master's degree in psychology.

3. Body of resident students: The program has an identifiable body of resident students who are matriculated in the psychology program for the master's degree.
4. Psychology faculty: The program has an identifiable psychology faculty, with a majority of the faculty consisting of psychologists licensed or registered to practice the profession of psychology ("Core Faculty"):
 - a) Core Faculty credentials and training: Core Faculty members have completed their own degrees in school psychology, or in another area of psychology practice acceptable to the Registration Committee, meeting the standards in place at the time of their training, which standards required completion of an internship. Core Faculty members, especially members administratively responsible for the program, have completed their doctoral and internship training at programs accredited by the CPA or its equivalent. Core Faculty includes a minimum of three FTE psychology faculty members.
 - b) Core Faculty commitment to psychology: Core Faculty consists of experienced and productive members whose teaching, research and other professional activities (e.g., course loads, publications, professional participation and practice) demonstrate commitment to the intellectual, scientific and applied enterprises of psychology.
 - c) Core Faculty commitment to the program: Core Faculty members are committed to and identify with the program so that effective leadership, modeling, supervision, and instruction of students can be ensured.
 - d) Complementary and adjunct faculty availability and credentials: Program offerings are augmented by the contributions of faculty whose primary affiliations are within another area of psychology (complementary faculty), faculty who are affiliated with other often practice-related settings (adjunct faculty), and/or by faculty from other departments or faculties. Core Faculty, complementary faculty, and adjunct faculty who supervise students in the provision of professional services are appropriately credentialed and registered in the jurisdiction where the services are provided.
 - e) Training Committee: A number of the core faculty combine to form a Training Committee from among whom a Director of Training is appointed. The Director of Training models the professional role to faculty and students through active registration as a psychologist in the jurisdiction in which the program is located as well as through other professional activities. Members of the Training Committee hold tenured or tenure-track appointments at the

institution in which the program is housed. Additionally, the Director of Training holds a senior tenured appointment at the institution in which the program is housed.

5. Professional training program: The expressed purpose of the program (e.g., as evidenced in pertinent institutional catalogues, websites and brochures) is to educate and train students in the profession of psychology.
6. Sequence of instruction: The program incorporates an integrated, organized sequence of instruction that meets the following criteria:
 - a) Practice and theory are integrated early in the program.
 - b) Training in these areas proceeds in sequence and presents information, and exacts requirements, which are cumulative and increasingly complex over the course of the program.
 - c) In advancing these requirements, the program ensures that it offers an integrated, organized plan of study.
 - d) The program helps to ensure that its students are sufficiently prepared for post-degree employment.
7. Publicly available performance criteria: The program provides publicly available criteria for admission to practica and internships, which criteria include personal and intellectual skills, attitudes and values, and a core of professional knowledge. The program clearly identifies baseline competences with clearly articulated development goals. The program provides publicly available outcome data describing key information about program graduates.
8. Supervision: The program defines individual and group supervision as follows:
 - a) Individual Supervision: Individual supervision is provided by the supervisor who is accountable for the psychological service the student delivers directly to clients, and consists of visual and/or verbal communication in person between a supervisor and supervisee in which:
 - (1) the supervisor observes the supervisee deliver psychological service (i.e., either in the room with the supervisee and/or client or with the use of one-way mirrors),
 - (2) the supervisor and supervisee review audio or video recordings of the supervisee's delivery of psychological service, and

- (3) the supervisor and supervisee engage in case discussion (i.e., the supervisee provides an oral report of their delivery of psychological service to an identified client).
 - b) Group Supervision: Group supervision is provided through activities or meetings in which students participate in the supervision received by another student, intern or trainee, or some combination of students and supervisors meet to review or discuss some method or technique of psychological service delivery, particular problems or disorders, or a professional or ethical issue affecting practice.
9. Policies and procedures: The program has developed policies and procedures, communicated in writing to each student at the start of their graduate training, for:
 - a) evaluation of students' competencies;
 - b) developing, implementing and monitoring remediation plans; and
 - c) handling of students' academic, practice and/or interpersonally related difficulties.
10. Program oversight:
 - a) Program training director: A Core Faculty member acts as program training director.
 - b) Practicum and internship settings and progress: At least one faculty member is designated primarily responsible for monitoring and evaluating practicum facilities and internship settings, and for overseeing student progress within them.
 - c) Practicum supervision coordination: Each student's practicum experience is coordinated by a Core Faculty member, or by an adjunct professor, associated with the practicum setting.
11. Role-modeling: The psychologist(s) administratively responsible for the program hold tenured and senior appointments at the institution that houses the program, and serve as professional role models for faculty, staff, and students (e.g., as demonstrated by their leadership, competence, and participation in, and recognition by, professional associations or learned societies).
12. Resident study and training: The program requires resident study and training, consisting of in-person participation in courses, seminars, practica and internships

with face-to-face, in person, contact with faculty and other students, in order to develop trainee assessment, consultation, pre-referral intervention and interpersonal skills, to permit faculty to directly observe trainee interactions with clients, other trainees and supervisors, and to provide opportunity for in-person, face-to-face faculty supervision of trainees. If distance education or electronically mediated formats are incorporated into the program, residency requirements, as set out below, must still be met:

- a) Residency requirement: The Applicant is required to complete a minimum of two academic years of full-time resident graduate study, or equivalent part-time resident graduate study, at the educational institution granting the master's degree during the enrolment in the master's program.
- b) Quantity of resident study and training: One year of resident study consists of at least 18 semester hours, exclusive of internship requirements, taken on a full-time or part-time basis at the educational institution granting the degree, accumulated in not less than 9 months and not more than 18 months, and includes student-to faculty contact involving face-to-face, in person, group courses. Such educational meetings:
 - (1) include both faculty-to-student and student-to-student interaction,
 - (2) are conducted by the psychology faculty of the institution at least 90% of the time,
 - (3) are fully documented by the institution, and
 - (4) relate substantially to the program and course content.
- c) Distribution of resident study and training: The program distributes education and training over the days and weeks of an academic year, at the educational institution granting the degree, and provides students with access to a core psychology faculty, with its members' primary time and employment responsibilities being to the educational institution, as well as access to other students matriculated in the program.

D. Program Content Criteria:

School Psychology training: The program provides broad training within the area of practice of school psychology, including: varied models and methods of psychoeducational assessment and data collection; consultation and collaboration; interventions and instructional / mental health support; school-wide practices to promote

learning; prevention and response services; family-school collaboration services; diversity in development and learning; program evaluation; and ethics in professional practice.

E. Supervised Experience Criteria:

Practica: The program incorporates a minimum of 300 hours of pre-degree practical experience in the delivery of psychological services in a school setting and/or in a training clinic affiliated with the school psychology program, completed under the direct supervision of a psychologist or school psychologist registered in the jurisdiction in which the supervision takes place, and satisfying the following criteria:

- a) At least half of the supervised practicum training is devoted to direct, face-to-face client contact defined as time students spend interviewing, assessing, or intervening with clients directly.
- b) Students must receive a minimum of one hour of supervision for every four hours of client contact.
- c) In addition to direct service and supervision, students participate in support activities during their practica. Support activities are defined as activities in support of direct service to clients, such as writing progress and process notes, writing reports of assessments, planning interventions, consulting with clients or school staff, reviewing interactions with clients, presenting cases to peers, conducting case-relevant literature reviews, participating in rounds, participating in interdisciplinary case conferences, scoring and interpreting tests, learning new assessment measures and/or interventions and professional development/continuing education that supports specific client care.
- d) The balance between direct service, supervision and support hours required by the student evolves with developing competence.
- e) Practicum students are supervised by practitioners who are registered for psychological practice in the jurisdiction in which the services are provided.
- f) 75% of the required supervision provided to a student during practicum training will be individual supervision as defined above.
- g) 25% of the supervision provided can be either individual or group supervision.

The following additional criteria apply to recognition of a school psychology internship for the purpose of subparagraph 5.1.2 of Schedule 7:

F. School Psychology Internship Criteria:

1. Organization: A school psychology internship is an organized training program which, in contrast to supervised experience or on-the-job training, is designed to provide the intern with a planned, programmed sequence of training experiences and activities, providing exposure to a variety of problems and populations within the context of a school setting.
2. Primary supervisor: Each intern is supervised by a psychologist or school psychologist who serves as a primary supervisor. This supervisor
 - a) has been registered or licensed as a registered psychologist registrant or school psychologist registrant, or the equivalent of a registered psychologist registrant or school psychologist registrant, and is in good standing, with the psychology regulatory body in the jurisdiction in which the internship is located for a minimum of two years immediately prior to the time the intern starts the school psychology internship, and
 - b) Is either a staff member of the internship agency that provides the internship or a qualified affiliate of the internship agency, who is accountable to the training and/or internship director of the intern's master's program regarding their supervision of the intern.
3. Structure of supervision: The supervisor carries professional responsibility for the cases being supervised and is identified as such (e.g., countersigning documentation or identified as a supervisor in reports or other formal documents). At least two hours per week of regularly scheduled face-to-face individual supervision is provided to the intern.
4. Content of supervision: Supervision is provided with the specific intent of dealing with psychological services rendered directly by the intern. Administrative supervision and/or personal growth experiences are not included as part of the required supervision.
5. Type of experience: The internship provides experiences in a wide range of school psychology services including assessment, intervention and consultation at both the individual and systems level as described in Section D above (Program Content Criteria). Interns work with clients of varying ages, ethnicities and socioeconomic backgrounds, and with varying abilities, disabilities and needs. Experiences are

designed to prepare the intern for practice in a school setting. The training is conducted directly with recipients of psychological services.

6. Training plan: A written training plan detailing general and individualized training goals and objectives is completed at the beginning of the training year and signed by the intern, the supervisor, and the training and/or internship director of the intern's master's program. The plan includes descriptions of activities relating to assessments, consultation, program planning and interventions.
7. Required client contact: At least 30% of the intern's time is in providing direct psychological services to clients, seeing a sufficient number of clients to ensure that the intern reaches a level of competent practice in the area of school psychology.
8. Didactic component: In addition to supervised experience, the internship must include didactic activities such as case conferences, seminars, or in service training.
9. Timing of internship: Internship training is subsequent to satisfactory completion of required coursework, practica, and/or externships. It must be obtained while enrolled in a master's program.
10. Title of trainee: Interns have a title such as "School Psychology Intern", or another designation of trainee status.
11. Program description: There is a written statement or brochure associated with the internship, which provides a clear description of the nature of the training program, including the goals and content of the internship and clear expectations for quantity and quality of the intern's work, and is made available to prospective interns.
12. Due process: Internships have documented due process procedures that describe separately how they deal with concerns about intern performance, and interns' concerns about training. These procedures include the steps of notice, hearing and appeal and are given to the interns at the beginning of the training period.
13. Required time: The internship is a full-time commitment over the course of one school year, or half-time over the course of two consecutive school years. The full-time and halftime experiences each provide, at a minimum, 1200 hours of supervised experience in a school setting. If a student elects for a half-time experience over two years, both years must take place at the same internship agency. Therefore, agencies offering half-time experiences must be prepared to accommodate the student for two consecutive years.

14. Evaluation: At least twice a year the internship program conducts formal written evaluations of each intern's performance.
15. Payment for supervision: The terms of payment for supervision are explicit and agreed upon prior to the onset of supervision. The payment contract includes explicit agreement that payment for supervision in no way implies a positive evaluation by the supervisor of the intern.
16. Dual relationships: Relationships between supervisors and interns are in compliance with prevailing ethical standards with regard to dual relationships (as reflected in the College's Code of Conduct). Supervision cannot be provided in the context of a professional relationship where the objectivity or competency of the supervisor is, or could reasonably be expected to be, impaired because of the supervisor's present or previous familial, social, sexual, emotional, financial, supervisory, political, administrative, or legal relationship with the supervisee or a relevant person associated with or related to the supervisee.

Table 2: Areas of Psychology Practice

- **Clinical psychology** is the application of psychological knowledge to the assessment, diagnosis, prevention, and/or treatment of individuals with disorders of behaviour, emotions and/or thought, to counselling and consultation with couples, families, and groups, and to the enhancement of psychological and physical well-being.
- **Counselling psychology** is the application of psychological knowledge to the evaluation and counselling of individuals, couples, families, and groups in order to help people adjust to problematic events and accomplish life tasks within the major spheres of work, education, relationships, and family during the lifespan developmental process. The work of counselling psychology is generally with reasonably well adjusted people.
- **Forensic psychology** is the application of psychological knowledge about human behaviour to the understanding, assessment, diagnosis and/or treatment of individuals within the context of criminal and/or legal matters.
- **Correctional psychology** is the application of psychological knowledge to the evaluation and treatment of individuals in a correctional setting.
- **Health psychology** is the application of psychological knowledge and skills to the promotion and maintenance of health, the prevention and treatment of illness, helping individuals, couples, families, and groups cope with physical illness, and the identification of determinants of health and illness.
- **Industrial/organizational psychology** is the application of psychological knowledge to further the welfare of people and the effectiveness of organizations by: understanding the behaviour of individuals and organizations in the workplace; helping individuals pursue meaningful and enriching work; and assisting organizations in the effective management of their human resources.
- **Clinical Neuropsychology** is the application of psychological knowledge about brain behaviour relationships to the assessment, diagnosis, treatment and rehabilitation of individuals with known or suspected central nervous system dysfunction, neurological disorders, traumatic brain injury, and learning difficulties.
- **Rehabilitation psychology** is the application of psychological knowledge and skills to the assessment and treatment of individuals, couples, families, and groups, with impairments in their physical, emotional, cognitive, social, or occupational capacities as a result of injury, illness or trauma in order to promote maximum functioning and minimize disability.

- **School psychology** is the application of psychological knowledge about human behaviour and development to the understanding and assessment of the developmental, behavioural, cognitive, emotional, intellectual and interpersonal needs of children, adolescents, and adults as those needs relate their ability to learn and function in a learning environment; and to the creation, protection and promotion of learning environments that facilitate learning and intellectual functioning.
- **Academic psychology** is the field of psychology that aims to expand and disseminate psychological knowledge through scientific inquiry, examination, investigation, and/or experimentation.
- **Psychometry** is the administration and scoring of psychological and neuropsychological tests by a non-psychologist under the supervision of a fully registered psychologist. It requires extensive comprehension of test administration as well as efficient scoring in concert with providing detailed behavioural observations of the examinee.
- **Behaviour Analysis** is the design, implementation, and evaluation of instructional and environmental modifications to produce socially significant improvements in human behaviour, and includes the empirical identification of functional relations between behaviour and environmental factors, known as functional assessment and analysis. Interventions are based on scientific research and the direct observation and measurement of behaviour and environment. Contextual factors, establishing operations, antecedent stimuli, positive reinforcement, and other consequences are used to help people develop new behaviours, increase or decrease existing behaviours, and emit behaviours under specific environmental conditions.

Table 3: Core Competencies

1. **Interpersonal Relationships**

Definition

This basic competency forms part of all the other competencies. Psychologists normally do their work in the context of interpersonal relationships (parent-child, spouses, boss-employee, etc.). They must therefore be able to establish and maintain a constructive working alliance with their clients, and possess adequate cultural competency.

Knowledge:

Knowledge of theories and empirical data on the professional relationship, such as:

- Interpersonal relationships
- Power relationships
- Therapeutic alliance
- Interface with social psychology
- More specific knowledge of the fluctuations of the therapeutic/professional relationship as a function of intervention setting

Knowledge of self, such as:

- Motivation
- Resources
- Values
- Personal biases
- Factors that may influence the professional relationship (e.g., boundary issues)

Knowledge of others, such as:

- Macro-environment in which the person functions (work, national norms, etc.)
- Micro-environment (personal differences, family, gender differences, etc.)

Skills:

Effective communication

Establishment and maintenance of rapport

Establishment and maintenance of trust and respect in the professional relationship

2. **Assessment and Evaluation**

Definition

A competent professional psychologist draws on diverse methods of evaluation, determining which methods are best suited to the task at hand, rather than relying solely or primarily on formalized testing as an automatic response to situations requiring assessment.

The appropriate subject of evaluation in many instances is not an individual person but a couple, family, organization, or system at some other level of organization.

The skills required for assessment can and should be applied to many situations other than initial evaluation, including, for example, treatment outcome, program evaluation, and problems occurring in a broad spectrum of non-clinical settings.

The primary purpose of psychological assessment is to provide an understanding that informs a practical plan of action. It may result in a diagnostic classification or in the identification of strengths or competencies.

Knowledge:

- Assessment methods
- Knowledge of populations served
- Human development
- Diagnosis

Skills:

- Formulation of a referral question
- Selection of methods
- Information collection and processing
- Psychometric methods
- Formulation of hypotheses and making a diagnosis when appropriate
- Report writing
- Formulation of an action plan

3. **Intervention**

Definition

The intervention competency is conceptualized as activities that promote, restore, sustain, and/or enhance positive functioning and a sense of well-being in clients through preventive, developmental and/or remedial services. A broad, comprehensive vision of the intervention competency should include explicitly theory as well as the following knowledge and skills:

Knowledge:

- The learning of an array of varied interventions with individuals and systems (e.g., couples, families, groups and organizations)
- A respect for the positive aspects of all major approaches, which should reflect an openness to varied viewpoints and methods
- Awareness of when to make appropriate referrals and consult
- Awareness of context and diversity
- Knowledge of interventions that promote health and wellness

Skills:

- Establish and maintain professional relationships with clients from all populations served.
- Establish and maintain appropriate interdisciplinary relationships with colleagues.
- Gather information about the nature and severity of problems and formulate hypotheses about the factors that are contributing to the problem through qualitative and quantitative means.
- Select appropriate intervention methods.
- Analyze the information, develop a conceptual framework, and communicate this to the client.

4. **Research**

Definition

Professional psychology programs should include research training such that it will enable students to develop:

- A basic understanding of and respect for the scientific underpinnings of the discipline.
- Knowledge of methods so as to be good consumers of the products of scientific knowledge.
- Sufficient skills in the conduct of research to be able to develop and carry out projects in a professional context and, in certain cases, in an academic context with the aid of specialized consultants (e.g. statisticians).

Knowledge:

- Basic knowledge of research methods and of the applications of scientific research, including:
 - Applied statistics and measurement theory;
 - The logic of different models of scientific research (from laboratory experimentation to quasi-experimental and field research);
 - Qualitative research methods (including observation and interviewing), etc., particularly with respect to the nature of reliability and validity in the gathering and interpretation of qualitative data.

Skills:

- Critical reasoning skills
- Applications of various research approaches to social systems
- Ability to write professional reports.

5. **Ethics and Standards**

Definition

Professionals accept their obligations, are sensitive to others, and conduct themselves in an ethical manner. They establish professional relationships within the applicable constraints and standards.

Knowledge:

- Ethical principles
- Standards of professional conduct
- Responsibilities to clients, society, the profession, and colleagues
- Awareness of potentially conflicting principles
- Standards for psychological tests and measurements
- Standards for conducting psychological research
- Jurisprudence and local knowledge

Skills:

- Ethical decision-making process
- Proactive identification of potential ethical dilemmas
- Resolution of ethical dilemmas

6. **Integrated Primary Care (Optional)**

Definition

Psychologists who work in primary care settings are part of an integrated health team. They assess and treat individuals from diverse populations presenting with a broad range of physical health issues, mental health conditions, and other complex needs. Their interactions with clients/patients are typically same-day and of short duration, lasting 15 to 30 minutes, with follow-up as clinically indicated, similar to issue-focused longitudinal care in family medicine.

The psychologist working in integrated primary care is prepared to conduct very brief targeted assessments of client/patient needs, to provide brief evidence-based interventions, to support and augment primary medical treatment, and/or to offer psychoeducational information. Their involvement encompasses prevention, intervention, and recovery related to physical and mental health issues, and includes promoting behaviours that support health and wellness. Psychologists in primary care settings aspire to meet with clients/patients at the time or same day as the initial referral.

As part of a team, the integrated care psychologist supports all members of the team, supports care plans, accesses and documents appropriately in the client's/patient's chart within their clinic EMR, communicates with external providers and resources when needed, and communicates effectively with team members to facilitate optimal care for clients/patients.

Knowledge:

- Evidence-based brief assessment methods
- Evidence-based brief intervention methods
- Basic knowledge of medical conditions common to the setting and their treatment
- Expert knowledge of mental health conditions common to the setting and their treatment
- Roles, responsibilities, and scopes of practice of other team members

Skills:

- Effective, trauma-informed communication with other professionals and with clients/patients and their supports, including the ability to establish rapport quickly and to use language that is appropriate for the context
- Effective use of time, including introduction of self and services, and primary care-appropriate informed consent
- Effective collaborative and teamwork functioning
- Effective use of brief screening instruments and ability to conduct effective targeted interviews

- Effective application of evidence-based brief intervention methods
- Ability to create and implement behaviour change and collaborative care plans
- Ability to support, reinforce, and augment other health profession care plans
- Effective clinical documentation to optimize care team coordination
- Ability to create and maintain cultural safety
- Ability to provide real-time consultations to other health providers regarding client/patient care

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Table 4: Core Competencies for School Psychologists

1. Data-Based Decision Making

School psychologists understand and utilize assessment methods for identifying strengths and needs; developing effective interventions, services, and programs; and measuring progress and outcomes within a multitiered system of supports. School psychologists use a problem-solving framework as the basis for professional activities. School psychologists systematically collect data from multiple sources as a foundation for decision-making at the individual, group, and systems levels, and they consider ecological factors (e.g., classroom, family, and community characteristics) as a context for assessment and intervention.

2. Consultation and Collaboration

School psychologists understand varied models and strategies of consultation and collaboration applicable to individuals, families, groups, and systems, as well as methods to promote effective implementation of services. As part of a systematic and comprehensive process of effective decision-making and problem solving that applies to all aspects of service delivery, school psychologists demonstrate skills to consult, collaborate, and communicate effectively with others.

3. Academic Interventions and Instructional Supports

School psychologists understand biological, cultural, and social influences on academic skills; human learning, cognitive, and developmental processes; and evidence-based curricula and instructional strategies. School psychologists, in collaboration with others, use assessment and data collection methods to implement and evaluate services that support academic skill development in children.

4. Mental and Behavioral Health Support

School psychologists understand biological, cultural, developmental, and social influences on mental health, behavior, and learning. School psychologists, in collaboration with others, design, implement, and evaluate services that support resilience and positive behavior, socialization and adaptive functioning, and behavioral health in the school setting.

5. School-Wide Practices to Promote Learning

School psychologists understand system structures, organization, and theory; general and special education programming; implementation science; and evidence-based, school-wide practices that promote learning, positive behavior, and mental health. School psychologists, in collaboration with others, develop and implement practices and strategies to create and maintain safe, effective, and supportive learning environments for students and school staff.

6. Services to Promote Safe and Supportive Schools

School psychologists understand principles and research related to social–emotional well-being, resilience and risk factors in learning, mental and behavioral health, services in schools and communities to support multitiered prevention and health promotion, and evidence-based strategies for creating safe and supportive schools. School psychologists, in collaboration with others, promote preventive and responsive services that enhance learning, mental and behavioral health, and psychological and physical safety and implement effective crisis prevention, protection, mitigation, response, and recovery.

7. Family, School, and Community Collaboration

School psychologists understand principles and research related to family systems, strengths, needs, and cultures; evidence-based strategies to support positive family influences on children’s learning and mental health; and strategies to develop collaboration between families and schools. School psychologists, in collaboration with others, design, implement, and evaluate services that respond to culture and context. They facilitate family and school partnerships and interactions with community agencies to enhance academic and social–behavioral outcomes for children.

8. Diverse Student Populations

School psychologists recognize that equitable practices for diverse student populations and respect for diversity in development and learning are foundational to effective service delivery. School psychologists have knowledge of individual differences, abilities, disabilities, and other diverse characteristics and the impact these have on development and learning. They understand diversity in children, families, schools, and communities, including variations in child development, the influence of religion, culture and cultural identity, the impacts of race, sexual orientation, gender identity and expression, the effects of socioeconomic status, and the importance of other variables. School psychologists implement evidence-based strategies that are based on equity of opportunity to enhance services in both general and special education and address potential influences related to diversity.

9. Research and Evidence-Based Practice

School psychologists have knowledge of research design, statistics, measurement, and varied data collection and analysis techniques sufficient for understanding research, interpreting data, and evaluating programs in applied settings. As scientist practitioners, school psychologists evaluate and apply research as a foundation for service delivery and, in collaboration with others, use various techniques and technology resources for data collection, measurement, and analysis to support effective practices at the individual, group, and/or systems levels.

10. Legal, Ethical, and Professional Practice

School psychologists have knowledge of the history and foundations of school psychology; and knowledge of ethical, legal, and professional standards. School psychologists provide services consistent with ethical, legal, and professional standards; engage in responsive ethical and professional decision-making; collaborate with other professionals; and apply professional characteristics needed for effective practice as school psychologists, including effective interpersonal skills, responsibility, dependability, and respect for human diversity.

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Schedule 8: Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology: Registration, Examinations, and Professional Liability Insurance

1.0 Definitions

1.1 In this Schedule:

“Conditional Registrant” means a Registrant in the Registrant classes of Audiology: Conditional, Hearing Instrument Dispensing: Conditional, and Speech-Language Pathology: Conditional;

“Full Registrant” means a Registrant in any of the Registrant classes of Audiology: Full, Hearing Instrument Dispensing: Full, and Speech-Language Pathology: Full;

“Non-Practising Registrant” means a Registrant in the Registrant classes of Audiology: Non-Practising, Hearing Instrument Dispensing: Non-Practising, and Speech-Language Pathology: Non-Practising;

“Temporary Registrant” means a Registrant in the Registrant classes of Audiology: Temporary, Hearing Instrument Dispensing: Temporary, and Speech-Language Pathology: Temporary.

2.0 Hearing Instrument Dispensing: Full *[previously Bylaw 82]*

2.1 The conditions and requirements for registration in the Registrant Class of Hearing Instrument Dispensing: Full are:

2.1.1 less than three (3) years prior to the date of the application for registration submitted under subparagraph 2.1.6.1:

2.1.1.1 successful completion of at least a diploma course in hearing instrument dispensing from one of the academic programs specified in Table 1 of this Schedule; or

2.1.1.2 subject to paragraph 2.6, successful completion of:

2.1.1.2.1 at least a master’s degree in audiology from one of the recognized academic programs listed in Table 1 of this Schedule; or

2.1.1.2.2 a post-secondary degree in audiology from an academic program that meets or exceeds the requirements set out in Table 2 of this Schedule; or

- 2.1.1.2.3 at least a diploma course in hearing instrument dispensing from an academic program that meets or exceeds the requirements set out in Table 3 of this Schedule;
- 2.1.2 successful completion of the Examinations specified by the Registration Committee;
- 2.1.3 completion of supervised practice training:
 - 2.1.3.1 in the form and amount specified by the Registration Committee;
 - 2.1.3.2 within the number of consecutive months specified by the Registration Committee; and
 - 2.1.3.3 under the supervision of a person approved by the Registration Committee;
- 2.1.4 evidence satisfactory to the Registration Committee of the Applicant's English language proficiency;
- 2.1.5 evidence satisfactory to the Registration Committee that the Applicant is of good character and fit to engage in the practice of the profession consistent with the responsibilities of a Registrant and the standards expected of a Registrant; and
- 2.1.6 delivery to the Registrar of:
 - 2.1.6.1 a completed application for full registration in the Registrant class of Hearing Instrument Dispensing: Full;
 - 2.1.6.2 the application Fee, Examination Fee and registration Fee specified in Schedule 1;
 - 2.1.6.3 a copy of the Applicant's post-secondary transcript sent directly to the Registrar from the post-secondary institution or a copy of the Applicant's original diploma or other evidence satisfactory to the Registration Committee that the Applicant successfully completed the academic requirement specified in subparagraph 2.1.1;
 - 2.1.6.4 proof in a form acceptable to the Registration Committee that the Applicant completed the supervised practice training specified in subparagraph 2.1.3;
 - 2.1.6.5 proof in a form acceptable to the Registration Committee of the Applicant's entitlement to work in Canada;
 - 2.1.6.6 letters of recommendation, attesting to the good character of the Applicant, sent directly to the Registrar from two (2) persons who:
 - 2.1.6.6.1 are not related to the Applicant;
 - 2.1.6.6.2 have known the Applicant for more than two (2) years; and

- 2.1.6.6.3 will not benefit if the Applicant is granted full registration in the Registrant class of Hearing Instrument Dispensing: Full;
 - 2.1.6.7 a letter or certificate, in a form satisfactory to the Registration Committee and dated within 60 days prior to the date of application, from each body responsible for the regulation of a health profession in a jurisdiction where the Applicant is, or has been, authorized to practise that health profession, specifying particulars of any cancellation, suspension, limitation or conditions on the Applicant's entitlement to practise, or any investigation, review or proceeding which could lead to cancellation, suspension, limitation or conditions on the Applicant's entitlement to practise;
 - 2.1.6.8 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*, RSBC 1996, c. 86, together with the applicable Fee for obtaining a criminal record check; and
 - 2.1.6.9 proof of professional liability insurance coverage in the form and amount required under heading 14.0 and effective on or before the date of registration.
- 2.2 Despite paragraph 2.1, if an Applicant successfully completed the academic requirement specified in subparagraph 2.1.1 three (3) years or more prior to submitting an application for registration under subparagraph 2.1.6.1, the Applicant may be granted registration under this heading provided the Applicant:
- 2.2.1 meets the conditions and requirements established in paragraph 2.1.2, subparagraph 2.1.3 or 2.3, and subparagraphs 2.1.4 to 2.1.6; and
 - 2.2.2 satisfies the Registration Committee that:
 - 2.2.2.1 during the three (3) years immediately preceding the submission of an application for registration under subparagraph 2.1.6.1, the Applicant has engaged in the practice of hearing instrument dispensing:
 - 2.2.2.1.1 for a minimum of 750 hours;
 - 2.2.2.1.2 in one regulated jurisdiction or more; and
 - 2.2.2.1.3 in accordance with criteria established by the Board, or
 - 2.2.2.2 the Applicant's knowledge, skills and abilities are substantially equivalent to the competencies or other qualifications established in subparagraph 2.2.2.1.
- 2.3 Despite paragraph 2.1, an Applicant who is a former Registrant in the Registrant class of Hearing Instrument Dispensing: Full may be granted registration under this heading provided the Applicant:

- 2.3.1 became a Registrant in the Registrant class of Hearing Instrument Dispensing: Full without having completed the educational requirement under subparagraph 2.1.1;
 - 2.3.2 submits an application under subparagraph 2.1.6.1 within 24 months of the Applicant's registration in the Registrant class of Hearing Instrument Dispensing: Full having been cancelled under paragraph 12.4; and
 - 2.3.3 meets the conditions and requirements set out in subparagraphs 2.1.2 to 2.1.5 and subparagraph 2.1.6.2 and subparagraphs 2.1.6.4 to 2.1.6.9.
- 2.4 Despite paragraph 2.1, if an Applicant has not completed the supervised practice training required under subparagraph 2.1.3, the Registration Committee has the discretion, to consider whether the Applicant's knowledge, skills and abilities are substantially equivalent to the standards of academic or technical achievement established in subparagraph 2.1.3, and to grant registration under this heading on that basis, if the Applicant also meets the conditions and requirements established in subparagraph 2.1.1 or paragraph 2.2, and subparagraphs 2.1.2, 2.1.4, 2.1.5, and 2.1.6.1 to 2.1.6.3 and 2.1.6.5 to 2.1.6.9.
- 2.5 Where an Applicant fails to meet the conditions or requirements for registration under this heading within two (2) years of submitting an application for registration under subparagraph 2.1.6.1, the application expires, and if the Applicant still wishes to be registered, the Applicant must submit a new application.
- 2.6 If an Applicant is applying for registration as a Registrant in the Registrant class of Hearing Instrument Dispensing: Full based on successful completion of a degree specified in subparagraph 2.1.1.2, the Applicant must provide evidence satisfactory to the Registration Committee of having completed hearing instrument dispensing coursework and clinical practicum components that meet or exceed the requirements set out in Table 3 to this Schedule.

3.0 Audiology: Full and Speech-Language Pathologist: Full *[previously Bylaw 85]*

- 3.1 The conditions and requirements for registration in the Registrant Class of Audiology: Full and Speech-Language Pathologist: Full are:
- 3.1.1 less than three (3) years prior to the date of the application for registration submitted under subparagraph 3.1.5.1, successful completion of:
 - 3.1.1.1 at least a master's degree in speech-language pathology or audiology, or both, from one of the recognized academic programs listed in Table 1 to this Schedule; or

- 3.1.1.2 a post-secondary degree in speech-language pathology or audiology, or both, from an academic program that meets or exceeds the requirements set out in Table 2 to this Schedule;
- 3.1.2 successful completion of the Examination approved by the Registration Committee;
- 3.1.3 evidence satisfactory to the Registration Committee of the Applicant's English language proficiency;
- 3.1.4 evidence satisfactory to the Registration Committee that the Applicant is of good character and fit to engage in the practice of the profession consistent with the responsibilities of a Registrant and the standards expected of a Registrant; and
- 3.1.5 delivery to the Registrar of:
 - 3.1.5.1 a completed application for registration in the Registrant class of Audiology: Full or Speech-Language Pathologist: Full;
 - 3.1.5.2 the application Fee and registration Fee specified in Schedule 1;
 - 3.1.5.3 a copy of the Applicant's post-secondary transcript sent directly to the Registrar from the post-secondary institution or a copy of the Applicant's original transcript, certificate, diploma or degree, or other evidence satisfactory to the Registration Committee, that the Applicant successfully completed the academic requirement specified in subparagraph 3.1.1;
 - 3.1.5.4 if the Applicant is applying based on a degree from an academic program that meets or exceeds the requirements set out in Table 2 to this Schedule, proof in the form acceptable to the Registration Committee that the Applicant has completed those requirements;
 - 3.1.5.5 proof in a form acceptable to the Registration Committee of the Applicant's entitlement to work in Canada;
 - 3.1.5.6 letters of recommendation, attesting to the good character of the Applicant, sent directly to the Registrar from two (2) persons who:
 - 3.1.5.6.1 are not related to the Applicant;
 - 3.1.5.6.2 have known the Applicant for more than two (2) years; and
 - 3.1.5.6.3 will not benefit if the Applicant is granted registration in the Registrant classes of Audiology: Full or Speech-Language Pathology: Full;

- 3.1.5.7 a letter or certificate, in a form satisfactory to the Registration Committee and dated within 60 days prior to the date of application, from each body responsible for the regulation of a health profession in a jurisdiction where the Applicant is, or has been, authorized to practise that health profession, specifying particulars of any cancellation, suspension, limitation or conditions on the Applicant's entitlement to practise, or any investigation, review or proceeding which could lead to cancellation, suspension, limitation or conditions on the Applicant's entitlement to practise;
 - 3.1.5.8 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*, together with the applicable Fee for obtaining a criminal record check; and
 - 3.1.5.9 proof of professional liability insurance coverage in the form and amount required under heading 22.0 and effective on or before the date of registration.
- 3.2 Despite paragraph 3.1, if an Applicant successfully completed the academic requirement specified in subparagraph 3.1.1 three (3) years or more prior to submitting an application for registration under subparagraph 3.1.5.1, the Applicant may be granted registration under this heading provided the Applicant:
- 3.2.1 meets the conditions and requirements established in subparagraphs 3.1.2 to 3.1.5; and
 - 3.2.2 satisfies the Registration Committee that:
 - 3.2.2.1 during the three (3) years immediately preceding the submission of an application for registration under subparagraph 3.1.5.1, the Applicant has engaged in the practice of the Applicant's profession;
 - 3.2.2.1.1 for a minimum of 750 hours;
 - 3.2.2.1.2 in one regulated jurisdiction or more; and
 - 3.2.2.1.3 in accordance with criteria established by the Board; or
 - 3.2.2.2 the Applicant's knowledge, skills and abilities are substantially equivalent to the competencies or other qualifications established in subparagraph 3.2.2.1.
- 3.3 Despite paragraph 3.1, an Applicant who is a former Registrant in the Registrant class of Audiology: Full or Speech-Language Pathology: Full may be granted registration under this heading provided the Applicant:
- 3.3.1 became a Registrant in the Registrant class of Audiology: Full or Speech-Language Pathology: Full without having completed the educational requirement under subparagraph 3.1.1;

- 3.3.2 submits an application under subparagraph 3.1.5.1 within 24 months of the Applicant's registration in the Registrant class of Audiology: Full or Speech-Language Pathology: Full having been cancelled under paragraph 20.5; and
 - 3.3.3 meets the conditions and requirements set out in subparagraphs 3.1.2 to 3.1.4 and 3.1.5.2 and 3.1.5.5 to 3.1.5.9.
- 3.4 Where an Applicant fails to meet the conditions or requirements for registration under this heading within two (2) years of submitting an application for registration under subparagraph 3.1.5.1, the application expires, and if the Applicant still wishes to be registered, the Applicant must submit a new application.

4.0 Conditional Registration *[previously Bylaw 87]*

- 4.1 Subject to paragraphs 4.3 and 4.6, if an Applicant for registration under the Registrant class of Hearing Instrument Dispensing: Full has not successfully completed the Examinations required under subparagraph 2.1.2, the Registration Committee may grant conditional registration under the requirements of heading 2.0, provided the Applicant otherwise meets the conditions and requirements of heading 2.0.
- 4.2 Subject to paragraphs 4.3 and 4.6, if an Applicant for registration under the Registrant class of Audiology: Full or Speech-Language Pathologist: Full has not successfully completed the Examination required under subparagraph 3.1.2, the Registration Committee may grant the Applicant conditional registration provided the Applicant otherwise meets the conditions and requirements of heading 3.0.
- 4.3 An Applicant who wants the Registration Committee to consider their application for conditional registration must:
- 4.3.1 indicate that in the application the Applicant delivers to the Registrar under subparagraph 2.1.6.1 or 3.1.5.1; and
 - 4.3.2 if the Applicant is applying under heading 2.0, deliver to the Registrar a declaration in a form acceptable to the Registration Committee that the Registrant will write the Examinations required under subparagraph 2.1.2 on the next scheduled Examination date; or
 - 4.3.3 if the Applicant is applying under heading 3.0, deliver to the Registrar a declaration in a form acceptable to the Registration Committee that the Registrant will write the Examinations required under subparagraph 3.1.2 on the next scheduled Examination date.

- 4.4 A Conditional Registrant must be registered as a Full Registrant in the applicable Registrant class if:
- 4.4.1 within 2 years of being granted registration under paragraph 4.1, the Conditional Registrant successfully completes the Examinations required under subparagraph 2.1.2 and provides evidence satisfactory to the Registration Committee of that successful completion; or
 - 4.4.2 within 2 years of being granted registration under paragraph 4.2, the Conditional Registrant successfully completes the Examination required under subparagraph 3.1.2 and provides evidence satisfactory to the Registration Committee of that successful completion.
- 4.5 The Registrar must cancel a Conditional Registrant's registration, if:
- 4.5.1 within two (2) years of being granted conditional registration:
 - 4.5.1.1 a Registrant granted conditional registration under paragraph 4.1 fails the Examinations required under paragraph 2.2 three (3) times; or
 - 4.5.1.2 a Registrant granted conditional registration under paragraph 4.2 fails the Examination required under paragraph 3.2 three (3) times; or
 - 4.5.2 Two (2) years after being granted conditional registration;
 - 4.5.2.1 a Registrant granted conditional registration under paragraph 4.1 has not successfully completed the Examinations required under subparagraph 2.1.2 and provided evidence satisfactory to the Registration Committee of that successful completion; or
 - 4.5.2.2 a Registrant granted conditional registration under paragraph 4.2 has not successfully completed the Examination required under subparagraph 3.1.2 and provided evidence satisfactory to the Registration Committee of that successful completion.
- 4.6 Subject to requirements under heading 21.0, the Registration Committee cannot:
- 4.6.1 grant registration under paragraph 4.1 to a person who was previously registered under paragraph 4.1; or
 - 4.6.2 grant registration under paragraph 4.2 to a person who was previously registered under paragraph 4.2.

5.0 Temporary Registration *[previously Bylaw 67]*

- 5.1 The conditions and requirements for registration as a Temporary Registrant are:

- 5.1.1 the Applicant:
 - 5.1.1.1 is a Registrant in good standing of a body in another jurisdiction responsible for regulation of that profession; and
 - 5.1.1.2 is authorized to practise that profession in that jurisdiction as the equivalent of a Full Registrant; or
 - 5.1.1.3 possesses academic qualifications acceptable to the Registration Committee in relation to a restricted activity of that profession which the Applicant intends to demonstrate under subsection 4(b);
- 5.1.2 provision of evidence satisfactory to the Registration Committee of the Applicant's English language proficiency;
- 5.1.3 provision of evidence satisfactory to the Registration Committee that the Applicant is of good character and fit to engage in the practice of the profession consistent with the responsibilities of a Registrant and the standards expected of a Registrant; and
- 5.1.4 the Applicant delivers to the Registrar:
 - 5.1.4.1 a completed application for temporary registration;
 - 5.1.4.2 evidence satisfactory to the Registration Committee of the Applicant's:
 - 5.1.4.2.1 registration status in the regulatory body described in subparagraphs 5.1.1.1 and 5.1.1.2; or
 - 5.1.4.2.2 academic qualifications as described in subparagraph 5.1.1.3;
 - 5.1.4.3 the registration Fee specified in Schedule 1;
 - 5.1.4.4 an authorization for a criminal record check in the form required by the *Criminal Records Review Act*, together with the applicable Fee for obtaining a criminal record check;
 - 5.1.4.5 in the case of an Applicant who is currently practising the profession in a jurisdiction outside Canada, a criminal record check from that jurisdiction in a form satisfactory to the Registration Committee obtained no more than 60 days prior to the date of application; and
 - 5.1.4.6 proof of professional liability insurance or coverage in the form and amount required under heading 14.0 and effective on or before the date of registration.
- 5.2 Temporary registration may be granted under paragraph 5.1 for a period of up to 90 days.
- 5.3 The registration of a Temporary Registrant may be renewed once, prior to its expiry, for an additional period of up to 90 days, if the Temporary Registrant delivers to the Registrar:
 - 5.3.1 a completed application for renewal; and

5.3.2 the renewal Fee specified in Schedule 1.

5.4 A Temporary Registrant must not practise a profession except as permitted under the Bylaws.

6.0 Non-Practising Registration *[previously Bylaw 64]*

6.1 The conditions and requirements for registration as a Non-Practising Registrant are:

6.1.1 the Applicant is a Full Registrant in the Registrant Class for which registration as a Non-Practising Registrant is sought; and

6.1.2 the Applicant delivers to the Registrar:

6.1.2.1 a completed application for non-practising registration;

6.1.2.2 a declaration in a form acceptable to the Registration Committee that, while registered under this heading, the Registrant will not provide the services of the profession in which the Registrant is applying to become a Non-Practising Registrant; and

6.1.2.3 the registration Fee specified in Schedule 1.

6.2 A Non-Practising Registrant may remain on the Register for a maximum of three (3) consecutive years provided the registration of the Non-Practising Registrant is renewed each year under heading 20.

6.3 The requirements for a Non-Practising Registrant to return to full registration in a Designated Health Profession are, despite the requirements under headings 2.0 and 3.0:

6.3.1 the Non-Practising Registrant is not in contravention of the Act, regulations or the Bylaws;

6.3.2 the Non-Practising Registrant provides evidence satisfactory to the Registration Committee that the Non-Practising Registrant is of good character and fit to engage in the practice of a profession consistent with the responsibilities of a Full Registrant and the standards expected of a Full Registrant; and

6.3.3 the Non-Practising Registrant delivers to the Registrar:

6.3.3.1 a completed application for full registration;

6.3.3.2 the registration Fee specified in Schedule 1;

6.3.3.3 proof in a form acceptable to the Registration Committee of the Applicant's entitlement to work in Canada;

6.3.3.4 a letter or certificate, in a form satisfactory to the Registration Committee and dated within 60 days prior to the date of application, from each body

responsible for the regulation of a health profession in a jurisdiction where the Non-Practising Registrant is, or has been, authorized to practise that health profession, specifying particulars of any cancellation, suspension, limitation or conditions on the Non-Practising Registrant's entitlement to practise, or any investigation, review or proceeding which could lead to cancellation, suspension, limitation or conditions on the Non-Practising Registrant's entitlement to practise;

6.3.3.5 proof of completion of the requirements under heading 2.0 of Schedule 24 *[Quality Assurance]*;

6.3.3.6 any other Fee-owed to the College; and

6.3.3.7 proof of professional liability protection or insurance coverage in the form and amount required under heading 22.0 and effective on or before the date of registration.

6.3.4 if, as a result of being registered under this heading, the Non-Practising Registrant did not report the practice of required hours for a three (3) year cycle under paragraphs 4.1.2 and 4.2.2 of Schedule 24 *[Quality Assurance]*, the Non-Practising Registrant must:

6.3.4.1 report the practice of the required hours for that cycle to the Quality Assurance Committee in accordance with the reporting procedures approved by the Committee; and

6.3.4.2 if the Non-Practising Registrant has not completed the required hours for that cycle, submit a deficiency plan under heading 5.0 of Schedule 24 *[Quality Assurance]*.

7.0 Payment of Registration and other Fees *[previously Bylaw 62]*

7.1 Where the Bylaws require that an Applicant for registration or a Registrant must pay a Fee, the Applicant or Registrant must pay that Fee to the College:

7.1.1 in the full amount specified in Schedule 1;

7.1.2 by the date specified; and

7.1.3 by credit card or debit card.

8.0 Examinations *[previously Bylaw 68]*

8.1 All Examinations required to be taken under the Bylaws and this Schedule must be approved by the Registration Committee.

- 8.2 All Examinations required to be taken under the Bylaws and this Schedule that are administered by the College must be prepared by or under the direction of the Registration Committee.
- 8.3 For an Examination required to be taken under the Bylaws and this Schedule that is administered by the College, the Registration Committee may:
- 8.3.1 determine the time and place for the holding of the Examination, designate examiners or invigilators and determine the procedures for the conduct of the Examination;
 - 8.3.2 review the results of the Examination or re-Examination for each Applicant for registration and make a determination as to that Applicant's qualification for registration; and
 - 8.3.3 notify the Applicant of the results of the Examination or re-Examination as soon as is practicable.
- 8.4 An Applicant for registration who is required under the Bylaws and this Schedule to take an Examination administered by the College must:
- 8.4.1 pay the Examination Fee specified in Schedule 1 at least two (2) weeks prior to the date of the Examination; and
 - 8.4.2 attend the Examination at a date, time, and place as set by the Registrar.

9.0 Improper Conduct During an Examination *[previously Bylaw 70]*

- 9.1 Where an examiner or invigilator for an Examination administered by the College has reason to believe that a Registrant or an Applicant for registration, or a Conditional Registrant, has engaged in improper conduct during the course of the Examination, the examiner or invigilator:
- 9.1.1 must make a report to the Registration Committee; and
 - 9.1.2 may recommend in that report that the Registration Committee take one or more of the following courses of action:
 - 9.1.2.1 fail the Registrant or Applicant or Conditional Registrant;
 - 9.1.2.2 pass the Registrant or Applicant or Conditional Registrant;
 - 9.1.2.3 require the Registrant or Applicant or Conditional Registrant to rewrite the Examination; and
 - 9.1.2.4 disqualify the Registrant or Applicant or Conditional Registrant from participating in any Examination for a defined period of time.

- 9.2 After considering a report made under subparagraph 9.1.1, the Registration Committee may take one or more of the courses of action specified in subparagraph 9.1.2.
- 9.3 When, under paragraph 9.2, the Registration Committee takes one or more of the courses of action specified in subparagraph 9.1.2.1, 9.1.2.3 and 9.1.2.4, it must notify the Conditional Registrant or Applicant in writing, providing reasons for the action taken.

10.0 Transferring Registrant (Labour Mobility Within Canada) [previously Bylaw 71]

- 10.1 Despite paragraphs 2.1 and 3.1 an Applicant who is authorized to practise a profession in another Canadian jurisdiction may be granted registration as a Full Registrant in the Designated Health Profession, provided the Applicant:
- 10.1.1 satisfies the Registration Committee that the Applicant is currently authorized to practise the profession in that other jurisdiction as the equivalent of a Full Registrant under the Bylaws and this Schedule; and
- 10.1.2 meets either:
- 10.1.2.1 the conditions and requirements established in subparagraphs 2.1.4 and 2.1.5 and 2.1.6.1 to 2.1.6.3, and 2.1.6.6 to 2.1.6.9, if the Applicant is applying to Register as a Registrant in the Registrant class of Hearing Instrument Practitioner: Full, or
- 10.1.2.2 the conditions and requirements established in subparagraphs 3.1.3 and 3.1.4, and 3.5.1 to 3.5.3, and 3.1.5.5 to 3.1.5.9, if the Applicant is applying to Register as a Registrant in the Registrant class of Audiologist: Full or Speech-Language Pathologist: Full.

11.0 Appearing Before the Committee [previously Bylaw 72]

- 11.1 The Registration Committee may require an Applicant to appear before the Registration Committee, either in person or by electronic means, in order to determine if that Applicant has satisfied the requirements of this Schedule and the Bylaws.

12.0 Conditions and Requirements for Renewal (Full, Conditional, and Non-Practising) [previously Bylaw 78]

- 12.1 To be eligible for renewal of registration, a Full Registrant, a Conditional Registrant in the first year of conditional registration, or a Non-Practising Registrant must meet the following conditions and requirements on or before March 31:
- 12.1.1 deliver to the Registrar a completed application for renewal;

- 12.1.2 pay the renewal Fee applicable to the Registrant's class of registration specified in Schedule 1;
- 12.1.3 pay any other outstanding Fee owed to the College; and
- 12.1.4 as applicable to the Registrant's class of registration, deliver to the Registrar proof of:
 - 12.1.4.1 completion of the requirements of the Quality Assurance Program in Schedule 24 [*Quality Assurance*]; and
 - 12.1.4.2 professional liability insurance coverage in the form and amount required under heading 14.0.
- 12.2 Despite paragraph 12.1, to be eligible for renewal of registration, a new Full Registrant or Conditional Registrant also must, on or before the March 31 immediately after first being granted registration as either a Full Registrant or Conditional Registrant, successfully complete the jurisprudence course and the client consent course specified by the Registration Committee.
- 12.3 The Registrar must provide written confirmation of renewal of registration to each Full Registrant, each Conditional Registrant in the first year of conditional registration, and each Non-Practising Registrant who, on or before March 31:
 - 12.3.1 meets all the conditions and requirements established in paragraph 12.1; and
 - 12.3.2 if applicable, successfully completes the jurisprudence course and the client consent course under paragraph 12.2.
- 12.4 The registration of a Full Registrant, a Conditional Registrant in the first year of conditional registration, or a Non-Practising Registrant is cancelled if the Registrant fails to do both of the following on or before March 31:
 - 12.4.1 meet all the conditions and requirements established in paragraph 12.1; and
 - 12.4.2 if applicable, successfully complete the jurisprudence course and the client consent course under paragraph 12.2.
- 12.5 No later than January 31, the Registrar must send an email to the last email address on file with the College for each Full Registrant, each Conditional Registrant in the first year of conditional registration and each Non-Practising Registrant, reminding those Registrants of the March 31 renewal deadline and describing the consequences of failing to meet the conditions and requirements under paragraph 12.1 by that deadline.

13.0 Reinstatement Following Failure to Renew *[previously Bylaw 80]*

13.1 Where the previous registration of a former Full Registrant, Conditional Registrant, or Non-Practising Registrant was cancelled under paragraph 12.5, the conditions and requirements for reinstatement of registration are, despite the requirements under headings 2.0, 3.0, 4.0 or 6.0:

- 13.1.1 the former Registrant was in Good Standing at the time the former Registrant's previous registration was cancelled;
- 13.1.2 the former Registrant is not in contravention of the Act, the Regulation or the Bylaws or this Schedule; and
- 13.1.3 the former Registrant delivers the following to the Registrar not later than April 30 in the year of the cancellation under paragraph 12.5:
 - 13.1.3.1 a completed application for reinstatement;
 - 13.1.3.2 the renewal Fee specified in Schedule 1 for the class of registration in which the former Registrant is seeking reinstatement;
 - 13.1.3.3 the reinstatement Fee specified in Schedule 1;
 - 13.1.3.4 any other Fee owed to the College; and
 - 13.1.3.5 as applicable to the former Registrant's class of registration, proof of
 - 13.1.3.5.1 completion of the requirements of the Quality Assurance Program in Schedule 24 *[Quality Assurance]*; and
 - 13.1.3.5.2 professional liability insurance coverage in the form and amount required under heading 14.0.

14.0 Professional Liability Insurance *[previously Bylaw 151]*

14.1 A Full Registrant, Conditional Registrant or Temporary Registrant must either:

- 14.1.1 obtain and at all times maintain insurance that:
 - 14.1.1.1 is in an amount of at least \$2,000,000 per claim and in a form satisfactory to the Registrar; and
 - 14.1.1.2 covers the Registrant, and any non-Registrant to whom the Registrant delegates an aspect of practice, against liability arising from an error, omission or negligent act that occurs in the practice of the Registrant's profession; or
- 14.1.2 confirm that the Registrant's employer has in place insurance as specified in subparagraph 14.1.1.

Table 1: Recognized Academic Programs

The academic programs of the following institutions are recognized academic programs for the purposes of this Schedule:

Hearing Instrument Practitioner (subparagraph 2.1.1)

Cégep de La Pocatière
Conestoga Community College
Douglas College
George Brown College
Grant MacEwan University
Humber College
Rosemont College

Audiologist (subparagraph 3.1.1.1)

Dalhousie University
University of British Columbia
Université de Montréal
University of Ottawa
Western University

Speech-Language Pathologist (subparagraph 3.1.1.1)

Dalhousie University
l'Université du Québec à Trois-Rivières
McGill University
McMaster University
Université Laval
Université Laurentienne
Université de Montréal
University of Alberta
University of British Columbia
University of Ottawa
University of Toronto
Western University

Table 2: Acceptable Academic Programs

1. For the purposes of subparagraph 3.1.1.2, an academic program must be provided by a degree-granting university and include:
 - a) 135 hours of course work in basic knowledge specific to the Applicant's profession, with at least:
 - i. one course in the area of anatomical, physiological and neurological basis of speech, language and hearing functioning;
 - ii. for an Applicant for registration as a Full Registrant in the profession of audiology, 2 courses in the area of the physical basis and perceptual processes of hearing; and
 - iii. for an Applicant for registration as a Full Registrant in the profession of speech-language pathology, 2 courses in the area of fundamental information pertaining to the use of speech and language processes;
 - b) 180 hours in basic knowledge specific to other health professions, with at least:
 - i. 2 courses in the area of basic principles and methods involved in conducting research in human behaviour;
 - ii. one course in the area of professional practices and issues or administrative organization of audiology or speech-language pathology programs; and
 - iii. one course in the area of psychological and social aspects of human development, which must provide information from related fields such as psychology or education pertinent to communication disorders, including at least one of:
 - A. theories of learning and behaviour that have application to communication disorders;
 - B. personality development or abnormal behaviour;
 - C. development and education of special populations, psychometric evaluation or school psychology; or
 - D. counselling and interviewing;
 - c) 405 hours in professional competency, which:
 - i. For an Applicant for registration as a Full Registrant in the profession of audiology, must include:
 - A. hearing measurement;
 - B. audiological assessment;
 - C. electrophysiological and other diagnostic measurements;

- D. basic and advanced concepts in amplification (systems, selection, fitting, verification and validation);
 - E. implantable hearing devices;
 - F. calibration and maintenance of instruments;
 - G. auditory and vestibular disorders involving both peripheral and central pathways of hearing;
 - H. assessment and management of tinnitus, including hyperacusis;
 - I. paediatric audiology;
 - J. habilitation and rehabilitation procedures applied to children, adults, the elderly and specific populations, such as developmental delay and occupational hearing loss; and
 - K. professional practice issues specific to audiology; and
- ii. for an Applicant for registration as a Full Registrant in the profession of speech-language pathology, must include:
- A. articulation or phonological disorders;
 - B. preschool or school-aged language development and literacy;
 - C. developmental language disorders;
 - D. acquired language disorders;
 - E. cognitive communication disorders;
 - F. voice disorders;
 - G. resonance disorders or structurally related disorders, such as cleft lip and palate;
 - H. fluency disorders;
 - I. neurologically based speech disorders;
 - J. augmentative and alternative communication;
 - K. dysphagia; and
 - L. professional practice issues specific to speech-language pathology;
- d) 45 hours in professional competency in relation to all communication disorders, which
- i. for an Applicant for registration as a Full Registrant in the profession of audiology, must include speech and language development, delays and disorders, such as screening or identification programs and procedures for speech, language and hearing problems throughout the lifespan; potential impact of hearing loss on speech and language acquisition; and

- ii. for an Applicant for registration as a Full Registrant in the profession of speech-language pathology, must include development of normal hearing; hearing disorders and related speech-language disorders, such as symptoms of hearing disorders, including associated speech, language and voice profiles; screening procedures and basic audiometric testing; application of audiometric information to the speech-language assessment; modification in speech and language procedures to accommodate varying degrees of hearing loss; approaches to habilitation and rehabilitation of speech and language of the hearing impaired; use, care and maintenance of hearing aids, assistive listening devices, and amplification systems;
- e) 350 hours of supervised clinical practicum components, which:
- i. for an Applicant for registration as a Full Registrant in the profession of audiology, must include a minimum of 300 hours of direct client contact or simulation, involving:
 - A. a minimum of at least 50 hours with children;
 - B. a minimum of at least 50 hours with adults;
 - C. a minimum of at least 100 hours of assessment;
 - D. a minimum of at least 50 hours of intervention;
 - E. one or more of the following clinical practicum components on the topics of hearing measurement; audiological assessment; electrophysiological and other diagnostic measurements; amplification (systems, selection, fitting, verification and validation); and implantable hearing devices; and
 - F. 20 hours of direct client contact or simulation, which must include exposure to speech-language pathology assessment, intervention and/or prevention activities;
 - ii. For an Applicant for registration as a Full Registrant in the profession of speech-language pathology, must include a minimum of 300 hours of direct client contact or simulation, involving:
 - A. a minimum of at least 50 hours with children;
 - B. a minimum of at least 50 hours with adults;
 - C. a minimum of at least 50 hours of assessment;
 - D. a minimum of at least 100 hours of intervention;
 - E. one or more of the following clinical practicum components on the topics of articulation or phonological disorders; preschool or school-aged language development and literacy; developmental language disorders; acquired language disorders; cognitive communication disorders; voice disorders; resonance disorders or structurally related disorders, such as cleft lip and palate; fluency

disorders; neurologically based speech disorders; augmentative and alternative communication; dysphagia; and prevention and identification activities; and

- F. 20 hours of direct client contact or simulation, which must include exposure to audiology assessment, intervention, and/or prevention activities.
2. No more than 50 hours of the 350 hours of supervised clinical practicum required under subparagraph (1)(e)(i) may be completed in simulation.
 3. No more than 50 hours of the 350 hours of supervised clinical practicum required under subparagraph (1)(e)(ii) may be completed in simulation.

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Table 3: Acceptable Academic Programs

For the purposes of subparagraph 2.1.1.2.3, an academic program must be provided by a degree or diploma granting post-secondary institution and must include in-class and in-lab learning as well as a clinical practicum component with at least 150 contact hours. Topics that must be covered in each of these components include:

1.0 Theoretical knowledge (in-class instruction)

- i. fundamental knowledge;
 - A. Anatomy and physiology of the ear;
 - B. physics of sound and acoustics;
 - C. speech perception and psychoacoustics;
 - D. hearing disorders;
- ii. assessment;
 - A. hearing assessment and interpretation;
- iii. treatment;
 - A. amplification device knowledge, hearing aid verification and validation
- iv. client management;
 - A. psycho-social impact of hearing loss;
 - B. counselling assessment and treatment information;
 - C. consent, privacy, and confidentiality;
 - D. aural rehabilitation;
 - E. tenets of client-centered care;
 - F. selling and offering to sell hearing instruments;

2.0 Related knowledge (in-class instruction)

- i. scope of practice and knowledge of related professions;
- ii. ethics and professionalism;
- iii. infection control;
- iv. hearing loss in the aging population;

3.0 Professional competencies (performed in a simulated lab)

- i. assessment: case history, questionnaires, otoscopy, audiometry (air conduction, bone conduction, speech, masking, LDL, MCL, UCL), tympanometry, interpretation, recommendations, referral;
- ii. report writing and documentation including consent;
- iii. counselling information to client and families;
- iv. treatment: hearing aid selection, earmold and earmold impressions, verification including Real Ear Measurement, hearing aid and accessories orientation; follow-up, validation of hearing aid benefit; communication strategies; referral;
- v. hearing Aid Troubleshooting;
- vi. calibration and equipment maintenance, (vii) hearing aid maintenance and troubleshooting;
- vii. infection control;
- viii. knowing when/how to refer out;
- ix. tinnitus management for uncomplicated tinnitus;

4.0 Clinical practicum (performed onsite under supervision)

- i. assessment: case history, questionnaires, otoscopy, pure tone and speech audiometry, tympanometry, interpretation, recommendations, when to refer;
- ii. intervention: hearing aid selection, earmolds, fitting, verification, validation, hearing aid troubleshooting;
- iii. client management: communication skills and strategies, hearing loss prevention, infection control, documentation, assisted listening devices, selling and offering to sell hearing instruments, when/how to refer out.

Schedule 9: Classes of Registration on Amalgamation

<u>Designated Health Profession</u>	<u>Former College</u>	<u>Former Class of Registration</u>	<u>Current Class of Registration</u>
Dietetics	College of Dietitians of British Columbia	Full	Dietetics: Full
		Emergency	Dietetics: Emergency
		Temporary	Dietetics: Temporary
		Non-Practicing	Dietetics: Non-Practicing
Occupational Therapy	College of Occupational Therapists of British Columbia	Full Registration	Occupational Therapy: Full
		Provisional Registration	Occupational Therapy: Provisional
		Temporary Registration	Occupational Therapy: Temporary
		Non-Practising Registration	Occupational Therapy: Non-Practising
Opticianry	College of Opticians of British Columbia	Registered Optician	Opticianry: Registered Optician
		Registered Contact Lens Fitter	Opticianry: Registered Contact Lens Fitter
		Temporary Registrant	Opticianry: Temporary
		Non-Practising Registrant	Opticianry: Non-Practising
Optometry		Therapeutic Qualified Registrant	Optometry: Therapeutic Qualified

	College of Optometrists of British Columbia	Non-Therapeutic Qualified Registrant	Optometry: Non-Therapeutic Qualified
		Limited Registrant	Optometry: Limited
		Academic Registrant	Optometry: Academic
		Non-Practising Registrant	Optometry: Non-Practising
Physical Therapy	College of Physical Therapists of British Columbia	Full Registration	Physical Therapy: Full
		Student Registration	Physical Therapy: Student
		Temporary Registration	Physical Therapy: Temporary
Psychology	College of Psychologists of British Columbia	Registered Psychologist Registration	Psychology: Registered Psychologist
		Associate Psychologist (Corrections) Registration	Psychology: Associate Psychologist (corrections)
		School Psychologist Registration	Psychology: School Psychologist
		Psychology Assistant Registration	Psychology: Psychology Assistant
		Temporary (Supervised) Registration	Psychology: Temporary (supervised)
		Temporary (Visitor) Registration	Psychology: Temporary (visitor)
		Temporary (Emergency) Registration	Psychology: Temporary (emergency)

		Non-Practising Registration	Psychology: Non-Practising
Audiology	College of Speech and Hearing Health Professionals of British Columbia	Full Registrant (Audiology)	Audiology: Full
		Conditional Registrant (Audiology)	Audiology: Conditional
		Temporary Registrant (Audiology)	Audiology: Temporary
		Non-Practising Registrant (Audiology)	Audiology: Non-Practising
Hearing Instrument Dispensing	College of Speech and Hearing Health Professionals of British Columbia	Full Registrant (Hearing Instrument Dispensing)	Hearing Instrument Dispensing: Full
		Conditional Registrant (Hearing Instrument Dispensing)	Hearing Instrument Dispensing: Conditional
		Temporary Registrant (Hearing Instrument Dispensing)	Hearing Instrument Dispensing: Temporary
		Non-Practising Registrant (Hearing Instrument Dispensing)	Hearing Instrument Dispensing: Non-Practising
Speech-Language Pathology	College of Speech and Hearing Health Professionals of British Columbia	Full Registrant (Speech-Language Pathology)	Speech-Language Pathology: Full
		Conditional Registrant (Speech-Language Pathology)	Speech-Language Pathology: Conditional
		Temporary Registrant (Speech-Language Pathology)	Speech-Language Pathology: Temporary
		Non-Practising Registrant (Speech-Language Pathology)	Speech-Language Pathology: Non-Practising

Schedule 10: Certified Practice: Opticianry, Audiology, Hearing Instrument Dispensing and Speech-Language Pathology

Part 1: Opticianry

1.0 Certification of Practising Opticians for Independent Automated Refraction *[previously Bylaw 43]*

- 1.1 A Registrant in the Registrant classes of Opticianry: Registered Optician and Registered Contact Lens Fitter may apply to the Registrar under this heading for certification that the Registrant is qualified and competent to perform a restricted activity under section 6(6) of the *Opticians Regulation*, BC Reg. 118/2010.
- 1.2 The Registrar must grant certification under this heading if the Registrant has:
 - 1.2.1 provided evidence satisfactory to the Registrar that the Registrant has:
 - 1.2.1.1 successfully completed within three years prior to application an education program on automated refraction, recognized by the Board for the purposes of section 6(6) of the *Opticians Regulation* and specified in Table 1 of Schedule 4; and
 - 1.2.1.2 a certification Examination recognized by the Board; and
 - 1.2.2 paid the Fee specified in Schedule 1.
- 1.3 If certification is granted under this heading, the Registrar must enter a notation of certification for independent automated refraction in the Register in respect of the Registrant.
- 1.4 The Registrar must remove a Registrant's notation of certification for independent automated refraction from the Register if the Registrant fails to meet any of the requirements in Schedule 20 *[Quality Assurance]*, and the Registrant must not again perform a restricted activity under section 6(6) of the *Opticians Regulation* until:
 - 1.4.1 the requirements in Schedule 20 *[Quality Assurance]* are met to the satisfaction of the Registrar; and
 - 1.4.2 the Registrar has re-entered a notation of certification for independent automated refraction in respect of the Registrant.
- 1.5 Despite paragraph 1.1, the Registration Committee has discretion to consider whether the Registrant's knowledge, skills and abilities are substantially equivalent to the standards of academic or technical achievement and the competencies or other qualifications established in

subparagraph 1.2.1.1 and to grant certification on that basis if the Registrant also meets the requirements established in paragraph 1.2.

- 1.6 For the purposes of the written notice to client requirements in section 1 of the Schedule to the *Opticians Regulation*, the Registrar must prescribe and Publish a form.

Part 2: Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology

2.0 Certified Practice [previously Bylaw 88 and 89]

In this Part:

“Full Registrant” means a Registrant in any of the Registrant classes of Audiology: Full, Hearing Instrument Dispensing: Full, and Speech-Language Pathology: Full.

- 2.1 A Registrant in the Registrant class of Audiology: Full may apply for:
- 2.1.1 a certified practice certificate authorizing them, under section 6(1) of the *Speech and Hearing Health Professionals Regulation*, BC Reg. 413/2008, to provide cerumen management that includes the performance of a restricted activity set out in section 5(1)(b) to (d) of the *Speech and Hearing Health Professionals Regulation*; or
 - 2.1.2 a certified practice certificate authorizing them, under section 6(2) of the *Speech and Hearing Health Professionals Regulation*, to provide assessment and management of vestibular system dysfunction that includes the performance of the restricted activity set out in section 5(1)(d) of the *Speech and Hearing Health Professionals Regulation*.
- 2.2 A Registrant in the Registrant class of Hearing Instrument Dispensing: Full may apply for:
- 2.2.1 a certified practice certificate authorizing them, under section 6(1) of the *Speech and Hearing Health Professionals Regulation*, to provide cerumen management that includes the performance of a restricted activity set out in section 5(2)(a) to (c) of the *Speech and Hearing Health Professionals Regulation*; or
 - 2.2.2 a certified practice certificate authorizing them, under section 6(3) of the *Speech and Hearing Health Professionals Regulation*, to provide to a client under 16 years of age hearing instrument services that include the performance of a restricted activity set out in section 5(2)(e) or (f) of the *Speech and Hearing Health Professionals Regulation*.
- 2.3 A certified practice certificate under subparagraph 2.2.2 must not authorize a Registrant who is not a Registrant in the Registrant class Audiology: Full to provide hearing instrument services that include the performance of a restricted activity set out in section 5(2)(e) or (f) of the *Speech and Hearing Health Professionals Regulation* to a client:

- 2.3.1 who is under 12 years of age; or
 - 2.3.2 whom a qualified professional has assessed as having a developmental age of less than 12 years in relation to the cognitive and motor skills needed:
 - 2.3.2.1 for testing prior to providing hearing instrument services that include the performance of a restricted activity set out in section 5(2)(e) or (f) of the *Speech and Hearing Health Professionals Regulation*; or
 - 2.3.2.2 to use a hearing instrument independently.
 - 2.4 A Registrant in the Registrant class of Speech-Language Pathologist: Full may apply for a certified practice certificate authorizing them, under section 6(4) of the *Speech and Hearing Health Professionals Regulation*, to provide a service that involves the performance of a restricted activity set out in section 5(3)(c) to (e) or (g) of the *Speech and Hearing Health Professionals Regulation*, including:
 - 2.4.1 a certificate authorizing the Registrant to perform fiberoptic endoscopy;
 - 2.4.2 a certificate authorizing the Registrant to perform voice restoration;
 - 2.4.3 a certificate authorizing the Registrant to perform tracheostomy management; or
 - 2.4.4 a certificate authorizing the Registrant to perform airway secretion management.
 - 2.5 A Registrant in the Registrant class of Audiologist: Full may apply for a certified practice certificate authorizing the Registrant to perform cochlear implant management.
 - 2.6 A Registrant in the Registrant class of Speech-Language Pathologist: Full may apply for one or both of the following:
 - 2.6.1 a certified practice certificate authorizing the Registrant to perform video-fluoroscopic management; and
 - 2.6.2 a certified practice certificate authorizing them to perform tracheostomy management.
- 3.0 Certification Programs** [previously Bylaw 90]
- 3.1 For each certified practice certificate established under heading 2.0, the Board must approve a certification program, including:
 - 3.1.1 the academic prerequisites a Full Registrant must hold before commencing the education and training requirements approved by the Board under subparagraph 3.1.3;
 - 3.1.2 the period of clinical practice a Full Registrant must complete in the profession before applying for the certificate;
 - 3.1.3 the education and training requirements a Full Registrant must complete before applying for the certificate;

- 3.1.4 the health professionals who are qualified to supervise a Full Registrant in completing the education and training requirements approved by the Board under subparagraph 3.1.3; and
 - 3.1.5 what supervision is necessary for a Full Registrant who is completing the education and training requirements approved by the Board under subparagraph 3.1.3.
- 3.2 The education and training requirements approved by the Board under subparagraph 3.1.3 must include education and training on infection control and emergency safety procedures applicable to the services authorized by the certified practice certificate.

4.0 Applications for Certified Practice Certificates *[previously Bylaw 91]*

- 4.1 To apply for one of the certified practice certificates established under heading 2.0, a Full Registrant must:
- 4.1.1 deliver to the Registrar:
 - 4.1.1.1 a completed application for a certified practice certificate; and
 - 4.1.1.2 evidence satisfactory to the Registration Committee that, subject to paragraphs 4.2 to 4.5, the Full Registrant has successfully completed the certification program approved by the Board for that certificate under paragraph 3.1; and
 - 4.1.2 pay the certified practice certificate application Fee specified in Schedule 1.
- 4.2 For academic prerequisites required under subparagraph 3.1.1 to be considered by the Registration Committee under subparagraph 5.1.1.2, the Full Registrant must have completed those prerequisites less than seven (7) years before delivering the application under subparagraph 4.1.1.1.
- 4.3 Despite paragraph 4.2, if the Full Registrant completed academic prerequisites required under subparagraph 3.1.1 at least seven (7) years before delivering the application under subparagraph 4.1.1.1, the Full Registrant may still be granted the certified practice certificate provided the Registrant:
- 4.3.1 otherwise meets the conditions and requirements established in paragraph 4.1; and
 - 4.3.2 successfully completes such additional education and training as the Registration Committee requires.
- 4.4 For education and training requirements under subparagraph 3.1.3 to be considered by the Registration Committee under subparagraph 4.1.1.2, the Full Registrant complete all those requirements:

- 4.4.1 within a period of three (3) years; and
 - 4.4.2 with the supervision required under subparagraph 3.1.4 and 3.1.5.
- 4.5 Despite subparagraph 4.4.1, the Registration Committee has the discretion to allow a Full Registrant additional time for the completion of education and training requirements.

5.0 Issuing of Certified Practice Certificates *[Previously Bylaw 92]*

- 5.1 On the direction of the Registration Committee, the Registrar must issue a certified practice certificate to a Full Registrant who, in the Registration Committee's determination, meets the conditions and requirements for that certificate under heading 4.0.
- 5.2 A certified practice certificate issued under paragraph 5.1 must:
- 5.2.1 be in a form approved by the Registration Committee; and
 - 5.2.2 state:
 - 5.2.2.1 the specific certificate issued;
 - 5.2.2.2 the name of the Full Registrant to whom the certificate has been issued;
 - 5.2.2.3 the date the certificate was issued; and
 - 5.2.2.4 subject to paragraph 5.5, the expiry date for the certificate.
- 5.3 A Full Registrant may perform a service authorized by a certified practice certificate established under headings 2.0 only if the Registrar has issued that certificate to the Registrant under paragraph 5.1 and the certificate has not been suspended or cancelled.
- 5.4 A certified practice certificate issued by the Registrar under paragraph 5.1 expires on the date specified by the Registration Committee, which cannot be later than March 31 in the third year following the year the certificate was issued.

6.0 Certified Practice Certificates – Renewal *[Previously Bylaw 94]*

- 6.1 To renew a certified practice certificate, a Full Registrant must, before the expiry date for that certificate:
- 6.1.1 deliver to the Registrar:
 - 6.1.1.1 a completed application for renewal of a certified practice certificate, including a declaration that the Registrant continues to provide the services authorized by the certificate; and

- 6.1.1.2 evidence satisfactory to the Registration Committee that the Registrant has completed the certified practice certificate continuing competency requirements specified under heading 8.0; and
- 6.1.2 subject to paragraph 6.2, pay the certified practice certificate renewal Fee specified in Schedule 1.
- 6.2 The Registrar must issue to a Full Registrant who satisfies the conditions and requirements specified in paragraph 6.1 a receipt stating that the Registrant's certified practice certificate has been renewed.
- 6.3 The requirements of subparagraph 5.2.2 and paragraph 5.5 apply to a receipt issued by the Registrar under paragraphs 6.2 and 6.6 as if the receipt was a certified practice certificate, and the expiry date stated on the receipt under subparagraph 5.2.2.4 is the new expiry date of the certified practice certificate for which the receipt was issued.
- 6.4 If a Full Registrant fails to satisfy the requirements established in paragraph 6.1 on or before the expiry date for the certified practice certificate, the certificate is cancelled.
- 6.5 Where a Full Registrant's certified practice certificate is cancelled under paragraph 6.4, the Registrant may reinstate the certificate within 30 days of the date of the cancellation by:
 - 6.5.1 satisfying the requirements established in paragraph 6.1; and
 - 6.5.2 paying the certified practice certificate reinstatement Fee specified in Schedule 1.
- 6.6 The Registrar must issue to a Full Registrant who satisfies the conditions and requirements specified in paragraph 6.5 a receipt stating that the Registrant's certified practice certificate has been reinstated.

7.0 Certified Practice Certificates – Applications *[Previously Bylaw 95]*

- 7.1 Every person applying for a certified practice certificate under heading 4.0 or renewal of a certified practice certificate under heading 6.0, must deliver to the Registrar an application, including any information or items required under the Bylaws, Schedule 8 *[Registration Schedule for CSHBC]*, or this Schedule to be included in or with the application, in the manner specified by the Registrar.
- 7.2 The Registrar must specify the manner of delivery for an application under paragraph 7.1 and may modify the manner of delivery from time to time as the Registrar considers necessary or advisable.
- 7.3 The Registrar must maintain and publish on the College website a notice setting out:

- 7.3.1 the manner of delivery for an application specified by the Registrar under paragraph 7.2;
- 7.3.2 the information or items required under the Bylaws or Schedule 8 to be included in or with an application for a certified practice certificate under heading 4.0 or an application for renewal of a certified practice certificate under heading 6.0; and
- 7.3.3 the Fees payable under the Bylaws or Schedule 1 in conjunction with an application for a certified practice certificate under heading 4.0 or an application for renewal of a certified practice certificate under heading 6.0.

8.0 Certified Practice Certificates – Continuing Competency Credits *[Previously Bylaw 96]*

- 8.1 Following the issuing of a certified practice certificate under paragraph 5.1 or a receipt renewing a certified practice certificate under paragraph 6.3, the Full Registrant who has been issued that certificate or receipt must:
 - 8.1.1 complete at least four (4) hours of continuing competency credits approved by the Quality Assurance Committee as relevant to the services authorized by the certificate;
 - 8.1.2 complete the practice hours required by the Quality Assurance Committee as relevant to the services authorized by the certificate; and
 - 8.1.3 report the continuing competency credits completed under subparagraph 8.1.1 and practice hours completed under subparagraph 8.1.2 to the Quality Assurance Committee in accordance with the reporting deadline and procedures approved by the Committee.
- 8.2 If a Full Registrant reports continuing competency credits to the Quality Assurance Committee to satisfy the requirements of paragraph 8.1 for one certified practice certificate, the Full Registrant cannot report any of those same credits to the Committee to satisfy the requirements of paragraph 8.1 for another certified practice certificate.
- 8.3 A Full Registrant must retain documents or other information that support the completion of continuing competency credits reported to the Quality Assurance Committee under paragraph 8.1.
- 8.4 The Quality Assurance Committee may, without notice to a Registrant, audit the Registrant to ensure the accuracy and truthfulness of the continuing competency credits that the Registrant has reported under paragraph 8.1.
- 8.5 If the Quality Assurance Committee finds a Registrant inaccurately or falsely reported continuing competency credits under paragraph 8.1, the Committee may do one or both of the following:

- 8.5.1 seek to resolve with the Registrant a resulting deficiency in credits;
- 8.5.2 report that finding to the Inquiry Committee under section 26.2 of the Act.

9.0 Certified Practice Certificates – Standards of Practice *[previously Bylaw 97]*

- 9.1 A Full Registrant who has been issued a certified practice certificate under paragraph 5.1 or a receipt renewing a certified practice certificate under paragraph 6.3 must, when providing services authorized by that certificate, comply with the Standards of Practice approved by the Board for the provision of those services.

10.0 Proof of Certified Practice Certificates *[previously Bylaw 98]*

- 10.1 Subject to paragraph 12.1, the Registrar must publish on the College website a list of every Full Registrant who has been issued a certified practice certificate under paragraph 5.1 or a receipt renewing a certified practice certificate under paragraph 6.3.

11.0 Use of “Certified” *[previously Bylaw 99]*

- 11.1 Subject to paragraph 11.2, a Registrant must not use the term “certified” in connection with the Registrant’s practice of a profession.
- 11.2 If the Registrar has issued a certified practice certificate to a Full Registrant under paragraph 6.2 and the certificate is not suspended or cancelled, the Registrant may hold out themselves as “certified” to provide the services authorized by the certified practice certificate.

12.0 Suspension or Cancellation of Certified Practice Certificates *[previously Bylaw 100]*

- 12.1 If a Full Registrant’s certified practice certificate is suspended or cancelled, the Registrar must:
 - 12.1.1 immediately notify the Registrant of the suspension or cancellation of the certificate; and
 - 12.1.2 remove the Registrant’s name from the list Published on the College website under heading 10.0.
- 12.2 On receiving notice from the Registrar under paragraph 12.1, a Full Registrant must immediately cease:
 - 12.2.1 providing the services authorized by the suspended or cancelled certified practice certificate; and
 - 12.2.2 holding him or herself out as “certified” to provide the services authorized by the suspended or cancelled certificate.

12.3 Where a suspension of a Full Registrant's certified practice certificate is ended or the certificate is reinstated under paragraph 6.6, the Registrar must:

12.3.1 advise the Registrant that the Registrant may again:

12.3.1.1 provide the services authorized by the certificate; and

12.3.1.2 hold him or herself out as certified to provide those services; and

12.3.2 return the Registrant's name to the list published on the College website under heading 10.0.

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Schedule 11: Dietetics: Professional Responsibilities

1.0 Definitions [previously Bylaw 1]

1.1 In this Schedule:

“Advertisement” means the use of space or time in a public medium, or the use of a commercial publication such as a brochure or handbill, to communicate with the general public, or a segment thereof, for the purpose of promoting professional services or enhancing the image of the advertiser;

“Marketing” includes:

- (a) an Advertisement;
- (b) any publication or communication in any medium with any patient, prospective patient or the public generally in the nature of an advertisement, promotional activity or material, a listing in a directory, a public appearance or any other means by which professional services are promoted; and
- (c) contact with a prospective patient initiated by or under the discretion of a Registrant;

“Record” means a “record” as defined in Schedule 1 of the *Freedom of Information and Protection of Privacy Act*, RSBC 1996, c. 165;

“Regulation” means the *Dietitians Regulation*, BC Reg. 279/2008;

“Supervision”, means a situation in which a person’s practice is overseen by a Registrant in the Registrant class of Dietetics: Full; where a heading in this Schedule refers to supervision, the scope, nature and form of that supervision is to be applied in accordance with the policy, standard or guideline approved for the practice of dietetics.

2.0 Standards of Practice and Standards of Professional Ethics

Practice Limits and Conditions for Dietetics: Temporary Registrants [previously Bylaws 45(5) and (7)]

2.1 A Registrant in the Registrant class of Dietetics: Temporary who fails the registration Examination may practice only under direct Supervision by a Registrant in the Registrant class of Dietetics: Full, as specified by the Registration Committee.

2.2 A Registrant in the Registrant class of Dietetics: Temporary may not:

2.2.1 supervise a Registrant in the Registrant class of Dietetics: Full; or

2.2.2 practice as a sole practitioner.

Practice Limits and Conditions for Dietetics: Non-Practising Registrants [previously Bylaw 46(2)]

2.3 A Registrant in the Registrant class of Dietetics: Non-Practicing must not practice dietetics.

Restricted activities under section 5 of the Dietitians Regulation [previously bylaw 47]

2.4 A Registrant may only perform a restricted activity set out in section 5 of the *Dietitians Regulation* if the Registrant has completed:

- 2.4.1 an initial application to practice restricted activities for new and former Registrants, including a declaration of meeting the qualifications in the College's Standards of Practice and restricted activity competencies listed in the application;
- 2.4.2 an annual declaration of each restricted activity that a Registrant in the Registrant class of Dietetics: Full and Dietetics: Temporary is practicing; and
- 2.4.3 payment of the Fees specified in Schedule 1.

3.0 Advertising and Marketing [previously Bylaw 77]

3.1 Any Marketing undertaken or authorized by a Registrant in respect of their professional services must not be:

- 3.1.1 false;
- 3.1.2 inaccurate;
- 3.1.3 misleading;
- 3.1.4 unverifiable;
- 3.1.5 misrepresentative of the effectiveness of any technique, procedure instrument or device;
- 3.1.6 undignified, offensive or in bad taste; or
- 3.1.7 contrary to the Standards of Professional Ethics for the practice of dietetics.

3.2 Without limiting the generality of paragraph 3.1, Marketing must not:

- 3.2.1 be calculated or likely to take advantage of a weakened physical, mental or emotional state of the recipient or intended recipient;
- 3.2.2 be likely to create in the mind of the recipient or intended recipient an unjustified expectation about the results which the Registrant can achieve;
- 3.2.3 imply that the Registrant can obtain results not achievable by other Registrants;
- 3.2.4 imply that the Registrant can obtain results by improper means; or

- 3.2.5 compare the quality of services provided by the Registrant with those provided by another Registrant, a person authorized to provide dietetic services under another enactment, or another health professional.
- 3.3 A Registrant must not:
 - 3.3.1 use the College’s name, logo or other identifying marks in any Marketing, materials or activities;
 - 3.3.2 state publicly that they speak on behalf of the College unless the Registrant has been expressly authorized by the Board to do so; or
 - 3.3.3 endorse or lend themselves as a Registrant to the Advertisement of any property, investment or service for sale to the public unless such property, investment or service relates directly to dietetics.
- 3.4 A Registrant who, in any Advertisement, includes a statement of fees for specific services:
 - 3.4.1 must ensure that the statement sufficiently describes the fees and services so as to enable the recipient or intended recipient to understand the nature and extent of the services to be provided and the cost to the patient; and
 - 3.4.2 must not in the Advertisement compare the fees charged by the Registrant with those charged by another health professional.
- 3.5 Unless otherwise authorized by the Act, the Regulation, the Bylaws, this Schedule, or the Board, in an Advertisement or in any other Marketing:
 - 3.5.1 a Registrant who has earned an academic degree, diploma or certificate may refer to that degree, diploma or certificate and may use a title indicating the attainment of that diploma degree or certificate;
 - 3.5.2 a Registrant whose practice of dietetics is limited to a certain branch or area, may state the branch or area of dietetics to which the Registrant’s practice is limited;
 - 3.5.3 a Registrant:
 - 3.5.3.1 may use terms like “expert”, “specialist”, or “specialized” when referring to dietetics or human nutrition generally; but
 - 3.5.3.2 must not use those terms;
 - 3.5.3.2.1 in conjunction with a title that the Registrant is authorized to use under section 3 of the Regulation or in the Bylaws; or
 - 3.5.3.2.2 to assert or imply that the Registrant is an expert, specialist or specialized in an aspect of dietetic practice or a particular disease, disorder or condition that can be treated with dietetics; and

- 3.5.3.3 must not use a term that refers to a medical specialization in conjunction with a title that the Registrant is authorized to use under section 3 of the Regulation or in the Bylaws.
- 3.6 A Registrant must retain for one year after the date of publication or broadcast of any Advertisement or brochure, and must provide to the Registrar, the Inquiry Committee, or the Discipline Committee or the Board upon request:
 - 3.6.1 a copy of any such publication;
 - 3.6.2 a recording of any such broadcast made by any electronic media or information communication technology; and
 - 3.6.3 a written record of when and where the publication or broadcast was made.
- 3.7 It is the duty of a Registrant to verify the statements made in their Marketing when requested to do so by the Registrar, the Inquiry Committee, the Discipline Committee or the Board.
- 3.8 If an Advertisement made by anyone includes the name, address, telephone number place of practice or other identifier of a Registrant, the Registrant is presumed to have authorized that Advertisement unless it is proved otherwise.

4.0 Record-Keeping

Registrant Record-Keeping [previously Bylaw 73]

- 4.1 A Registrant must keep Records for each clinical client that includes:
 - 4.1.1 dietetic assessment, which may include, as appropriate:
 - 4.1.1.1 food/dietetic history;
 - 4.1.1.2 anthropometric measurements;
 - 4.1.1.3 relevant biochemical/medical tests/ procedures;
 - 4.1.1.4 dietetic-focused physical findings; and
 - 4.1.1.5 client personal health and family health history;
 - 4.1.2 dietetic problem identification;
 - 4.1.3 dietetic care plan;
 - 4.1.4 dietetic intervention(s);
 - 4.1.5 monitoring and evaluation of dietetic outcomes;

- 4.1.6 documentation with respect to each client or, if appropriate, the client's representative, showing the client's name and address, the date(s) of services rendered, nature of those services, and consent to those services;
 - 4.1.7 when applicable, documentation with respect to each client or, if appropriate, the client's representative showing charges and payments made, and balance outstanding; and
 - 4.1.8 documentation showing for each day the names of clients to whom professional services were rendered in accordance with employer/facility requirements.
- 4.2 A Registrant must keep Records for community clients requiring dietetic services that include assessment information, identification of problem/issue, an action plan, implementation process, and monitoring/evaluation plan.
- 4.3 All Records referred to in paragraphs 4.1 and 4.2 must be kept in a suitable systematic permanent form, such as paper or electronic record-keeping or accounting systems, provided that the information can be reproduced promptly in written form when required, and if the material by itself or in conjunction with other Records, constitutes orderly and legible permanent Records.

Privacy Requirements [previously Bylaw 74]

- 4.4 A Dietetics Registrant must:
- 4.4.1 ensure that Personal Information collected under paragraphs 4.1- 4.3 is current, legible, accurate and completely recorded;
 - 4.4.2 at all times protect and maintain the confidential information of Personal Information collected under paragraphs 4.1- 4.3;
 - 4.4.3 upon request, provide access to Personal Information in accordance with the relevant legal requirements; and
 - 4.4.4 ensure that all Records from their practice containing Personal Information are safely and securely stored, or disposed of, by making reasonable security arrangements against such risks as unauthorized access, collection, use, disclosure or disposal.

Availability of Registrant Records to the College [previously Bylaw 75]

- 4.5 A Registrant must make any written, electronically or mechanically recorded documentation relevant to Records under paragraphs 4.1- 4.3, available at reasonable hours for inspection by representatives of the College, including the Registrar, members of the Inquiry, Discipline and Quality Assurance Committees, assessors and inspectors appointed under any provision of the Bylaws or the Act.

Notification of Change of Personal Information [previously Bylaw 56]

- 4.6 A Registrant must immediately notify the Registrar of any change of address, name or any other registration information previously provided to the Registrar.

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Schedule 12: Occupational Therapy: Professional Responsibilities

1.0 Definitions

1.1 In this Schedule:

“Advertisement” means a notice or announcement used for Advertising;

“Advertising” means the use of space or time in a medium, or the use of a commercial publication such as a brochure or handbill, to communicate with the general public or a segment thereof, for the purpose of promoting professional services or enhancing the image of the advertiser;

“General Supervision” means that the Registrant under supervision is subject to the review of a Registrant in the Registrant class of Occupational Therapy: Full, but it is not necessary for the Registrant in the Registrant class of Occupational Therapy: Full to be present at the same location at the same time that the supervised Registrant performs a clinical aspect of practice;

“Marketing” includes:

- (a) Advertising and Advertisements;
- (b) a publication or communication in any medium with any Patient, prospective Patient or the public generally, in the nature of an Advertisement, promotional activity or material, a listing in a directory, a public appearance or any other means by which professional services are promoted; and
- (c) any contact with a prospective Patient initiated by or under the direction of a Registrant;

“Patient” means individuals, families and/or groups, agencies or organizations receiving care and/or services from a Registrant and includes a client or consumer;

“Record” means a "record" as defined in Schedule 1 of the *Freedom of Information and Protection of Privacy Act*, RSBC 1996, c. 165;

“Regulation” means the *Occupational Therapists Regulation*, BC Reg. 286/08;

“Support Personnel” means an occupational therapy aide, rehabilitation assistant, activity aide, home support worker, volunteer or other support personnel who works under the direction of a Registrant in the Registrant class of Occupational Therapy: Full.

2.0 Standards of Practice and Standards of Professional Ethics

- 2.1 Registrants must comply with all Standards of Practice and Standards of Professional Ethics and the code of ethics for the practice of occupational therapy Published on the College website.

Practice Limits and Conditions for Occupational Therapy: Full Registrants [Previously Bylaw 42(5)]

- 2.2 A Registrant in the Registrant class of Occupational Therapy: Full subject to terms, limits, and conditions must only perform the services of an occupational therapist under the direct or General Supervision of a Registrant in the Registrant class of Occupational Therapy: Full upon the terms, limits and conditions imposed by the Registration Committee; and must not supervise students or other Registrants of the College.

Practice Limits and Conditions for Occupational Therapy: Provisional Registrants [previously Bylaws 43(2) and 43(5)]

- 2.3 A Registrant in the Registrant class of Occupational Therapy: Provisional:
- 2.3.1 must only perform the services of an occupational therapist if the services are performed under the General Supervision of a Registrant in the Registrant class of Occupational Therapy: Full and upon such terms and conditions as are set by the Registration Committee; and
 - 2.3.2 must not supervise other Registrants of the College.
- 2.4 A Registrant in the Registrant class of Occupational Therapy: Provisional must advise Patients and employers in advance of providing occupational therapy services of any limitations on their practice.

Practice Limits and Conditions for Occupational Therapy: Non-Practising Registrants [previously Bylaw 45(2) and 45(3)]

- 2.5 A Registrant in the Registrant class of Occupational Therapy: Non-Practising must not practice occupational therapy or supervise or delegate occupational therapy services in British Columbia.
- 2.6 A Registrant in the Registrant class of Occupational Therapy: Non-Practising must not hold themselves out as an occupational therapist entitled to practise occupational therapy in British Columbia.

3.0 Advertising and Marketing *[previously Bylaw 89]*

- 3.1 Any Marketing undertaken or authorized by a Registrant in respect of their professional services must not be:
 - 3.1.1 false;
 - 3.1.2 inaccurate;
 - 3.1.3 reasonably expected to mislead the public;
 - 3.1.4 unverifiable; or
 - 3.1.5 contrary to the public interest in the practice of the profession of occupational therapy.
- 3.2 Marketing violates paragraph 3.1 if it:
 - 3.2.1 is calculated or likely to take advantage of the weakened state, either physical, mental or emotional, of the recipient or intended recipient;
 - 3.2.2 is likely to create in the mind of the recipient or intended recipient an unjustified expectation about the results which the Registrant can achieve;
 - 3.2.3 implies that the Registrant can obtain results not achievable by other Registrants;
 - 3.2.4 implies that the Registrant can obtain results by improper means; or
 - 3.2.5 compares the quality of services provided with those provided by:
 - 3.2.5.1 another Registrant;
 - 3.2.5.2 a person authorized to provide health care services under another enactment;
or
 - 3.2.5.3 another health profession.
- 3.3 A Registrant must not:
 - 3.3.1 state publicly that they speak on behalf of the College unless they have been expressly authorized by the Board to state the official position of the College; or
 - 3.3.2 endorse or lend themselves as an occupational therapist to the Advertisement of any product, investment or service for sale to the public, unless such product, investment or service relates directly to the profession of occupational therapy.
- 3.4 A Registrant who, in any Advertisement, includes a statement of fees for a specific service:
 - 3.4.1 must ensure that the statement sufficiently describes the fees and services so as to enable the recipient or intended recipient to understand the nature and extent of the services to be provided and the cost to the Patient; and

- 3.4.2 must not in the Advertisement compare the fees charged by the Registrant with those charged by another Registrant.
- 3.5 Unless otherwise authorized by the Act, the Regulation, this Schedule, the Bylaws, or the Board, a Registrant:
- 3.5.1 must not use the title "specialist" or any similar designation suggesting a recognized special status or accreditation on any letterhead or business card or in any other Marketing; and
- 3.5.2 must take all reasonable steps to discourage the use, in relation to the Registrant by another person, of the title "specialist" or any similar designation suggesting a recognized special status or accreditation in any Marketing.
- 3.6 A Registrant must retain the following Records for one (1) year after the date of publication or broadcast of any Advertisement and provide to the Registrar upon request:
- 3.6.1 a copy of any publication;
- 3.6.2 a record of any broadcast made by use of any electronic media; and
- 3.6.3 documentation of date and place where the publication or broadcast was made.
- 3.7 It is the duty of the Registrant, when called upon by the Inquiry Committee to do so, to verify the statements made in their Marketing.
- 3.8 Registrants who focus their practices to certain areas of the profession of occupational therapy may state in any Marketing the area to which their practice is focused.
- 3.9 The name used by a Registrant in an Advertisement must be the same as the name shown in the Register.

4.0 Record-Keeping and Updating Registrant Information *[previously Bylaws 72-86 and 55]*

Clinical Record Requirements

- 4.1 A Registrant must record and maintain accurate and comprehensive Patient Records for each Patient that adhere to the College's Standards of Practice for managing Patient information established for the practice of occupational therapy.
- 4.2 All Records referred to in paragraph 4.1 must be typed or written legibly in ink and kept in a systematic and permanent form for the period set out under paragraph 4.14.

- 4.3 A Registrant must make Records under paragraph 4.1 and any written, electronic, computerized or mechanically recorded documentation relevant to those Records available during business hours for inspection by the College.

Purpose for which Personal Information May be Collected

- 4.4 No Registrant may collect Personal Information regarding a Patient unless:
- 4.4.1 the information relates directly to and is necessary for providing health care services to the Patient or for related administrative purposes; or
 - 4.4.2 the collection of that information is expressly authorized by or under an enactment.

Source of Personal Information

- 4.5 Subject to paragraph 4.6, a Registrant must collect Personal Information about a Patient directly from the Patient.
- 4.6 A Registrant may collect Personal Information from another person if the Registrant has reasonable grounds to believe:
- 4.6.1 the Patient has authorized collection of the Personal Information from another person;
 - 4.6.2 the Patient is unable to give their authorization and the Registrant collects the information from the Patient's representative or the Patient's representative collects it from another person;
 - 4.6.3 that compliance with paragraph 4.5 would be contrary to the best interests of the Patient or prejudice the safety of any persons; or
 - 4.6.4 it is necessary where the information is about law enforcement within the meaning of section 15 of the *Freedom of Information and Protection of Privacy Act*.

Confidentiality of Personal Information

- 4.7 A Registrant must at all times protect and maintain the confidentiality of Personal Information.

Right to Request Correction of Personal Information

- 4.8 A person who believes there is an error or omission in a Record containing their Personal Information may request that the Registrant with the Record in their custody or control, correct the information.

- 4.9 If after receiving a request for correction under paragraph 4.8, the Registrant disagrees that there is an error or omission in the Record, the Registrant must note the request in the Record with particulars of the correction that was sought.

Use of Personal Information by a Registrant

- 4.10 A Registrant may use Personal Information only:
- 4.10.1 for the purpose of providing health care services to the Patient or for a related administrative purpose;
 - 4.10.2 for a use or disclosure consistent with a purpose specified in subparagraph 4.10.1;
 - 4.10.3 if the Patient has consented to the use; or
 - 4.10.4 for a purpose for which that information may be disclosed by the Registrant under paragraphs 4.11 to 4.12.

Disclosure of Personal Information by a Registrant

- 4.11 A Registrant must maintain confidentiality of Personal Information and may disclose relevant Personal Information only:
- 4.11.1 if the Patient to which the Personal Information relates has consented to the disclosure;
 - 4.11.2 for the purpose of providing health care services to the Patient or for a related administrative purpose or for disclosure consistent with either purpose;
 - 4.11.3 for the purpose of complying with an enactment of, or an arrangement or agreement made pursuant to an enactment of British Columbia or Canada;
 - 4.11.4 for the purpose of complying with a subpoena, warrant or order pronounced by a person or body with jurisdiction to compel the production of information;
 - 4.11.5 to an employee of, or contractor providing services to, the Registrant, if the information is necessary for the performance of the duties of, or for the protection of the health or safety of, the employee or contractor;
 - 4.11.6 to a lawyer acting for the Registrant, for use in civil or criminal proceedings involving the Registrant;
 - 4.11.7 where necessary to comply with the *Coroners Act*, SBC 2007, c. 15;
 - 4.11.8 where necessary to comply with the *Ombudsperson Act*, RSBC 1996, c. 340;
 - 4.11.9 for the purposes of:
 - 4.11.9.1 collecting a debt or fine owing by a Patient to the Registrant; or

- 4.11.9.2 making a payment owing by the Patient to a Registrant;
 - 4.11.10 to an auditor, the College or any other person or body authorized by law, for audit purposes;
 - 4.11.11 where the Registrant believes on reasonable grounds that there is a risk of significant harm to the health or safety of any person and that the use or disclosure of the information would reduce that risk;
 - 4.11.12 so that the next of kin or a friend of an injured, ill or deceased individual may be contacted;
 - 4.11.13 in accordance with the Act, the Regulations, the Bylaws, this Schedule, and relevant privacy legislation; or
 - 4.11.14 as otherwise required by law.
- 4.12 Disclosure of Personal Information pursuant to paragraph 4.11 must be made only to the extent reasonably required in the circumstances.

Definition of Consistent Purpose

- 4.13 A use or disclosure of Personal Information is consistent with the purposes of providing health care services to a Patient or related administrative purposes under paragraphs 4.10 to 4.12 if the use or disclosure has a reasonable and direct connection to either purpose.

Storage and retention of Personal Information

- 4.14 A Registrant must ensure that all Records pertaining to their practice of occupational therapy, and containing Personal Information are safely and securely stored.
- 4.15 Personal Information must be retained for a period of sixteen (16) years from the date of the last recorded entry or sixteen (16) years from the date the Patient reaches the age of majority, whichever is later.

Manner of Disposal of Records

- 4.16 A Registrant must ensure that Records are disposed of only by:
- 4.16.1 transferring the Record to another Registrant in Good Standing or with the consent of the Patient, to another health care agency or health care practitioner;
 - 4.16.2 effectively destroying a physical Record by utilizing a shredder or by complete burning;
 - 4.16.3 erasing information recorded or stored by electronic methods on tapes, disks or cassettes in a manner that ensures that the information cannot be reconstructed; or

4.16.4 transferring the Record to the Patient.

Registrant Ceasing to Practice

- 4.17 A Registrant who ceases to practice occupational therapy for any reason must dispose of Personal Information in accordance with this heading, notify the College, and provide the College with a written summary of the steps they have taken to dispose of the Personal Information.
- 4.18 A Registrant must make appropriate arrangements to ensure that, in the event that the Registrant dies or becomes unable to practice for any reason and is unable to dispose of the Personal Information, the Personal Information will be safely and securely transferred to another Registrant.
- 4.19 A Registrant who receives Personal Information transferred in accordance with paragraph 4.18 or subparagraph 4.16.1 must notify the Patients whose Personal Information has been transferred in writing of the transfer.

Protection of Personal Information

- 4.20 A Registrant must protect Personal Information by making reasonable security arrangements against such risks as unauthorized access, collection, use, disclosure or disposal.
- 4.21 A Registrant must take reasonable measures to ensure that a third party, including a volunteer, employee of or contractor of the Registrant or a health professions corporation or a student practitioner under the supervision of the Registrant, does not access, collect, use, disclose, store or dispose of Personal Information except in accordance with the requirements of this heading.

Contracts for Handling Personal Information

- 4.22 A Registrant must ensure that, where Personal Information is transferred to any person or service organization for processing, storage or disposal, a contract is made with that person which includes an undertaking by the recipient that confidentiality and physical security will be maintained.

Remedying a Breach of Security

- 4.23 A Registrant must take appropriate measures to remedy any unauthorized access, use, disclosure or disposal of Personal Information under this heading as soon as possible after the breach is discovered, including:

- 4.23.1 taking steps to recover the Personal Information or to ensure its disposal if it cannot be recovered;
- 4.23.2 taking steps to ensure that any remaining Personal Information is secured;
- 4.23.3 notifying:
 - 4.23.3.1 anyone affected by the unauthorized access including Patients and other health care providers;
 - 4.23.3.2 the College; and
 - 4.23.3.3 law enforcement officials, where criminal action may have contributed to the unauthorized action; and
- 4.23.4 modifying existing security arrangements to prevent a re-occurrence of the breach of security.

Patient Access to Personal Information

- 4.24 If a Patient or a Patient's representative makes a request for access to Personal Information about the Patient, the Registrant must comply as soon as practicable but not more than thirty (30) days following the request by:
 - 4.24.1 providing access to the Personal Information to the Patient or Patient's representative;
 - 4.24.2 providing access to the remainder of the Personal Information where that information excepted from disclosure under paragraph 4.25 can reasonably be severed; or
 - 4.24.3 providing written reasons for the refusal of access to the Personal Information or to any portion of the health Records.
- 4.25 The Registrant may refuse to disclose Personal Information to a Patient or Patient's representative:
 - 4.25.1 where there is a significant likelihood of a substantial adverse effect on the physical, mental or emotional health of the Patient;
 - 4.25.2 where there is a significant likelihood of harm to a third party; or
 - 4.25.3 if the disclosure could reasonably be expected to disclose Personal Information regarding another individual, which cannot reasonably be severed from the information to be disclosed.
- 4.26 Where a Registrant provides access to Personal Information and the Patient or Patient's representative requests a copy of the Personal Information, a copy must be provided if it can reasonably be reproduced.

- 4.27 A Registrant may charge a reasonable fee to cover costs for photocopying and, where appropriate, staff time in retrieving and reproducing the document as set forth in Schedule 1.
- 4.28 Subject to paragraph 4.25, a Patient under 19 years of age may have access to a Record where, in the opinion of the Registrant, the Patient is capable of understanding the subject matter of the Record.
- 4.29 Except where authorized by the Patient, a Registrant must not provide access to the Records of a Patient who is under 19 years of age to the guardian or parent of the Patient where the subject matter of the Record is health care which was provided without the consent of a parent or guardian in accordance with the requirements of section 17 of the *Infants Act*, RSBC 1996, c. 223.

Notification of Change of Registration Information [previously Bylaw 55]

- 4.30 A Registrant must notify the Registrar forthwith in writing of any change of name, address, email, place of employment or other contact information previously provided to the Registrar.

13.0 Delegation, Supervision and Authorization

Supervision [previously Bylaw 87]

- 13.1 A Registrant may only authorize a Support Personnel to perform an aspect of occupational therapy practice if there is an adequate supervision plan in place.
- 13.2 A Registrant who authorizes a Support Personnel to perform an aspect of practice remains responsible for the Patient's occupational therapy assessment and treatment.

Schedule 13: Opticianry: Professional Responsibilities

1.0 Definitions

1.1 In this Schedule:

“Advertisement” means the use of space or time in a public medium, or the use of a commercial publication such as a brochure or handbill, to communicate with the general public, or a segment thereof, for the purpose of promoting professional services or enhancing the image of the advertiser;

“Marketing” includes:

- (a) an Advertisement;
- (b) any publication or communication in any medium with any patient, prospective patient or the public generally in the nature of an Advertisement, promotional activity or material, a listing in a directory, a public appearance or any other means by which professional services are promoted; and
- (c) contact with a prospective patient initiated by or under the discretion of a Registrant.

2.0 Standard of Practice and Standards of Professional Ethics

Practice Limits and Conditions for Opticianry: Non-Practising Registrants [previously Bylaw 44(2)]

2.1 A Registrant in the Registrant class of Opticianry: Non-Practising must not provide, delegate or supervise opticianry services in British Columbia.

Practice Limits and Conditions for Opticianry: Temporary Registrants [previously Bylaws 45(3) to (4)]

2.2 A Registrant in the Registrant class of Opticianry: Temporary may perform only those activities that they are entitled to perform in their home jurisdiction.

2.3 A Registrant in the Registrant class of Opticianry: Temporary can perform only those activities that the Registration Committee approves.

3.0 Advertising and Marketing [previously Bylaw 85]

3.1 Any Marketing undertaken or authorized by a Registrant in respect of their professional services must not be:

- 3.1.1 false;

- 3.1.2 inaccurate;
 - 3.1.3 unverifiable;
 - 3.1.4 misleading;
 - 3.1.5 misrepresentative of the effectiveness of any technique, procedure, instrument or device;
 - 3.1.6 undignified, offensive or in bad taste; or
 - 3.1.7 contrary to the Standards of Professional Ethics of the profession of opticianry.
- 3.2 Without limitation, Marketing violates paragraph 3.1 if it:
- 3.2.1 is calculated or likely to take advantage of the weakened state, either physical, mental or emotional, of the recipient or intended recipient;
 - 3.2.2 is likely to create in the mind of the recipient or intended recipient an unjustified expectation about the results which the Registrant can achieve;
 - 3.2.3 implies that the Registrant can obtain results:
 - 3.2.3.1 not achievable by other Registrants;
 - 3.2.3.2 by improperly influencing a public body or official, or any corporation, agency or person having any interest in the welfare of the recipient; or
 - 3.2.3.3 by any other improper means; or
 - 3.2.4 compares the quality of services provided with those provided by:
 - 3.2.4.1 another Registrant;
 - 3.2.4.2 a person authorized to provide health services under another enactment; or
 - 3.2.4.3 practitioners of another Designated Health Profession authorized by the Act;or
 - 3.2.5 makes claims of special skills that are not supported by the education and experience of the Registrant, or announces or holds out that the Registrant has special qualifications that are not possessed by the Registrant.
- 3.3 A Registrant must not:
- 3.3.1 state publicly that they speak on behalf of the College unless they have been expressly authorized by the Board to state the official position of the College; or
 - 3.3.2 endorse or lend themselves as an optician to the Advertisement of any property, investment or service for sale to the public unless such property, investment or service relates directly to the profession of opticianry.

- 3.4 A Registrant who, in any Advertisement, includes a statement of fees for a specific service:
- 3.4.1 must ensure that the statement sufficiently describes the fees and services so as to enable the recipient or intended recipient to understand the nature and extent of the services to be provided and the cost to the patient; and
 - 3.4.2 must not in the Advertisement compare the fees charged by the Registrant with those charged by another Registrant of the College or a registrant or registrants of another college under the Act.
- 3.5 Unless otherwise authorized by the Act, the *Opticians Regulation*, BC Reg. 118/2010, the Bylaws, this Schedule, or the Board, a Registrant:
- 3.5.1 must not use the title “specialist” or any similar designation suggesting a recognized special status or accreditation on any letterhead or business card or in any other Marketing; and
 - 3.5.2 must take all reasonable steps to discourage the use, in relation to the Registrant by another person, of the title “specialist” or any similar designation suggesting a recognized special status or accreditation in any Marketing.
- 3.6 A Registrant must retain all Marketing material for 1 year after the date of publication or broadcast, and must provide to the Registrar, the Inquiry Committee, the Discipline Committee or the Board upon request:
- 3.6.1 a copy of any such publication;
 - 3.6.2 a recording of any such broadcast made by use of any electronic media, including radio, television and microwave transmission; and
 - 3.6.3 a written record of when and where the publication or broadcast was made.
- 3.7 It is the duty of a Registrant to verify the statements made in their Marketing when requested to do so by the Registrar, the Inquiry Committee, the Discipline Committee or the Board.
- 3.8 Registrants who limit their practices to certain branches or areas of the profession of opticianry may state in any Marketing the branch or area to which their practice is restricted.

4.0 Record-Keeping

Privacy Requirements [previously Bylaw 62]

- 4.1 A Registrant must:
- 4.1.1 ensure that patient Personal Information collected is current, legible, accurate and completely recorded;

- 4.1.2 at all times protect and maintain the confidentiality of patient Personal Information collected;
- 4.1.3 upon request, provide patients, or the legal representatives of patients, with access to their patient Personal Information in accordance with all relevant legal requirements; and
- 4.1.4 ensure that all records from their practice containing patient Personal Information are safely and securely stored, or disposed of, by making reasonable security arrangements against such risks as unauthorized access, collection, use, disclosure or disposal.

Inspection of Records [previously Bylaw 63]

- 4.2 A Registrant must make records kept in accordance with the Standards of Practice for the practice of opticianry and any written or electronically, computerized or mechanically recorded documentation relevant to those records available at reasonable hours for inspection by representatives of the College, including the Registrar, members of the Inquiry Committee, the Discipline Committee and the Quality Assurance Committee, and assessors and inspectors appointed under any provision of the Bylaws or the Act.

Notification of Change of Registration Information [previously Bylaw 65]

- 4.3 A Registrant must immediately update their online registration profile to reflect any change of address, name, contact information, changes in the Registrant's employer, place of business or any other registration information previously provided to the Registrar.

Schedule 14: Optometry: Professional Responsibilities

1.0 Definitions [previously Bylaw 1]

1.1 In this Schedule:

“Advertisement” means a notice or announcement used for Advertising;

“Advertising” means the use of space or time in a public medium, or the use of a commercial publication such as a brochure or handbill, to communicate with the general public, or a segment of it, for the purpose of promoting Optometric Services or enhancing the image of the advertiser;

“BC Optometric Corporation” means a corporation incorporated under the *Business Corporations Act*, SBC 2002, c. 57, to which a health profession corporation permit has been issued under section 43 of the Act;

“Full Registrant” means:

- (a) a Registrant in the Registrant class of Optometry: Therapeutic Qualified established by Bylaw 6.4(a);
- (b) a Registrant in the Registrant class of Optometry: Non-Therapeutic Qualified established by Bylaw 6.4(b); or
- (c) a Registrant in the Registrant class of Optometry: Limited s established by Bylaw 6.4(c);

“Good Standing” means, in respect of:

- (a) a Registrant, the meaning of “Good Standing” as defined in Bylaw 1.0; and
- (b) a BC Optometric Corporation, that it has been issued a permit which has not been revoked under section 44 of the Act or otherwise expired or lapsed;

“Marketing” includes:

- (a) Advertising and Advertisements;
- (b) a publication or communication in any medium with any patient, prospective patient or the public generally, in the nature of an Advertisement, promotional activity or material, a listing in a directory, a public appearance or any other means by which professional services are promoted; and
- (c) any contact with a prospective patient initiated by or under the direction of a Registrant;

“Optometric Services” means those services a Registrant is authorized to provide under the Act and Bylaws;

"Patient Representative" means:

- (a) a committee of the patient under the *Patient's Property Act*, RSBC 1996, c. 34;
- (b) the parent or guardian of a patient who is under 19 years of age;
- (c) a representative authorized by a representation agreement under the *Representation Agreement Act*, RSBC 1996, c. 405, to make or help in making decisions on behalf of a patient;
- (d) a decision maker or guardian appointed under section 10 of the *Adult Guardianship Act*, RSBC 1996, c. 6; or
- (e) a temporary substitute decision maker chosen under section 16 of the *Health Care (Consent) and Care Facility (Admission) Act*, RSBC 1996, c. 181;

“Place of Practice” means a clinic, office or other premises which is used, in whole or in part, by a Registrant in British Columbia to provide Optometric Services;

“Policy” means a policy adopted by the College for the practice of optometry;

“Professional Fees” means fees charged by a Full Registrant for eye examinations, contact lens fittings, supplementary testing, vision therapy, low vision examinations, surgical co-management and other services for which the Registrant applies their professional knowledge or skill;

“Record” means a “record” as defined in Schedule 1 of the *Freedom of Information and Protection of Privacy Act*, RSBC 1996, c. 165;

“Regulation” means the *Optometrists Regulation*, BC Reg 33/2009;

“Restricted Activity” means a restricted activity set out in section 5 of the *Optometrists Regulation*, BC Reg 33/2009;

“Therapeutic Pharmaceutical Agents” means therapeutic pharmaceutical agents as defined in the *Optometrists Regulation*, BC Reg 33/2009.

2.0 Standards of Practice and Standards of Professional Ethics

Code of Ethics and Conflict of Interest [previously Bylaw 130]

- 2.1 Registrants must conduct themselves in accordance with the Code of Ethics and Conflicts of Interest set out in Table “1” to this Schedule.

Honour, Integrity and Reputation [previously Bylaw 131]

- 2.2 Registrants must, at all times, in both their professional and private affairs, conduct themselves in a manner that upholds the honour, integrity and reputation of the profession of optometry and is conducive to public respect for the profession of optometry, the College and its Registrants.

Conflicts of Interest [previously Bylaw 132]

- 2.3 In all matters concerning the Registrant’s practice of optometry, including business relations, working conditions and professional judgment, the best interests of the patient must be the primary consideration.
- 2.4 A Registrant must not practice optometry in a conflict of interest, as defined in the standards for the avoidance of conflicts of interest set out in Table “1” to this Schedule. *[previously Bylaw 133]*
- 2.5 A Registrant must not discount Professional Fees unless doing so does not:
- 2.5.1 impede their professional judgment;
 - 2.5.2 degrade or jeopardize the quality of treatment a patient receives; or
 - 2.5.3 conflict with:
 - 2.5.3.1 the Act;
 - 2.5.3.2 the Regulation;
 - 2.5.3.3 the Bylaws;
 - 2.5.3.4 this Schedule; or
 - 2.5.3.5 the Policies of the College.

Mode of Practice [previously Bylaw 134]

- 2.6 A Registrant must not enter a business relationship which:
- 2.6.1 impedes their professional judgment;
 - 2.6.2 degrades or jeopardizes the quality of treatment a patient receives; or

- 2.6.3 conflicts with:
 - 2.6.3.1 the Act;
 - 2.6.3.2 the Regulations;
 - 2.6.3.3 the Bylaws;
 - 2.6.3.4 this Schedule; or
 - 2.6.3.5 the Policies of the College.

Appraisal of Oculo-Visual Status [previously Bylaw 135]

- 2.7 Registrants must in all cases appraise the oculo-visual status of their patients and record the results in accordance with the Policies of the College.

Places of Practice: Physical requirements [previously Bylaw 115]

- 2.8 A Place of Practice must:
 - 2.8.1 be accessible to the public;
 - 2.8.2 be accessible at all times to any Registrant who practises there;
 - 2.8.3 include examination areas located so that the patient's privacy and confidentiality are protected;
 - 2.8.4 include examination areas equipped with, or with ready access to, sinks and disposal facilities sufficient to ensure infection control to the standards of the British Columbia Centre for Disease Control;
 - 2.8.5 have independent, direct and private telephone, fax and email services;
 - 2.8.6 have a private and secure mail delivery address;
 - 2.8.7 have a secure area for the storage of prescription pads and Therapeutic Pharmaceutical Agents; and
 - 2.8.8 have a secure area, accessible only to the Registrants who practice there and persons they have authorized, for storing Personal Information and Records consistently with this Schedule and all applicable laws relating to the protection of patient privacy.
- 2.9 Despite subparagraph 2.8.5, a Place of Practice may have shared telephone, fax and email services if all Registrants sharing those services conclude confidentiality agreements satisfactory to the Registrar with all persons with whom they are shared.

2.10 Despite subparagraph 2.8.6, a Place of Practice may have a shared mail delivery address if all Registrants sharing that address conclude confidentiality agreements satisfactory to the Registrar with all persons with whom it is shared.

Places of Practice: Practice Name [previously Bylaw 115.1]

2.11 Each Place of Practice must have a name approved in writing by the Registrar.

2.12 A Registrant seeking approval for a name under paragraph 2.11 must deliver a completed Place of Practice application in the required form to the Registrar.

2.13 The name approved under paragraph 2.11 must not be transferred to another person, used at another Place of Practice, or changed without the prior written approval of the Registrar.

2.14 The name for a Place of Practice must include the word “optometrist” or a derivative of that word and must not include the reserved title for any other Designated Health Profession or college unless the Board or other college has expressly authorized its use in the Place of Practice name.

2.15 Two or more Places of Practice must not, unless they are affiliated with each other, have a name which is identical to another Place of Practice, or so closely resembles the name of another Place of Practice that it is likely to confuse or mislead the public.

2.16 The name of a Place of Practice, together with the Registrant’s name and address, must appear on the Registrant’s letterhead, prescription pads and electronic communications.

Places of Practice: Place of Practice [previously Bylaw 116]

2.17 A Place of Practice must:

2.17.1 be under the control and supervision of a Full Registrant in Good Standing or a BC Optometric Corporation in Good Standing;

2.17.2 be sufficiently and appropriately equipped to provide Optometric Services to patients consistent with the Act, the Regulation, the Bylaws, this Schedule, and the Standards of Practice for the practice of optometry and other Policies of the College;

2.17.3 prominently display the name and Confirmation of Registration of each Registrant who practices there;

2.17.4 prominently display signage visible from the exterior of each Place of Practice containing the name of each Registrant who practices there;

2.17.5 prominently display the BC Optometric Corporation’s permit if the Place of Practice is operated by or through a BC Optometric Corporation; and

2.17.6 not display the name of any Registrant at any Place of Practice who does not personally provide Optometric Services at that location.

2.18 Despite paragraph 2.17, a Place of Practice may display the name of a former Registrant who has retired from practice for up to five years after the Registrant's date of retirement.

Places of Practice: Responsibility for Patient Care [previously Bylaw 117]

2.19 A Registrant who examines a patient, or who supervises the examination of a patient, is responsible for that patient's care.

Places of Practice: Responsibility of Practice Owners [previously Bylaw 118]

2.20 A Registrant who owns or has an interest in a Place of Practice is responsible for the care of all patients at that Place of Practice.

2.21 Paragraph 2.20 applies whether or not the Registrant has personally provided Optometric Services to a given patient.

2.22 Nothing in paragraph 2.20 or 2.21 precludes or diminishes the ultimate responsibility for a patient's care of the Registrant or Registrants who examine that patient.

Places of Practice: More than Four Places of Practice [previously Bylaw 119]

2.23 For each Place of Practice in which a Registrant is affiliated, that Registrant must inform the Registrar in writing of the name of the Registrant at that Place of Practice who will have custody or control of clinical Records and who will be responsible for ensuring:

2.23.1 the compliance of that Place of Practice with paragraphs 2.8 to 2.29; and

2.23.2 the maintenance and implementation of patient care Policies, including patient follow-up, at that Place of Practice.

2.24 Nothing in paragraph 2.23 precludes or diminishes the ultimate responsibility for a patient's care of a Registrant who examines that patient.

Places of Practice: Mode of Practice Irrelevant [previously Bylaw 120]

2.25 A Registrant's obligations under paragraphs 2.8 to 2.29 are not affected by the fact that the Registrant practices optometry as:

2.25.1 an employee or volunteer of another person; or

2.25.2 a contractor.

Places of Practice: Practice Address [previously Bylaw 121]

2.26 Registrants must advise the Registrar in writing of the address of each of their Places of Practice.

Places of Practice: Exemptions for Rural or Mobile Practices [previously Bylaw 122]

2.27 Upon application, the Registrar may exempt a Registrant from any requirement in paragraphs 2.8 to 2.29 if it determines that an exemption is reasonable because:

2.27.1 the Registrant's Place of Practice or intended Place of Practice is in a rural location; or

2.27.2 the Registrant's Place of Practice or intended Place of Practice is a mobile clinic.

2.28 A Registrant must submit a written application to the Registrar for an exemption from any requirement in paragraphs 2.8 to 2.29.

2.29 The Registrar may grant an exemption for such period, and on such terms or conditions, as the Registrar considers appropriate.

Practice Limits and Conditions for the Administration of Therapeutic Pharmaceutical Agents [previously Bylaws 51(2)-(3)]

2.30 Only a Registrant in the Registrant class of Optometry: Therapeutic Qualified may prescribe, dispense or administer Therapeutic Pharmaceutical Agents.

2.31 Despite paragraph 2.30, Registrants in the Registrant class of Optometry: Academic may administer Therapeutic Pharmaceutical Agents when doing so for educational purposes in an instructional setting.

Practice Limits and Conditions for Optometry: Academic Registrants [previously Bylaw 55(2)]

2.32 A Registrant in the Registrant class of Optometry: Academic must not provide Optometric Services in British Columbia except for educational purposes in an instructional setting.

Practice Limits and Conditions for Optometry: Limited Registrants [previously Bylaw 60(3)]

2.33 A person who has been granted registration in the Registrant class of Optometry: Limited may only perform the services of a Full Registrant under the supervision of a practitioner and upon any limits or conditions set by the Registration Committee.

3.0 Advertising and Marketing [previously Bylaws 123-128]

Regulation of Marketing

- 3.1 Marketing conducted or authorized by a Registrant must not be:
 - 3.1.1 false;
 - 3.1.2 inaccurate;
 - 3.1.3 unverifiable;
 - 3.1.4 misleading;
 - 3.1.5 misrepresentative of the effectiveness of any procedure, instrument or ophthalmic device;
 - 3.1.6 undignified, offensive or in bad taste; or
 - 3.1.7 contrary to the Standards of Practice for the practice of optometry or the Code of Ethics set out in Table “1” to this Schedule.
- 3.2 Without limiting the generality of paragraph 3.1, Marketing must not:
 - 3.2.1 be calculated or likely to take advantage of a weakened physical, mental or emotional state of the recipient or intended recipient;
 - 3.2.2 be likely to create in the mind of the recipient or intended recipient an unjustified expectation of the results the Registrant can achieve;
 - 3.2.3 imply that the Registrant can obtain results not achievable by other Registrants;
 - 3.2.4 imply that the Registrant can obtain results by improper means; or
 - 3.2.5 compare the quality of services provided by the Registrant with those provided by another Registrant, a person authorized to provide Optometric Services under another enactment, or another health profession.
- 3.3 A Registrant must, when called upon by the Registrar, the Inquiry Committee, the Discipline Committee or the Board to do so, verify the statements made in their Marketing.

Regulation of Advertisements

- 3.4 An Advertisement which includes a statement of fees for a specified service must be sufficiently accurate and detailed to enable the recipient or intended recipient to understand the nature and extent of services to be provided and the cost to the patient.
- 3.5 An Advertisement which includes a statement of fees for a specified service must not compare those fees to those charged by another Registrant.

- 3.6 A Registrant must retain for one year after the date of publication or broadcast of any Advertisement, and must provide to the Board upon request, a copy of the Advertisement and a written record of when and where it appeared.
- 3.7 If an Advertisement made by anyone includes the name, address, telephone number, Place of Practice or other identifier of a Registrant, the Registrant is presumed to have authorized that Advertisement unless it is proved otherwise.

Endorsements

- 3.8 A Registrant must not endorse or lend themselves as an optometrist to the Advertisement of any property, investment or service for sale to the public unless such property, investment or service relates directly to the provision of Optometric Services by the Registrant.

No Specialists

- 3.9 A Registrant must not Advertise or otherwise hold out to the public that they are a specialist in a particular aspect of the practice of optometry.
- 3.10 Nothing in paragraph 3.9 prohibits a Registrant from Advertising that the Registrant restricts their practice to specified aspects of the practice of optometry.
- 3.11 Nothing in paragraph 3.9 prohibits a Registrant from Advertising the Registrant's professional qualifications.

4.0 Record-Keeping *[previously Bylaws 85-105]*

Purpose for which Personal Information May be Collected

- 4.1 No Registrant may collect Personal Information regarding a patient unless:
- 4.1.1 the information relates directly to and is necessary for providing Optometric Services to the patient or for related administrative purposes; or
 - 4.1.2 the collection of that information is expressly authorized by or under an enactment.

Source of Personal Information

- 4.2 A Registrant must collect Personal Information about a patient directly from the patient.
- 4.3 Despite paragraph 4.2, a Registrant may collect Personal Information from another person if the Registrant has reasonable grounds to believe:
- 4.3.1 that the patient has been made aware of the matters set out in paragraph 4.4 and has authorized collection of the Personal Information from another person;

- 4.3.2 that the patient is unable to give their authority and the Registrant, having made the Patient's Representative aware of the matters set out in paragraph 4.4, collects the information from the representative or the representative authorizes collection from another person;
- 4.3.3 that compliance with paragraph 4.2 would:
 - 4.3.3.1 prejudice the best interests of the patient;
 - 4.3.3.2 defeat the purpose or prejudice the use for which the information is collected; or
 - 4.3.3.3 prejudice the safety of any person;
- 4.3.4 that compliance with paragraph 4.2 is not reasonably practicable in the circumstances of the particular case;
- 4.3.5 that the collection is for the purpose of assembling a family or genetic history of a person and is collected directly from that person;
- 4.3.6 that the information is publicly available information;
- 4.3.7 that the information:
 - 4.3.7.1 will not be used in a form in which the patient concerned is identified; or
 - 4.3.7.2 will be used for statistical or research purposes and will not be published in a form that could reasonably be expected to identify the patient; or
- 4.3.8 in the public sector, that non-compliance with paragraph 4.2, is necessary if the information is about law enforcement or anything referred to in sections 15(1) or (2) of the *Freedom of Information and Protection of Privacy Act*.

Collection of Personal Information

- 4.4 If a Registrant collects Personal Information directly from the patient, or from the Patient's Representative, the Registrant must take such steps as are, in the circumstances, reasonable to ensure that the patient or Patient's Representative is aware of:
 - 4.4.1 the fact that the Personal Information is being collected;
 - 4.4.2 the purpose for which the Personal Information is being collected;
 - 4.4.3 the intended recipients of the Personal Information;
 - 4.4.4 whether or not the supply of the Personal Information is voluntary or mandatory and, if mandatory, the legal authority for collecting the Personal Information;
 - 4.4.5 the consequences, if any, for that patient if all or any part of the requested Personal Information is not provided; and

- 4.4.6 the rights of access to Personal Information provided in paragraphs 4.34 to 4.39.
- 4.5 The steps referred to in paragraph 4.4 must be taken before the Personal Information is collected or, if that is not practicable, as soon as practicable after the Personal Information is collected.
- 4.6 A Registrant is not required to take the steps referred to in paragraph 4.4 in relation to the collection of Personal Information from a patient, or the Patient's Representative, if the Registrant has taken those steps in relation to the collection, from the patient or Patient's Representative, of the same information or information of the same kind for the same or a related purpose, on a recent previous occasion.
- 4.7 A Registrant is not required to comply with paragraph 4.4 if the Registrant believes on reasonable grounds:
- 4.7.1 that non-compliance is authorised by the patient concerned;
 - 4.7.2 that compliance would:
 - 4.7.2.1 prejudice the interests of the patient concerned; or
 - 4.7.2.2 defeat the purpose or prejudice the use for which the information is collected;
 - 4.7.3 that compliance is not reasonably practicable in the circumstances of the particular case; or
 - 4.7.4 in the public sector, that the information is about law enforcement or anything referred to in sections 15(1) or (2) of the *Freedom of Information and Protection of Privacy Act*.

Manner of Collection of Personal Information

- 4.8 Personal Information must not be collected by a Registrant:
- 4.8.1 by unlawful means, or
 - 4.8.2 by means that, in the circumstances of the case, are unfair or intrude to an unreasonable extent upon the personal affairs of the patient concerned.

Duty to Maintain and Protect Personal Information

- 4.9 A Registrant must at all times protect and maintain the confidentiality of Personal Information collected under paragraphs 4.2 to 4.8.

Accuracy of Personal Information

- 4.10 A Registrant must make every reasonable effort to ensure that Personal Information they collect or hold is current and is legibly, accurately and completely recorded.

Right to Request Correction of Personal Information

- 4.11 A person who believes there is an error or omission in a Record containing their Personal Information may request that the Registrant having the Record in their custody or control correct the information.
- 4.12 If after receiving a request for correction under paragraph 4.11, the Registrant disagrees that there is an error or omission in the Record, the Registrant must note the request in the Record with particulars of the correction that was sought.

Use of Personal Information by a Registrant

- 4.13 A Registrant may use Personal Information only:
- 4.13.1 for the purpose of providing Optometric Services to the patient or related administrative purpose;
 - 4.13.2 for a use or disclosure consistent with a purpose specified in subparagraph 4.13.1;
 - 4.13.3 if the patient has consented to the use; or
 - 4.13.4 for a purpose for which that information may be disclosed by the Registrant under the Act, the Regulation, the Bylaws, or this Schedule.

Disclosure of Personal Information by a Registrant

- 4.14 A Registrant must maintain confidentiality of Personal Information and may disclose relevant Personal Information only:
- 4.14.1 if the patient concerned has consented to the disclosure;
 - 4.14.2 for the purpose of providing Optometric Services to the patient or related administrative purpose or for a disclosure consistent with either purpose;
 - 4.14.3 for the purpose of complying with an enactment of British Columbia or Canada, or an arrangement or agreement made under such an enactment;
 - 4.14.4 for the purpose of complying with a subpoena, warrant or order issued or made by a court, person or body with jurisdiction to compel the production of information;

- 4.14.5 to an employee of, or contractor providing services to, the Registrant, if the information is necessary for the performance of the duties of, or for the protection of the health or safety of, the employee or contractor;
 - 4.14.6 to a lawyer acting for the Registrant, for use in civil or criminal proceedings involving the Registrant;
 - 4.14.7 if necessary to comply with the *Coroners Act*, SBC 2007, c. 15;
 - 4.14.8 if necessary to comply with the *Ombudsman Act*, RSBC 1996, c. 340;
 - 4.14.9 for the purposes of collecting a debt or fine owing by a patient to the Registrant or making a payment owing by the patient to a Registrant;
 - 4.14.10 to an auditor, the College or any other person or body authorized by law, for audit purposes;
 - 4.14.11 if the Registrant believes on reasonable grounds that there is a risk of significant harm to the health or safety of any person and that the use or disclosure of the information would reduce that risk;
 - 4.14.12 so that the next of kin or a friend of an injured, ill or deceased individual may be contacted;
 - 4.14.13 in accordance with the Act, the Regulation, the Bylaws, or this Schedule; or
 - 4.14.14 as otherwise required by law.
- 4.15 No Registrant may, for commercial purposes, release or permit the release of information or an abstract of information, obtained from a prescription, which would permit the identity of the Registrant or the patient to be determined.

Consistent Purpose

- 4.16 A use or disclosure of Personal Information is consistent with the purposes of providing Optometric Services to a patient or related administrative purposes under paragraphs 4.13 and 4.14 if the use or disclosure has a reasonable and direct connection to either purpose.

Disclosure for Research and Statistical Purposes

- 4.17 A Registrant may disclose Personal Information for a research purpose, including statistical research, only if:
- 4.17.1 the research purpose cannot reasonably be accomplished unless that information is provided in individually identifiable form or the research purpose has been approved by the Board;

- 4.17.2 any record linkage is not harmful to the individuals concerned and the benefits to be derived from the record linkage are clearly in the public interest;
- 4.17.3 the head of the public body concerned has approved conditions relating to:
 - 4.17.3.1 security and confidentiality;
 - 4.17.3.2 the removal or destruction of individual identifiers at the earliest reasonable time; and
 - 4.17.3.3 the prohibition of any subsequent use or disclosure of that information in individually identifiable form without the express authorization of the Board; and
- 4.17.4 the person to whom that information is disclosed has signed an agreement to comply with the approved conditions, the Bylaws, this Schedule, and any Policies and procedures required by the Board relating to the confidentiality of Personal Information.

Storage and Retention of Personal Information

- 4.18 A Registrant must ensure that all Records:
 - 4.18.1 pertaining to their practice; and
 - 4.18.2 containing Personal Information, are safely and securely stored.
- 4.19 Records stored under paragraphs 4.18 and 4.20 must be accessible only to the Registrant, their staff, and persons who have signed a confidentiality agreement with the Registrant.
- 4.20 Personal Information of a minor must be retained for a period of ten years after the minor reaches the age of 19, and all other Personal Information must be retained for a period of ten years.

Disposal or transfer of Records

- 4.21 A Registrant must ensure that Records containing Personal Information are disposed of or transferred only by:
 - 4.21.1 transferring the Records to another Registrant in Good Standing or BC Optometric Corporation in Good Standing for the purposes of ongoing optometric care;
 - 4.21.2 transferring the Records to the patient;
 - 4.21.3 transferring the Records to any third party with the written consent of the patient;
 - 4.21.4 effectively destroying those Records by utilizing a shredder or by complete burning; or

- 4.21.5 erasing information recorded or stored by electronic methods on memory devices, disks, tapes, or other media in a manner that ensures that the information cannot be reconstructed.
- 4.22 A Registrant who transfers Records pursuant to subparagraph 4.21.1 has a right to review them for a period of ten years after transferring them.
- 4.23 A Registrant who transfers Records pursuant to subparagraph 4.21.1 may, subject to this Schedule, transfer copies of the Records and retain the originals.
- 4.24 A Registrant who receives Personal Information transferred in accordance with paragraphs 4.21 to 4.23 must notify any patient concerned of the transfer.

Registrant Ceasing to Practice

- 4.25 A Registrant who ceases to practice in British Columbia for any reason or moves to another Place of Practice in British Columbia, or a Registrant or former Registrant who moves to another jurisdiction must:
- 4.25.1 dispose of or transfer Records containing Personal Information in accordance with this heading;
 - 4.25.2 notify the College within five business days of ceasing to practice, moving to another Place of Practice in British Columbia, or moving to another jurisdiction; and
 - 4.25.3 provide the College with a written summary of the steps they have taken to dispose of or transfer the Records containing Personal Information and provide the name of the Registrant who will be assuming responsibility for continuing patient care.
- 4.26 A Registrant must make appropriate arrangements to ensure that, in the event the Registrant dies or becomes unable to practice for any reason and is unable to dispose of or transfer Records containing Personal Information, the Personal Information will be safely and securely transferred to another Registrant in Good Standing or BC Optometric Corporation in Good Standing.
- 4.27 In the event that a Registrant ceases to practice and fails to transfer, dispose of or make arrangements to dispose of Personal Information as required by this heading, the Board may appoint another Registrant to receive the Records containing Personal Information.
- 4.28 A Registrant who receives Personal Information transferred in accordance with paragraphs 4.25 to 4.29 must notify any patient concerned of the transfer.
- 4.29 For the purpose of paragraphs 4.25 to 4.29, a Registrant who is temporarily suspended for no more than six months does not cease to practice.

Protection of Personal Information

- 4.30 A Registrant must protect Personal Information by making reasonable security arrangements against such risks as unauthorized access, collection, use, disclosure or disposal.
- 4.31 A Registrant must take reasonable measures to ensure that a third party, including a volunteer, employee of or contractor of the Registrant or a health professions corporation or a student practitioner under the supervision of the Registrant, does not access, collect, use, disclose, store or dispose of Personal Information except in accordance with the requirements of this heading.

Contracts for Handling Personal Information

- 4.32 A Registrant must ensure that, if Personal Information is transferred to any person or service organization for processing, storage or disposal, a contract is made with that person which includes an undertaking by the recipient that confidentiality and physical security will be maintained.

Remedying a Security Breach

- 4.33 A Registrant must take appropriate measures to remedy any unauthorized access, use, disclosure or disposal of Personal Information as soon as possible after the breach is discovered, including:
- 4.33.1 taking steps to recover the Personal Information or to ensure its disposal if it cannot be recovered;
 - 4.33.2 taking steps to ensure that any remaining Personal Information is secured;
 - 4.33.3 notifying:
 - 4.33.3.1 anyone affected by the unauthorized access including patients and other health care providers;
 - 4.33.3.2 the College; and
 - 4.33.3.3 law enforcement officials, if criminal action may have contributed to the unauthorized action; and
 - 4.33.4 modifying existing security arrangements to prevent a re-occurrence of the unauthorized access.

Patient Access to Personal Information

- 4.34 If a patient or a Patient Representative makes a request for access to Personal Information about a patient, the Registrant must comply as soon as practicable but not more than 45 days following the request by:
- 4.34.1 providing access to the Personal Information to the patient or Patient's Representative;
 - 4.34.2 providing access to the remainder of the Personal Information if that information excepted from disclosure under paragraph 4.35 can reasonably be severed; or
 - 4.34.3 providing written reasons for the refusal of access to the Personal Information or to any portion of the Records.
- 4.35 The Registrant may refuse to disclose Personal Information to a patient or Patient Representative:
- 4.35.1 if there is a significant likelihood of a substantial adverse effect on the physical, mental or emotional health of the patient;
 - 4.35.2 if there is a significant likelihood of harm to a third party; or
 - 4.35.3 if the disclosure could reasonably be expected to disclose Personal Information regarding another individual.
- 4.36 If a Registrant provides access to Personal Information in accordance with paragraph 4.34 and the patient or Patient Representative requests a copy of the Personal Information, a copy must be provided if it can reasonably be reproduced.
- 4.37 A Registrant may charge a reasonable fee for the reproduction of Personal Information which does not exceed the Fee set out in Schedule 1.
- 4.38 Subject to paragraph 4.35, a patient under 19 years of age may have access to a Record if, in the opinion of the Registrant, the patient is capable of understanding the subject matter of the Record.
- 4.39 Except if authorized by the patient, a Registrant must not provide access to the Records of a patient who is under 19 years of age to the guardian or parent of the patient if the subject matter of the Record is health care which was provided without the consent of a parent or guardian in accordance with the requirements of section 17 of the *Infants Act*, RSBC 1996, c. 223.

Ownership of Records

- 4.40 A Registrant must ensure that all Records containing Personal Information of their patients are owned by:

- 4.40.1 the Registrant;
- 4.40.2 another Registrant by whom the Registrant is employed or for whom the Registrant is a contractor; or
- 4.40.3 a BC Optometric Corporation.

4.41 If a Registrant employs or is employed by another Registrant, or is employed by a BC Optometric Corporation, the Registrant must secure a written agreement with the other Registrant or BC Optometric Corporation establishing which of them owns the Records referred to in paragraph 4.40.

Practice Management Records

4.42 A Registrant must retain any Records to which paragraphs 4.18 to 4.20 do not apply for at least seven years.

Movement of Records

4.43 A Registrant or former Registrant must notify the Registrar in writing within five business days upon moving Records from the Registrant's or former Registrant's Place of Practice or other storage location to a new location.

Change of Registrant information and practice address [previously Bylaw 144]

4.44 A Registrant must notify the Registrar in writing of any change of name, address of Place of Practice, and/or business contact information within five business days of the change.

5.0 Delegation, Supervision and Authorization [previously Bylaw 114]

5.1 A Registrant must not delegate the following Restricted Activities:

- 5.1.1 the making of a diagnosis identifying, as the cause of signs or symptoms of an individual;
 - 5.1.1.1 a disorder of refraction;
 - 5.1.1.2 a sensory or ocular motor disorder; or
 - 5.1.1.3 a disease or disorder of an eye or an anatomical structure directly related to the vision system;
- 5.1.2 for the purpose of removing a superficial foreign body from an eye, the performing of a procedure on tissue:
 - 5.1.2.1 below the dermis;

- 5.1.2.2 below the surface of a mucous membrane; or
 - 5.1.2.3 in or below the surface of the cornea;
 - 5.1.3 the administering of a substance by irrigation for the purpose of treating a disorder of a tear duct;
 - 5.1.4 the prescribing of a Therapeutic Pharmaceutical Agents;
 - 5.1.5 the dispensing of a diagnostic drug or Therapeutic Pharmaceutical Agents;
 - 5.1.6 the administering topically of a Therapeutic Pharmaceutical Agents; or
 - 5.1.7 the prescribing of a visual appliance.
- 5.2 Subject to paragraph 5.3, a Registrant may delegate the following Restricted Activities:
- 5.2.1 the administering topically of a diagnostic drug;
 - 5.2.2 the verifying of a corrective eyeglass lens or contact lens; and
 - 5.2.3 the fitting of a contact lens.
- 5.3 A Registrant must only delegate a Restricted Activity under paragraph 5.2 if the Registrant:
- 5.3.1 is satisfied that the person to whom the Restricted Activity is delegated is competent to perform the Restricted Activity safely;
 - 5.3.2 is provided with and retains the original or a copy of any examination record arising from the delegated activity;
 - 5.3.3 personally reviews each examination record arising from the delegated activity;
 - 5.3.4 is the sole provider of the diagnosis, if any, of the patient's visual and ocular health;
 - 5.3.5 is the sole provider of the prescription of therapy for the patient's visual and ocular health; and
 - 5.3.6 ensures either that any indicated follow-up action is provided to the patient or that the patient is notified of the need to seek follow-up.
- 5.4 A Registrant may delegate any aspect of practice that does not involve the performing of a Restricted Activity.
- 5.5 In any case in which a Registrant delegates any aspect of practice, the Registrant is ultimately responsible for the patient's visual and ocular health.

Table 1: Code of Ethics and Conflicts of Interest

Code of Ethics

- 1 (1) Registrants must act with integrity, honesty, respect and fairness in all dealings with patients, other Registrants and the College.
- (2) Registrants must keep the health and visual welfare of the patient uppermost at all times and exemplify the high standards of health and visual welfare for humankind.
- (3) Registrants must comply with the Act, the Regulation, the Bylaws, and this Schedule, as well as any other laws applicable to the practice of the profession of optometry.
- (4) Registrants must not provide any advice or treatment for which they do not possess the necessary degree of training, skill, knowledge and experience to provide in a safe manner, or for which there is no reasonable prospect of benefit for the patient.
- (5) Registrants must seek continuing development of educational and technical proficiency such that their patients receive the full benefit of all acknowledged improvements in health and vision care.
- (6) Registrants must ensure that patients are properly informed about the potential benefits and risks and effectiveness of any treatment before such treatment is provided, unless the condition of the patient makes it impossible to do so and the need for consent is otherwise addressed.
- (7) Registrants must provide Optometric Services with equal diligence to all patients.
- (8) Registrants must consult freely with Registrants of the College and with Registrants of other health professions whenever such consultations are in the best interests of the patient and refer patients for further professional care when advisable.
- (9) Registrants must hold in professional confidence all information concerning a patient and use that information only for the benefit of the patient.
- (10) Registrants must maintain complete and accurate patient Records.
- (11) Registrants must maintain their Place(s) of Practice in accordance with the Standards of Practice for the practice of optometry.
- (12) Registrants must respond promptly to all communications from the College where a response is requested or otherwise required and cooperate with all inquiries by the college.

(13) Registrants must maintain at all times the dignity, honour and integrity of the profession of optometry and conduct themselves as exemplary citizens.

Conflicts of Interest

- 2 (1) Registrants must always act in the best interests of the patient in all matters concerning the practice of optometry.
- (2) Registrants must avoid any situation that may give rise to a conflict of interest or to an appearance of conflict of interest, and must not exploit any relationship established in those capacities to further their own physical, emotional, financial, political, or business interests.
- (3) A conflict of interest is deemed to arise where a Registrant has personal interests in a matter that may be reasonably seen to influence their professional advice and conduct in relation to a patient.
- (4) For the purposes of subparagraph (3) in this Code of Ethics, “personal interests” includes, but is not limited to, financial, professional, family and other personal relationships, and includes those situations in which a family member or associate of the Registrant has a significant interest in a matter.
- (5) If a Registrant discovers that they are in a conflict of interest, the Registrant must take immediate steps to remove the conflict of interest.

Schedule 15: Physical Therapy: Professional Responsibilities

1.0 Definitions

1.1 In this Schedule:

“Advertisement” means a notice or announcement used for Advertising;

“Advertising” means the use of space or time in a medium or the use of a commercial publication such as a brochure or handbill to communicate with the public or a segment thereof for promoting professional services or enhancing the image of the advertiser;

“Code of Ethical Conduct” means the Code of Ethical Conduct published by the College for the Designated Health Profession of Physical Therapy;

“General Supervision” means that a supervised person is acting subject to the review of a Registrant in the Registrant class of Physical Therapy: Full;

“Marketing” includes:

- (a) Advertising and Advertisements;
- (b) a publication or communication in any medium with any Patient, prospective Patient, or the public generally, an Advertisement, promotional activity or material, a listing in a directory, a public appearance, or any other means by which professional services are promoted; and
- (c) any contact with a prospective Patient initiated by or under the direction of a Registrant;

“Patient” means a client or consumer who is a recipient of physical therapy services, and may refer to individuals, families, groups, organizations, communities, or populations;

2.0 Standards of Practice and Standards of Professional Ethics

2.1 Registrants must comply with Standards of Practice and the Code of Ethical Conduct.

Practice Limits and Conditions for Physical Therapy: Student Registrants [previously Bylaws 45(2) and 45(3)]

2.2 A student must be registered in the Registrant class of Physical Therapy: Student before undertaking a period of clinical education involving direct Patient care.

2.3 A Registrant in the Registrant class of Physical Therapy: Student may provide physical therapy services only under the General Supervision of a Registrant in the Registrant class of Physical Therapy: Full in Good Standing.

3.0 Marketing and Advertising *[previously Bylaw 83]*

- 3.1 Any Advertising or Marketing undertaken or authorized by a Registrant in respect to their professional services must be:
 - 3.1.1 truthful;
 - 3.1.2 accurate; and
 - 3.1.3 verifiable.
- 3.2 A Registrant must refrain from Marketing, Advertising, or using Advertisements that do any of the following:
 - 3.2.1 promote unnecessary physical therapy services;
 - 3.2.2 provide unsubstantiated claims or guarantees of successful results;
 - 3.2.3 make comparative statements about fees charged, service quality, health providers, and products, or endorse products for financial gain;
 - 3.2.4 challenge or adversely reflect on the skills of other providers or the services of other clinics or facilities; or
 - 3.2.5 offer Patients incentives or other inducements for services.
- 3.3 A Registrant must Advertise only the physical therapy services that they are competent to perform.
- 3.4 A Registrant must retain copies of any Marketing and Advertising for one (1) year after the date of publication or broadcast and provide those records to the College on request.
- 3.5 Registrants have a duty, when requested by the College, to verify the statements made in their Marketing or Advertising.
- 3.6 The name used by a Registrant or physical therapist health profession corporation in Marketing and Advertising shall be the same name that is shown in the College Register.

4.0 Record-Keeping

Registrant's Records [previously Bylaw 84]

- 4.1 Where a Registrant collects Personal Information directly from a Patient or the Patient's representative, the Registrant must take reasonable steps to ensure that the Patient or Patient's representative is aware of the following:
 - 4.1.1 the fact that the Personal Information is being collected;

- 4.1.2 the purpose for which the Personal Information is being collected;
 - 4.1.3 the intended recipients of the Personal Information;
 - 4.1.4 the legal authority for collecting the Personal Information if it is not provided voluntarily;
 - 4.1.5 the consequences, if any, for the Patient if all or any part of the Personal Information is not provided; and
 - 4.1.6 the Patient's right to access their Personal Information.
- 4.2 A Registrant must always protect and maintain the confidentiality of Personal Information collected unless compelled otherwise by legislation.
- 4.3 A Registrant must:
- 4.3.1 correct an error or omission in a Patient's record at the request of the Patient or their representative; or
 - 4.3.2 note the request for correction in the record with particulars of the correction that was sought if the Registrant disagrees that the record contains an error or omission.
- 4.4 A Registrant must ensure that all records pertaining to their practice and containing Personal Information are safely and securely stored by making reasonable security arrangements against such risks as unauthorized access, collection, use, disclosure, or disposal.
- 4.5 A Registrant who ceases to practice for any reason must do the following:
- 4.5.1 first either:
 - 4.5.1.1 transfer records containing Personal Information to a Registrant in the Registrant class of Physical Therapy: Full in Good Standing or make appropriate arrangements to store the Personal Information safely and securely and provide Patients and Patients' representatives with access to the information;
 - 4.5.1.2 return the record to the person the information pertains to; or
 - 4.5.1.3 if the record can be disposed of, ensure that the record is effectively destroyed by using a shredder or by burning the record completely, or erasing information recorded or stored by electronic methods in a manner that ensures that the information cannot be reconstructed; and
 - 4.5.2 then notify the Registrar in writing within twenty-one (21) days of the steps taken to transfer or store the Personal Information.

Notification of Change of Registration Information [previously Bylaw 51]

- 4.6 A Registrant must update their Registrant profile with the College, including but not limited to any change of home and/or business address, name, home and/or business telephone number and/or email address, and any other registration information previously provided to the Registrar, not later than 14 days of the change.

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Schedule 16: Psychology: Professional Responsibilities

1.0 Definitions

1.1 In this Schedule:

“Client” has the same meaning as defined in the Code of Conduct and includes, for greater certainty, a court, organization, or other entity that has engaged a Registrant to conduct an independent assessment or file review concerning an individual;

“Code of Conduct” means the code of conduct established for the Designated Health Profession of Psychology;

“Confidential Information” has the same meaning as defined in the Code of Conduct;

“Consent” has the same meaning as defined in the Code of Conduct;

“Declaration of Intention to Restrict Practice” means:

- (a) the declaration that a Registrant in the Registrant class of Psychology: Psychology Assistant provided to the Registrar, at the time of the Registrant’s initial application for registration in that class, of the Registrant’s intention to restrict their practice to an area of the Practice of Psychology described in Table 2 of Schedule 7; or
- (b) an amended declaration of intention to restrict practice approved by the Registration Committee;

“Practice of Psychology” has the same meaning as defined in the Code of Conduct;

“Practice Records” has the same meaning as defined in the Code of Conduct;

“Professional Relationship” has the same meaning as defined in the Code of Conduct;

“Professional Service” has the same meaning as defined in the Code of Conduct;

“Psychological Services” means a service included in the practice of psychology as such practice is defined in the Code of Conduct;

“Regulation” means the *Psychologists Regulation*, BC Reg. 289/2008;

“Supervisee” has the same meaning as defined in the Code of Conduct;

“Test Result” has the same meaning as defined in the Code of Conduct.

2.0 Standards of Practice and Standards of Professional Ethics

Professional Conduct [previously Bylaw 62]

- 2.1 Registrants must comply with:
 - 2.1.1 the Code of Conduct,
 - 2.1.2 any standards, limits or conditions for the practice of psychology established by the Board under section 19(1)(k) of the Act, whether or not those standards, limits or conditions are specified in the Code of Conduct; and
 - 2.1.3 any standards of professional ethics established by the Board under section 19(1)(l) of the Act, whether or not those standards are specified in the Code of Conduct.

Confirmation of Registration [previously Bylaw 55(4)]

- 2.2 A Registrant must display, at the premises routinely used by the Registrant to practice psychology, the Registrant's current annual Confirmation of Registration.

Practice Limits and Conditions for Psychology: Registered Psychologist [previous bylaw 44]

- 2.3 A Registrant in the Registrant class of Psychology: Registered Psychologist is authorized to provide Psychological Services under the Regulation.

Practice Limits and Conditions for Psychology: Associate Psychologist (corrections) [previously Bylaw 45(5)]

- 2.4 A Registrant in the Registrant class of Psychology: Associate Psychologist (corrections) is authorized to provide Psychological Services subject to the limits and conditions specified in paragraph 2.5.
- 2.5 A Registrant in the Registrant class of Psychology: Associate Psychologist (corrections):
 - 2.5.1 must restrict their Practice of Psychology to the provision of services included in the practice of correctional psychology; as described in Table 2 of Schedule 7; and
 - 2.5.2 may only provide services referred to in subparagraph 2.5.1:
 - 2.5.2.1 under the supervision of a Registrant approved by the Registration Committee for that purpose, in accordance with a supervision plan approved by the Registration Committee; and
 - 2.5.2.2 in the course of the Registrant's employment with a federal or provincial government corrections agency.

Practice Limits and Conditions for Psychology: School Psychologist [previously Bylaws 46(7) and 46(8)]

- 2.6 A Registrant in the Registrant class of Psychology: School Psychologist is authorized to provide Psychological Services of a school psychologist under the Regulation, subject to the

limits and conditions specified in paragraph 2.7 and any additional Standards of Practice for the practice of psychology.

2.7 A Registrant in the Registrant class of Psychology: School Psychologist:

- 2.7.1 must restrict their Practice of Psychology to the provision of services included in the practice of school psychology, as described in Table 2 to Schedule 7; and
- 2.7.2 must not provide or perform a diagnosis identifying a behavioural, emotional, cognitive or mental disorder or condition as the cause of the signs or symptoms of an individual, except as authorized under section 6(2) of the Regulation in the course of their employment with, or performance of duties under contract with:
 - 2.7.2.1 a board of education, francophone education authority or Provincial school under the *School Act*, RSBC 1996, c 412;
 - 2.7.2.2 an authority under the *Independent School Act*, RSBC 1996, c 216;
 - 2.7.2.3 a school operated by a participating First Nation or a Community Education Authority established by one or more participating First Nations under the *First Nations Jurisdiction over Education in British Columbia Act (Canada)*, S.C. 2006, c. 10;
 - 2.7.2.4 another elementary, middle or secondary school or school board, similar to a school or school board referred to in subparagraphs 2.7.2.1 to 2.7.2.3, that is acceptable to the Registration Committee; or
 - 2.7.2.5 a university, college or other post-secondary educational institution that is acceptable to the Registration Committee.

Practice Limits and Conditions for Psychology: Psychology Assistant [previously Bylaw 47(4)]

2.8 A Registrant in the Registrant class of Psychology: Psychology Assistant:

- 2.8.1 must restrict their Practice of Psychology to the provision of services included in the area of practice for which they have provided to the Registrar a Declaration of Intention to Restrict Practice;
- 2.8.2 must not provide or perform a diagnosis or assessment identifying a behavioural, emotional, cognitive or mental disorder or condition as the cause of the signs or symptoms of an individual;
- 2.8.3 may only provide services referred to in subparagraph 2.8.1 under the supervision of a Registrant approved by the Registration Committee for that purpose, in accordance with a supervision plan approved by the Registration Committee; and
- 2.8.4 must not delegate or authorize another person to perform any aspect of practice.

Practice Limits and Conditions for Psychology: Temporary (supervised) [previously Bylaws 48(4.1) and 48(5)]

- 2.9 A Registrant in the Registrant class of Psychology: Temporary (supervised) is authorized to provide Psychological Services subject to the limits and conditions specified in paragraph 2.10.
- 2.10 A Registrant in the Registrant class of Psychology: Temporary (supervised):
- 2.10.1 may only provide Psychological Services under the supervision of a Registrant approved by the Registration Committee for that purpose, in accordance with a supervision plan approved by the Registration Committee; and
 - 2.10.2 must not delegate or authorize another person to perform any aspect of practice.

Practice Limits and Conditions for Psychology: Temporary (visitor) [previously Bylaws 49(3.1) and 49(4)]

- 2.11 A Registrant in the Registrant class of Psychology: Temporary (visitor) is authorized to provide Psychological Services subject to the limits and conditions specified in paragraph 2.12.
- 2.12 A Registrant in the Registrant class of Psychology: Temporary (visitor) may only provide Psychological Services for the purpose described in the declaration provided by the Registrant in their application for registration pursuant to paragraph 8.1.2.2 of Schedule 7.

Practice Limits and Conditions for Psychology: Temporary (emergency) [previously Bylaw 49.1(2.1) and 49.1(3)]

- 2.13 A Registrant in the Registrant class of Psychology: Temporary (emergency) is authorized to provide Psychological Services subject to the limits and conditions specified in paragraph 2.14.
- 2.14 A Registrant in the Registrant class of Psychology: Temporary (emergency) may only provide Psychological Services for the purpose of providing assistance during an emergency situation, subject to any limitations or restrictions specified by the Registrar or the Board.

Practice Limits and Conditions for Psychology: Non-Practising [previously Bylaw 50(2)]

- 2.15 A Registrant in the Registrant class of Psychology: Non-Practising must not practice psychology, or provide any service included in the Practice of Psychology, in British Columbia.

3.0 Advertising and Marketing

Misleading Information

- 3.1 A Registrant must not provide false or misleading information in public statements, including in statements concerning Psychological Services they offer.

Misrepresentation of Affiliations

- 3.2 In announcing or advertising the availability of Psychological Services or products, a Registrant must not display any affiliations with an organization or individual in a manner that falsely implies the sponsorship or certification of that organization or individual.

Restrictions on Naming Associations

- 3.3 A Registrant must not name their employer or professional associations, in advertisements or announcements of their services, unless the Psychological Services are to be provided by, or under, the direct supervision and continued control of that employer or association.

Use of Registrant's Name with Services and Products

- 3.4 A Registrant must not associate with any services or products, or permit their name to be used in connection with any services or products, in such a way as to misrepresent:
- 3.4.1 the services or products;
 - 3.4.2 the degree of their responsibility for the services or products; or
 - 3.4.3 the nature of their association with the services or products.

Solicitation for Services

- 3.5 A Registrant must not contact or communicate with or cause or allow any person directly to contact or communicate with potential Clients, either in person, by telephone, over the internet, or in any other way in an attempt to solicit business, unless the person contacted represents an organization, firm, corporate entity, or community which is the potential Client.

Registration Number

- 3.6 A Registrant must include their registration number from the College Register on all advertisements for their Psychological Services or products.

Public Statements

- 3.7 A Registrant must ensure that all public statements, announcements of Psychological Services or products, advertising, and promotional activities dealing with the facilities, Psychological Services, or products of the Registrant or the Registrant's Supervisees, comply with this Schedule and the Code of Conduct. This includes when using letterhead, business cards, and any other public name displays.

No Solicitation or Use of Testimonials

- 3.8 A Registrant must not solicit or utilize testimonials from Clients or former Clients, or utilize testimonials from any other source regarding any of their professional activities, to solicit Clients. This standard is not intended to prohibit a Registrant from advertising their workshops or other educational services for professionals by utilizing testimonials from other professionals who have attended previous offerings of those workshops or other educational services.

No Misrepresentation of Expertise

- 3.9 A Registrant must not appear in, or permit the use of their name in, an advertisement that implies or could reasonably be interpreted to imply that their professional expertise is relevant to the subject matter of the advertisement.

Exception to Paragraph 3.9

- 3.10 Paragraph 3.9 does not apply to scholarly reviews, to an advertisement of the Registrant's own practice, or to an advertisement of a non-profit organization, provided the Registrant receives no compensation for making an appearance or for use of their name.

No Misrepresentation of Registration

- 3.11 A Registrant must not permit, counsel, or assist those who are not Registrants to represent, promote, or advertise themselves as Registrants.

No Inducement for News Publicity

- 3.12 A Registrant must not compensate or give anything of value to representatives of the press, radio, television, internet, or other communication media in anticipation of or in return for professional publicity in a news item.

Indication of Paid Advertisement

- 3.13 A Registrant must ensure that any paid advertisement is advertised as such unless it is readily apparent from the context that it is a paid advertisement.

Fair and Accurate Presentation

- 3.14 A Registrant who interprets the science or the Practice of Psychology or Psychological Services to the general public must present the information fairly and accurately.

Media Presentations

- 3.15 When a Registrant provides advice or comment by means of public lecture, demonstration, radio or television program, pre-recorded tape, printed article, mailed material, the internet, or other media, the Registrant must:
- 3.15.1 take precautions to ensure that the statements are based on appropriate psychological literature and practice, including the most current relevant data;
 - 3.15.2 exercise a high level of professional judgment;
 - 3.15.3 ensure the statements are consistent with the requirements of this Schedule and the Code of Conduct;
 - 3.15.4 take precautions to ensure that the recipients of the information are not encouraged to infer that a Professional Relationship has been established by the Registrant with them personally; and
 - 3.15.5 not name an individual Registrant or offer their own Psychological Services through the media, although may refer listeners or readers to a community agency for assistance in obtaining a referral for Psychological Services.

No False or Deceptive Statements

- 3.16 A Registrant must not make public statements that are false, deceptive, misleading, or fraudulent, because of what they state, convey, or suggest, or because of what they omit, concerning their research, practice, or other work activities or that of persons or organizations with which they are affiliated. As examples, and without limiting this standard, a Registrant must not make false or deceptive statements concerning their:
- 3.16.1 training, experience, or competence;
 - 3.16.2 academic degrees and credentials;
 - 3.16.3 institutional or associational affiliations;
 - 3.16.4 fees;
 - 3.16.5 scientific or clinical basis for, or results or degree of success of, their Psychological Services; or
 - 3.16.6 publications or research findings.

No Unauthorized Use of College Logo

- 3.17 Registrants are not permitted to use a College logo in any public statements or advertising without the written permission of the Registrar.

Use of Restricted Title in Company or Business Name

- 3.18 A Registrant who includes as part of the name of a company, or other business owned directly or indirectly, in whole or in part by the Registrant either a reserved title, or another title, description or words incorporating the word "psychology," "psychological," or "psychologist," or otherwise implying training, experience, or expertise as a psychologist, must ensure that:
- 3.18.1 all of the services offered by the company or business fall within the services described in the definition of "psychology" as set out in the Regulation;
 - 3.18.2 all of the services offered by the company or business are provided directly by, or supervised by, a Registrant who is authorized to provide those services;
 - 3.18.3 the company or business name does not use a reserved title in a manner contrary to the best interests of the public or to the maintenance of the high standards of the profession of psychology;
 - 3.18.4 the company or business name does not assert or imply a fact that is false, inaccurate, unverifiable, or misleading;
 - 3.18.5 the company or business name is unlikely to create an unjustified expectation of the results which can be achieved;
 - 3.18.6 the company or business name does not compare the quality of services provided with those provided by another professional;
 - 3.18.7 one or more responsible Registrants' names are prominently displayed whenever and wherever the company or business name is used for advertising or promotional purposes or for otherwise communicating with members of the public (if the company or business name does not itself include the surname of one or more responsible Registrants); and
 - 3.18.8 the College is advised immediately if any of the above conditions are no longer met, and, if so, such action is taken as may be directed by the College, including changing the company or business name if so directed.

Requirements for Credential Presentation

- 3.19 Registrants are not restricted from appropriately communicating their training and credentials to Clients or prospective Clients, but must do so in a fashion that avoids any possibility of the public misperceiving they have been granted specialty designation or qualification by the College. A registrant must comply with the following requirements when: (1) representing themselves as a Registrant; (2) describing their practice (including when the Registrant engages in any of the activities contemplated under paragraph 10.7 of the Code of Conduct [*Public statements*]) or (3) being named in a group or multi-disciplinary practice:

- 3.19.1 the Registrant's name and title must be clearly indicated and, where directed by the Registrar at their sole discretion, must designate where applicable that the Registrant has restrictions, limitations, or conditions on their registration.
- 3.19.2 the Registrant must place immediately before the professional title only the highest academic degree upon which the Registrant's registration with the College is based. Where the Registrant has been registered as a Psychologist on the basis of a doctoral degree, the prefix Doctor or its abbreviation Dr. may be used, but not both the degree and prefix.
- 3.19.3 a Registrant may specify other degrees or professional titles, such as MBA, only if the area of study is relevant to the Registrant's psychological practice. The area of study must also be specified unless readily apparent from the degree or title.
- 3.19.4 a Registrant may describe themselves as a "Registrant of the College of Health and Care Professionals of British Columbia".
- 3.19.5 unless specifically authorized or required, a Registrant must list their title without any modifier that suggests a specialty. "Practice in", "Practice restricted to" or other introductions to the modification of the area of psychological service are acceptable. Only modifiers assigned to a Registrant by the College are permitted adjacent to the title Psychologist or adjacent to the designation R. Psych., and any modifiers so assigned by the College must be used by the Registrant.
- 3.19.6 applicants for registration or Registrants awaiting the awarding of a degree must not describe themselves as "candidate for registration" or "candidate for degree", respectively.
- 3.19.7 a determination of equivalence by an external credentialing agency must not be represented, listed, or otherwise used in a manner to suggest that one has actually obtained that credential.

4.0 Record-Keeping

Notification of Change of Registration Information [previously bylaw 55.3(2)]

- 4.1 A Registrant must immediately notify the Registrar of any change of name, address, telephone number, e-mail address, or any other information under section 21(2) of the Act.

Length of Practice Record Retention

- 4.2 A Registrant must ensure that all information in their Practice Records professional concerning a Client is maintained for not less than seven years after the last date that Professional Services were rendered to that Client.

Minors' Practice Records

- 4.3 A Registrant must keep Practice Records relating to minors for not less than seven years following the date the minor reached the age of majority.

Legal Requirements

- 4.4 A Registrant must comply with all legal requirements for Practice Record retention, including maintaining Practice Records for a longer period than that required in paragraphs 4.2 and 4.3 where legally required to do so.

Discretion to Keep Longer

- 4.5 A Registrant must use their judgment in those circumstances in which it may be appropriate to maintain their professional Practice Records for longer than seven years.

Records of Equipment Maintenance

- 4.6 A Registrant must keep a record of equipment maintenance for all equipment that, if malfunctioning when used to examine, treat, or render any service to Clients, could cause physical harm to a Client.

Content of Practice Records

- 4.7 A Registrant rendering Professional Services to a Client or billing a third party for Professional Services must maintain Practice Records that include the following:
- 4.7.1 the name of the Client and other identifying information;
 - 4.7.2 the presenting problem(s) or the purpose of the consultation;
 - 4.7.3 the fee arrangement;
 - 4.7.4 the date and substance of each Professional Service, including relevant information on interventions, progress, any issues of informed Consent, and issues related to termination;
 - 4.7.5 any Test Results or other evaluative results obtained and any basic test data from which the results were derived;
 - 4.7.6 a copy of all assessment or other evaluative reports prepared as part of the Professional Relationship;
 - 4.7.7 notations and any results of formal consultations with other service providers;
 - 4.7.8 any releases or consents executed by the Client;
 - 4.7.9 copies of any emails or other communications related to the file; and

- 4.7.10 a copy of all documents relied upon in the course of providing Psychological Services, including but not limited to reports, evaluations, and Test Results generated by other health professionals.

Complete and Legible Practice Records

- 4.8 A Registrant must ensure that the information in the Practice Records under the Registrant's control, required in paragraph 4.7, is complete and accessible, regardless of whether the Practice Records are kept in a single file or in several files, housed at one location or at several locations, and regardless of the storage medium (e.g., paper, electronic, combination of paper and electronic).
- 4.9 A Registrant must, with respect to all Practice Records created by or under the supervision of the Registrant:
- 4.9.1 keep all Practice Records legible;
 - 4.9.2 if a Practice Record is illegible or in a language other than English and if requested to do so, provide a transcript or translation of the Practice Record, and an attestation by the Registrant verifying the accuracy of the transcript or translation, when the Practice Record is to be copied or transferred as part of a legitimate request by the College, a Client, or another person;
 - 4.9.3 if providing paper copies of electronically or otherwise stored documents, include a signed attestation confirming the paper copies are accurate copies of the original information;
 - 4.9.4 initial and date all entries in a clinical Practice Record;
 - 4.9.5 initial and date any amendments or alterations to a clinical Practice Record;
 - 4.9.6 where Practice Records contain any idiosyncratic or non-standard abbreviations, provide, at the beginning or end of the Practice Record, a glossary for the meanings of the non-standard abbreviations;
 - 4.9.7 paginate a Practice Record at the point the Practice Record is provided to another person; and
 - 4.9.8 organize the Practice Record in a clear and understandable manner, including by date and/or chronology, as appropriate, and without unnecessary duplication.

Supervisory Records

- 4.10 A Registrant must maintain records regarding the supervision of an individual for a minimum of seven years after the last date the Registrant provided supervisory services related to that individual.

Content of Supervisory Records

- 4.11 A Registrant must maintain records of supervised sessions that include, among other information, the type, place, and general content of the session, including any directions given to the Supervisee. A Registrant must also maintain in a Supervisee's record copies of any evaluations or other communications, written or otherwise, provided to others regarding the Supervisee.

Record of Fees

- 4.12 A Registrant must maintain a record of fees charged to and received from a Client or third party payer, and make it available to a Client or third party payer upon request. The record must contain the following information:
- 4.12.1 the service provider;
 - 4.12.2 the recipient of the Professional Services;
 - 4.12.3 the date, nature, and unit fee of the service provided;
 - 4.12.4 the total charged;
 - 4.12.5 the payment received;
 - 4.12.6 the date and source of payment; and
 - 4.12.7 any other information that the Client may need to obtain insurance reimbursement, such as diagnostic codes, length of session, etc.

No Basis for Disposing of Practice Record

- 4.13 Financial expense or other inconvenience is specifically not sufficient grounds for failing to keep copies of all documents referred to in paragraph 4.7, including reports and other documents from other professionals that were relied upon in providing one's service or opinion.

Documents Held in an Institution

- 4.14 In the event a Registrant is prevented by legal or contractual circumstances from keeping copies of documents which they relied upon and the documents are held by an institution, the Registrant must document in the retained portion of the Practice Record the location of the missing foundational records, and must treat the documents as institutional Practice Records for purposes of advising the College of all of their Practice Record locations.

SECURITY AND ACCESS TO RECORDS

Location of Practice Record

- 4.15 Practice Records must be maintained or stored at the Registrant's primary place of practice, in another location under the sole control of the Registrant, under the control of another appointed Registrant, or in a professional storage facility obligated to provide confidential and secure storage.

Security of Practice Record

- 4.16 A Registrant must ensure that:
- 4.16.1 the Practice Records of all their Professional Services, including those of their Supervisees, are secured, including but not limited to by restricting access to files, locking file cabinets, and providing secure storage for files;
 - 4.16.2 the privacy of all Client information and data is assured; and
 - 4.16.3 if a professional storage facility is used, it maintains appropriate security practices.

Electronic/Optical Storage Security

- 4.17 When information that is required to be prepared, kept, or maintained under this Schedule or the Code of Conduct is prepared, kept, or maintained by electronic or optical techniques, a Registrant must ensure that these techniques are designed and operated so that the information is reasonably secure from loss, tampering, interference, or unauthorized use or access. A Registrant must also take all reasonable steps to ensure any electronic/optical storage is updated as necessary to ensure the information remains accessible if previous storage strategies become obsolete.

Handling Confidential Records

- 4.18 A Registrant must maintain the confidentiality of all Practice Records under their control in whatever form they are maintained and at all times, including while they are being created, stored, disposed of, accessed, or transferred.

Copying of Documents

- 4.19 Registrants who have determined that they must produce all or any part of their Practice Record in response to a request or order must, if the circumstances permit, provide a copy of their Practice Records rather than the original. Any fees set for copying and releasing Practice Records must be set consistently with the requirements of Section 12.0 of the Code of

Conduct. A Registrant may contract for off-site professional copying services provided those services are, at a minimum:

- 4.19.1 Confidential - The employees are bound by a confidentiality agreement;
- 4.19.2 Secure - Confidential documents are kept secure and separate from the rest of the printing operations; any waste from the copying is retained and shredded; and
- 4.19.3 Accurate and legible - Services include a 100% quality control page-by-page check of copies against the original sets; services include a legibility check for difficult-to-copy items such as pencil notations; any perceived errors and omissions (e.g., missing pages) are recorded and reported back to the Registrant.

Contingency Planning for Clients and Practice Records

- 4.20 A Registrant must:
 - 4.20.1 be in compliance with the requirement to name a professional executor; and
 - 4.20.2 make plans in advance so that confidentiality of Practice Records and data is protected in the event of the Registrant's death, incapacity, or withdrawal from the position or practice. Such plans must include consideration of all Practice Record locations, including institutions and professional storage facilities, if any.

Transfer on Retirement

- 4.21 A Registrant may retire or withdraw from the Practice of Psychology but elect to remain on the College Register. In the event a Registrant leaves the College Register, they must ensure that:
 - 4.21.1 each client Practice Record for which they have primary responsibility is transferred to another Registrant whose identity is made known to the Client, the institution, or the project under whose auspices the Psychological Services were provided, or
 - 4.21.2 each Client for whom they have primary responsibility is notified in a timely fashion that the Registrant intends to resign and that the Client can obtain copies of the Client's own record or have copies provided to such person(s) as the Client may direct, subject to Standard 6.12 in the Code of Conduct.

Common Filing System

- 4.22 A Registrant employed in a multidisciplinary setting where a common filing system is used must:

- 4.22.1 exercise appropriate care when placing information in a common file in order to ensure that their opinions, reports, findings, and recommendations are not misunderstood by members of other disciplines;
- 4.22.2 work with their employer where appropriate to develop written policies and procedures that ensure the maintenance, storage, and access to all Practice Records and psychology files complies with both privacy legislation and with the Registrants' responsibilities under this Schedule and the Code of Conduct;
- 4.22.3 educate others in the workplace regarding the privacy and confidentiality obligations of psychologists with regard to psychology Practice Records under this Schedule and the Code of Conduct and under privacy legislation, and require some form of confidentiality agreement for others in the workplace who may come in contact with psychology Practice Records as appropriate;
- 4.22.4 establish written policies and procedures for handling, copying, and destroying psychology Practice Records, for protecting the confidentiality of psychology Practice Records, and for ensuring there is a succession plan (as set out in paragraph 4.22) in the event of the Registrant's death, incapacity, resignation, termination, or withdrawal from employment;
- 4.22.5 prior to seeing Clients, clarify if and how record-keeping policies and procedures of the publicly-funded or multidisciplinary setting impact on the confidentiality of Clients, and review this information with Clients as part of obtaining their informed Consent to provide services; and
- 4.22.6 assume responsibility for the appropriate management of any psychological tests being purchased under the name and qualifications of the Registrant, including by ensuring written policies and procedures exist for the storage and handling of these materials in accordance with contractual obligations to the test publisher, this Schedule, the Code of Conduct, and privacy legislation, ensuring that these policies and procedures take into account future changes in psychology staffing, and educating others in the workplace about the proper maintenance and storage of test materials and Test Results.

Coding of Database Information

- 4.23 If Confidential Information concerning Clients is to be entered into a database or system of record-keeping which is available to persons whose access has not been authorized by the Client, a Registrant must use coding or other techniques to avoid the inclusion of personal identifiers.

Research Protocol

- 4.24 If a research protocol approved by an institutional review board or similar body requires the inclusion of personal identifiers, a Registrant must ensure that those identifiers are deleted before the information is made accessible to persons other than those to whom the Client has authorized access.

Exception to Paragraph 4.24

- 4.25 If the deletion required in paragraph 4.24 is not feasible, a Registrant must take steps to determine that appropriate Consent of personally identifiable individuals has been obtained before:
- 4.25.1 the data is transferred to others; or
 - 4.25.2 they review the data collected by others.

Ownership of Practice Records

- 4.26 Recognizing that ownership of Practice Records and data is governed by legal principles, a Registrant must take reasonable and lawful steps to ensure that Practice Records and data remain available to the extent needed to serve the best interests of Clients, research participants, and appropriate others.

Schedule 17: Audiology, Hearing Instrument Dispensing, and Speech-Language Pathology: Professional Responsibilities

1.0 Definitions

1.1 In this Schedule:

"Advertisement" means the use of space or time in a public medium, or the use of a commercial publication such as a brochure or handbill, to communicate with the general public, or a segment thereof, for the purpose of promoting professional services or enhancing the image of the advertiser;

"Client" means a person who receives a service provided by a Registrant, and includes, if the context so requires, the parent or legal guardian of a child client, or the personal guardian or legal representative of an adult client;

"Communication Health Assistant" means a non-Registrant employed by a Registrant or a Registrant's employer to support the Registrant's clinical practice of Audiology, Hearing Instrument Dispensing, or Speech-Language Pathology;

"Conditional Registrant" means a Registrant in the Registrant classes of Audiology: Conditional, Hearing Instrument Dispensing: Conditional, and Speech-Language Pathology: Conditional;

"Full Registrant" means a Registrant in any of the Registrant classes of Audiology: Full, Hearing Instrument Dispensing: Full, and Speech-Language Pathology: Full;

"Marketing" includes:

- (a) an Advertisement;
- (b) any publication or communication in any medium with any Client, prospective Client or the public generally in the nature of an Advertisement, promotional activity or material, a listing in a directory, a public appearance or any other means by which professional services are promoted, including a business card, newspaper or internet advertising; and
- (c) contact with a prospective Client initiated by or under the direction of a Registrant;

"Non-Practising Registrant" means a Registrant in the Registrant classes of Audiology: Non-Practising, Hearing Instrument Dispensing: Non-Practising, and Speech-Language Pathology: Non-Practising;

"Regulation" means the *Speech and Hearing Health Professionals Regulation*, BC Reg. 413/2008;

“Supervision” means a situation in which a person’s practice is overseen by a qualified Registrant;

“Temporary Registrant” means a Registrant in the Registrant classes of Audiology: Temporary, Hearing Instrument Dispensing: Temporary, and Speech-Language Pathology: Temporary.

2.0 Standards of Practice and Standards of Professional Ethics

Standards of Ethics and Practice [previously Bylaw 150(3)]

- 2.1 A Registrant must take reasonable steps to ensure that other Registrants and non-Registrants who work with the Registrant in the practice of an Audiology, Hearing Instrument Dispensing, and/or Speech-Language Pathology, are aware of and act in accordance with the Standards of Practice for Registrants, so far as those Standards of Practice apply to them.

Proof of Registration [previously Bylaw 75]

- 2.2 A Full Registrant, Conditional Registrant, or Temporary Registrant must be able to provide proof of being a Registrant of the College and registered in the applicable class of registration, by one or more of the following:
- 2.2.1 displaying in a prominent location at the Registrant’s place of business to which the general public has access:
 - 2.2.1.1 a Confirmation of Registration obtained under Bylaw 6.28; and
 - 2.2.1.2 when applicable, the written confirmation of renewal most recently provided by the Registrar under Bylaw 6.31; and
 - 2.2.2 referring the public to the College website.
- 2.3 In relation to paragraph 2.2, if a Full Registrant, Conditional Registrant, or Temporary Registrant has more than one place of business, the Registrant must display:
- 2.3.1 the Confirmation of Registration and, when applicable, the most recent confirmation of renewal in the Registrant’s main place of business; and
 - 2.3.2 a copy of that Confirmation of Registration and confirmation of renewal in every place of business other than their main place of business.

Return of Confirmation of Registration [previously Bylaw 76]

- 2.4 A Registrant must immediately return to the Registrar a Confirmation of Registration or any photocopies of it, and any other proof of registration or renewal of registration issued by the

Registrar if the Registrant's registration has been suspended or cancelled under Part 3 of the Act.

Ability to Accept Delegations or Act Under Supervision [previously Bylaw 157]

- 2.5 A Registrant is entitled to undertake a restricted activity outside of the scope of practice of that Registrant's Audiology, Hearing Instrument Dispensing, and/or Speech-Language Pathology profession if such activity is authorized by and undertaken in accordance with the Bylaws of the College or another college established under the Act that has authority to regulate the activity in question.

Practice Limits and Conditions on Conditional Registrants [previously Bylaw 87(8)]

- 2.6 A Conditional Registrant must not:
- 2.6.1 practise an Audiology, Hearing Instrument Dispensing, and/or Speech-Language Pathology profession unless under the Supervision of a Full Registrant;
 - 2.6.2 supervise or delegate any aspect of practice of an Audiology, Hearing Instrument Dispensing and/or Speech-Language Pathology profession; or
 - 2.6.3 supervise individuals who are fulfilling the conditions or requirements for registration under the Bylaws.

Practice Limits and Conditions on Temporary Registrants [previously Bylaws 67(4) - 67(6)]

- 2.7 A Temporary Registrant must not practise an Audiology, Hearing Instrument Dispensing, and/or Speech-Language Pathology profession except as permitted under paragraph 2.8.
- 2.8 A Temporary Registrant may engage in aspects of the practice of Audiology, Hearing Instrument Dispensing, and/or Speech-Language Pathology only for the purposes and extent the Registration Committee specifies, and subject to any limits or conditions it determines.
- 2.9 The Registration Committee may consider, for the purposes of making decisions in relation to paragraph 2.8, the individual's competence to perform or demonstrate restricted activities under section 5 of the Regulation.

3.0 Advertising and Marketing [previously Bylaws 152-153]

- 3.1 A Registrant must not engage in or authorize Marketing of professional services that:
- 3.1.1 is false;
 - 3.1.2 contains material inaccuracies;
 - 3.1.3 is reasonably capable of confusing, deceiving or misleading a member of the public;

- 3.1.4 is likely to create in the mind of the recipient or intended recipient an unjustified expectation about the results that the Registrant can achieve;
 - 3.1.5 exploits or takes advantage of the public's physical or emotional states, or the public's lack of knowledge of professional subject matters;
 - 3.1.6 contains claims or assertions that cannot be verified by a member of the public acting as a reasonable consumer of professional services;
 - 3.1.7 uses comparative statements that include reference to fees, services, products or facilities;
 - 3.1.8 implies that the Registrant can obtain results:
 - 3.1.8.1 not achievable by another Registrant;
 - 3.1.8.2 by improperly influencing a public body or official, or any corporation, agency or person having any interest in the welfare of the recipient; or
 - 3.1.8.3 by any other improper means;
 - 3.1.9 compares the quality of services provided with those provided by:
 - 3.1.9.1 another Registrant;
 - 3.1.9.2 a person authorized to provide health care services under another enactment; or
 - 3.1.9.3 another health profession;
 - 3.1.10 tends to undermine the professionalism, ethics, integrity or dignity of an Audiology, Hearing Instrument Dispensing, and/or Speech-Language Pathology profession or otherwise brings one or more of the professions into disrepute; or
 - 3.1.11 is otherwise contrary to the public interest.
- 3.2 A Registrant who, in any Advertisement, includes a statement of fees for a specific service or product:
- 3.2.1 must ensure that the statement sufficiently describes the fees and services so as to enable the recipient or intended recipient to understand the nature and extent of the services or product to be provided and the cost to the Client; and
 - 3.2.2 must not in the Advertisement compare the fees or product prices charged by the Registrant with those charged by another Registrant.
- 3.3 A Registrant must retain for one year after the date of publication or broadcast of any Advertisement or brochure, and must provide to the Board upon request:
- 3.3.1 a copy of any such publication;

- 3.3.2 a recording of any such broadcast made by use of any electronic media, including radio, television and microwave transmission; and
 - 3.3.3 a written record of when and where the publication or broadcast was made.
- 3.4 It is the duty of the Registrant, when called upon by the Discipline Committee, Inquiry Committee, or the Board to do so, to verify the statements made in the Registrant's Marketing.

Internet Marketing

- 3.5 If a Registrant uses a website to market the Registrant's services, the home page of the Registrant's website must clearly show:
- 3.5.1 that the Registrant is licensed in British Columbia;
 - 3.5.2 the physical location of the Registrant's office or clinic;
 - 3.5.3 the Registrant's 10-digit office or clinic telephone number;
 - 3.5.4 the contact information for the College; and
 - 3.5.5 a notice to Clients that unresolved concerns they may have about the Registrant's practice may be reported to the College.

Permitted Practice Descriptions / Preferred Areas of Practice

- 3.6 In describing the Registrant's practice as a Registrant or as someone permitted to provide the services of a Registrant, a Registrant may list:
- 3.6.1 the services that the Registrant is trained in and is capable of providing;
 - 3.6.2 the techniques that the Registrant has been trained to provide; and
 - 3.6.3 the typical types of communication and related disorders that the Registrant is trained to diagnose, assess, treat, or prescribe.
- 3.7 In complying with paragraph 3.6, a Registrant:
- 3.7.1 may not list a service, technique or problem that falls outside the scope of practice of a Registrant, as described in the Regulation or as may otherwise be directed by the Board;
 - 3.7.2 may state that the listed service, technique or problem is a "preferred area of practice" using that or similar phrasing; and
 - 3.7.3 may not misrepresent any clinical expertise that the Registrant holds or has obtained.

Speaking on Behalf of the College / Professional Endorsements [previously Bylaw 158]

- 3.8 A Registrant must not:
- 3.8.1 state publicly that the Registrant speaks on behalf of the College, unless expressly authorized by the Board or Registrar to state the official position of the College; or
 - 3.8.2 use the Registrant's status as a professional to endorse the Advertisement of any property, investment, or service for sale to the public, unless such property, investment or service relates directly to an Audiology, Hearing Instrument Dispensing, and/or Speech-Language Pathology profession.

4.0 Record-Keeping *[previously Bylaw 163]*

- 4.1 A Registrant must:
- 4.1.1 ensure that personal information collected from Clients is current, legible, accurate and completely recorded;
 - 4.1.2 at all times protect and maintain the confidentiality of personal information collected from Clients;
 - 4.1.3 upon request, provide Clients, or the legal representatives of Clients, with access to their personal information in accordance with all relevant legal requirements; and
 - 4.1.4 ensure that all records from the Registrant's practice containing Client personal information are safely and securely stored, or disposed of, through the use of reasonable security arrangements against such risks as unauthorized access, collection, use, disclosure or disposal.
- 4.2 A Registrant must ensure that orderly and legible permanent Client records are kept for a period of not less than 16 years from the date of the last recorded entry or the date the Client reaches the age of majority, whichever is later, either in a systematic paper-based form, such as books, binders, file cards or folders, or using an electronic record-keeping system, provided the information stored on such a system can be reproduced promptly in printed form when required.
- 4.3 In accordance with such requirements as the Board may establish, a Registrant in private practice must:
- 4.3.1 prepare a plan for the disposition of any Client records that may remain in the Registrant's possession at the time the Registrant ceases to practice; and
 - 4.3.2 upon request, produce a copy of the plan to the Quality Assurance Committee or the Registrar.

Notification of Change of Registration Information [previously Bylaw 81]

- 4.4 A Registrant must immediately notify the Registrar of any change of name, address, phone number, email address, or any other registration information previously provided to the Registrar.

5.0 Delegation, Supervision and Authorization

Delegation to Non-Registrants [previously Bylaws 138-139]

- 5.1 A Registrant must not delegate an aspect of practice to a non-Registrant except in accordance with this heading and all applicable Standards of Practice and clinical decision support tools.
- 5.2 A Registrant may delegate to a non-Registrant an aspect of practice that does not include the performance of a restricted activity if the Registrant is satisfied the non-Registrant is competent to provide or perform that aspect of practice safely and in accordance with all applicable Standards of Practice and clinical decision support tools.
- 5.3 Subject to paragraphs 5.4, 5.5, and 5.6, a Registrant must not delegate to a non-Registrant an aspect of practice that includes the performance of a restricted activity.
- 5.4 A Registrant in the Registrant class of Audiology: Full may delegate to a Communication Health Assistant an aspect of practice that includes:
- 5.4.1 the performance of the restricted activity described in section 5(1)(c) of the Regulation, provided the performance of that restricted activity is not for the purposes of cerumen management; or
 - 5.4.2 the performance of the restricted activity described in 5(1)(e) of the Regulation.
- 5.5 A Registrant in the Registrant class of Hearing Instrument Dispensing: Full may delegate to a Communication Health Assistant an aspect of practice that includes the performance of the restricted activity described in section 5(2)(b) of the Regulation, provided the performance of that restricted activity is not for the purposes of cerumen management.
- 5.6 A Registrant in the Registrant class of Speech-Language Pathology: Full may delegate to a Communication Health Assistant an aspect of practice that includes the performance of the restricted activity described in section 5(3)(f) of the Regulation.
- 5.7 When delegating an aspect of practice that includes a restricted activity under paragraph 5.4, 5.5, or 5.6, a Registrant must:
- 5.7.1 be satisfied the Communication Health Assistant is competent to provide or perform the aspect of practice safely and in accordance with all applicable Standards of Practice and clinical decision support tools; and

- 5.7.2 provide the Communication Health Assistant with appropriate instructions specific to providing or performing the aspect of practice on the Client.
- 5.8 When a Registrant delegates an aspect of practice to a non-Registrant, the Registrant remains ultimately responsible for the quality of care provided by the non-Registrant.

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Schedule 18: Dietetics: Quality Assurance

1.0 Quality Assurance Program *[Bylaws 58-61]*

- 1.1 The Quality Assurance Program applies to Registrants in the Registrant class of Dietetics: Full and Applicants for reinstatement under headings 7.0 and 8.0 of Schedule 2 and is administered by the Quality Assurance Committee referred to in Bylaw 4.52.
- 1.2 The Quality Assurance Program consists of a continuing competence program and any other requirements approved by the Quality Assurance Committee, in accordance with criteria and guidelines established by the Committee and published from time to time.
- 1.3 The continuing competence program consists of three (3) components which must be completed annually in accordance with the process and timelines set out in the criteria and guidelines:
 - 1.3.1 completion of a self-assessment;
 - 1.3.2 completion of a professional development report; and
 - 1.3.3 assessment of compliance with subsections 1.3.1 and 1.3.2 by the Quality Assurance Committee or an assessor appointed by the Committee.

2.0 Random Audits

- 2.1 The Registrar must ensure that an audit of a random sample of professional development plans takes place each year, or at any other interval determined by the Quality Assurance Committee in accordance with the process and timelines set out in the criteria and guidelines, to verify compliance with the Standards of Practice and professional competence.

3.0 Assessment of Professional Performance

- 3.1 The Quality Assurance Committee or an assessor appointed by the Committee may assess the professional performance of a Registrant.

4.0 Notice of Inquiry Committee

- 4.1 If the Quality Assurance Committee is required to notify the Inquiry Committee of a matter in accordance with section 26.2(3) of the Act, it must deliver notice in writing to the Registrar.

Schedule 19: Occupational Therapy: Quality Assurance

1.0 Schedule Definitions

1.1 In this Schedule:

“Patient” means individuals, families and/or groups, agencies or organizations receiving care and/or services from a registered occupational therapist and includes a client or consumer.

2.0 Requirements for Registrants *[replaces previous Bylaws 56-59]*

2.1 Registrants in the Registrant classes of Occupational Therapy: Full, Occupational Therapy: Provisional and Applicants for registration and reinstatement must meet the requirements of the Quality Assurance Program.

2.2 Registrants required to meet the Quality Assurance Program must complete an annual continuing competence review as outlined in Table 1 to this Schedule.

2.3 Registrants who do not satisfactorily complete the continuing competence review:

2.3.1 must participate in an assessment of professional performance in accordance with heading 3.0 of this Schedule; and

2.3.2 are not eligible to renew their annual registration.

3.0 Assessment of Professional Performance

3.1 The Quality Assurance Committee or an assessor appointed by the Quality Assurance Committee may assess the professional performance of the Registrant.

3.2 A Registrant who is required to participate in a professional performance assessment under this heading must co-operate fully with the Committee and its assessors.

3.3 Professional performance assessment may include:

3.3.1 a review of specific or randomly selected Patient records including billing records of the Registrant that are related to professional performance;

3.3.2 an on-site assessment of the Registrant’s practice;

3.3.3 an assessment of the premises where the Registrant engages in the practice of occupational therapy; and

3.3.4 the collection of information from a Registrant’s peers, co-workers, or Patients for the purposes of obtaining feedback about the Registrant’s professional performance.

Table 1: Annual Continuing Competence Review

Each year, Registrants must complete and submit to the College the annual continuing competence review as follows:

- 1) self-report inventory of their current practice to identify risks and supports to continuing competence, including:
 - i. currency hours;
 - ii. roles;
 - iii. transitions; and
 - iv. professional development opportunities or gaps;
- 2) case-base written test focused on professional standards; and/or
- 3) annual prescribed learning module; and
- 4) complete risk tool on practice scenario.

Schedule 20: Opticianry: Quality Assurance

1.0 Quality Assurance Program *[Bylaws 53]*

- 1.1 The Quality Assurance Program applies to Registrants in the Registrants classes of Opticianry: Registered Optician, Opticianry: Registered Contact Lens Fitter, Opticianry: Non-Practicing, and Applicants for reinstatement under headings 7.0 and 8.0 of Schedule 4 and is administered by the Quality Assurance Committee.
- 1.2 The Quality Assurance Program consists of a continuing competency program and any other requirements approved by the Quality Assurance Committee, in accordance with criteria and guidelines established by the Committee and published from time to time.
- 1.3 The continuing competency program consists of components that must be completed within a three-year cycle in accordance with the process and timelines set out in the criteria and guidelines:
 - 1.3.1 completion of a continuing competency assessment; and
 - 1.3.2 completion of a professional development plan.
- 1.4 The Quality Assurance Committee must establish policies for the application of the continuing competency program including criteria to determine when a continuing competency program cycle begins for a Registrant in this Schedule.
- 1.5 In accordance with the Human Rights Code or as otherwise required by law, or by the Quality Assurance Committee policies, the Quality Assurance Committee or, if authorized by the Quality Assurance Committee, the Registrar may:
 - 1.5.1 extend the continuing competency program cycle of a Registrant; or
 - 1.5.2 modify a Quality Assurance Program requirement to be met by a Registrant.
- 1.6 If a Registrant does not fulfill the terms of the extension provided under paragraph 1.5.1 then the Registrant has not met the continuing education requirements in this Schedule.
- 1.7 Registrants are not entitled to renew their registration unless they have completed the criteria requirements under paragraph 1.3.
- 1.8 The Quality Assurance Committee or an assessor appointed by the Quality Assurance Committee may:
 - 1.8.1 audit the continuing competency program criteria applied by a Registrant toward satisfaction of a continuing education requirement in this Schedule; and

- 1.8.2 further to an audit under subparagraph 1.8.1, require the Registrant to provide evidence that they meet the criteria under paragraph 1.3.
- 1.9 If, following an audit under subparagraph 1.8.1, the Quality Assurance Committee, or an assessor appointed by the Quality Assurance Committee determines a Registrant does not meet the criteria under paragraph 1.3, the Quality Assurance Committee or assessor appointed by the Quality Assurance Committee may do one or both of the following, as applicable:
- 1.9.1 work with the Registrant to resolve any deficiency in the criteria under paragraph 1.3; and/or
- 1.9.2 notify the Inquiry Committee under section 26.2 of the Act.

Schedule 21: Optometry: Quality Assurance

1.0 Schedule Definitions

1.1 In this Schedule:

“**Full Registrant**” means:

- (a) a Registrant in the Registrant class of Optometry: Therapeutic Qualified established by Bylaw 6.4(a);
- (b) a Registrant in the Registrant class of Optometry: Non-Therapeutic Qualified established by Bylaw 6.4(b); or
- (c) a Registrant in the Registrant class of Optometry: Limited established by Bylaw 6.4(c);

“**Professional Competence**” means the ability to perform an optometric examination, diagnosis, and disposition of a patient in the manner and with the skill ordinarily expected of optometrists in British Columbia.

2.0 Quality Assurance Program *[Bylaws 71-74]*

- 2.1 Registrants must fulfil the requirements of the Quality Assurance Program established by this Schedule.
- 2.2 The Quality Assurance Program consists of any continuing education courses and any other requirements approved by the Quality Assurance Committee.
- 2.3 The Quality Assurance Committee may approve different courses and requirements for different classes of registration.

3.0 Assessing Professional Performance

- 3.1 The Quality Assurance Committee or an assessor appointed by the Committee may assess the professional performance of a Registrant, including assessment of a Registrant’s clinical ability, record-keeping and place of practice.
- 3.2 If the Quality Assurance Committee is required to notify the Inquiry Committee pursuant to section 26.2(3) of the Act, the Quality Assurance Committee must deliver notice in writing with a copy to the Registrar.

4.0 Continuing Education Requirements

- 4.1 Full Registrants and Registrants in the Registrant class of Optometry: Non-Practising must each year complete the minimum number of continuing education program hours specified by the Quality Assurance Committee.
- 4.2 No more than 50% of the minimum number of continuing education program hours referred to in paragraph 4.1 may be on subjects other than ocular health.
- 4.3 Full Registrants must complete a CPR certification course at least once every three years and must hold a certification that is no more than three years old when renewing their registration under heading 8.0 of Schedule 5 [*Registration Renewal*].

5.0 Standards and Competence Audits

- 5.1 The Registrar must ensure that an audit of a sample of Registrants is conducted annually, or at any other interval determined by the Quality Assurance Committee, to verify compliance with the Bylaws and policies of the College concerning standards of practice and Professional Competence.
- 5.2 Registrants must comply and cooperate with audits conducted under this section.

Schedule 22: Physical Therapy: Quality Assurance

1.0 Schedule Definitions

1.1 In this Schedule:

“Annual Self-Report” means a report consisting of questions to identify potential risks and supports to competence and may include evaluation of regulatory knowledge;

“Assessment of Professional Performance” means the assessment of a Registrant’s professional practice, using methods approved by the Board, by an assessor appointed by the Quality Assurance Committee;

“Patient” means a client or consumer who is a recipient of physical therapy services;

“Registrant Practice Support” means a remediation component of the Quality Assurance Program.

2.0 Requirements for Registrants in the Registrant class of Physical Therapy: Full

[Bylaws 53-58]

2.1 Registrants in the Registrant class of Physical Therapy: Full must meet all requirements of the Quality Assurance Program as determined by the Quality Assurance Committee.

3.0 Components of the Quality Assurance Program

3.1 The components of the Quality Assurance Program are:

- 3.1.1 an Annual Self-Report;
- 3.1.2 an Assessment of Professional Performance; and
- 3.1.3 Registrant Practice Support.

4.0 Requirements of the Annual Self-Report

4.1 Registrants in the Registrant class of Physical Therapy: Full must complete the Annual Self-Report each year.

5.0 Assessment of Professional Performance

5.1 During an Assessment of Professional Performance, the Quality Assurance Committee or an assessor(s) appointed by it may do one or more of the following:

- 5.1.1 observe the professional performance of a Registrant; and/or

- 5.1.2 assess the Registrant using other methods, which may include but are not limited to:
 - 5.1.2.1 reviewing specific or randomly selected clinical and billing records related to professional performance;
 - 5.1.2.2 interviewing the Registrant;
 - 5.1.2.3 requiring the Registrant to complete a case presentation or written report on a topic related to professional performance; and
 - 5.1.2.4 collecting information in any form from the Registrant.
- 5.2 An assessor must not observe a Registrant while the Registrant is providing a service to a Patient unless:
 - 5.2.1 the consent of the Patient being treated has been obtained in advance; or
 - 5.2.2 the service is being provided in a setting that is not private.
- 5.3 A Registrant who is required to participate in an Assessment of Professional Performance must co-operate fully with the Quality Assurance Committee and its assessor.

6.0 Practice Support

- 6.1 Where an Assessment of Professional Performance identifies deficiencies in a Registrant's practice, they will receive recommendations from the Quality Assurance Committee to complete further education, training, and/or other remediation to address the deficiencies.

Schedule 23: Psychology: Quality Assurance

1.0 Continuing Competence *[Bylaws 55.4-55.5]*

- 1.1 Registrants must satisfy all applicable requirements of any continuing competency program approved by the Quality Assurance Committee for a calendar year, and any other applicable requirements of the College's Quality Assurance Program under this Schedule.
- 1.2 The Quality Assurance Committee may monitor compliance with continuing competency requirements or other requirements of the College's Quality Assurance Program under this Schedule by conducting random audits of Registrants by mail or by using another method approved by the Quality Assurance Committee.

2.0 Practice Assessments

- 2.1 The Quality Assurance Committee may select a group of Registrants or require an Applicant for reinstatement to complete a practice assessment according to the process and timelines set out in the practice assessment program approved by the Quality Assurance Committee.
- 2.2 A Registrant or Applicant required to complete a practice assessment under paragraph 2.1 may choose an assessment option from a list described in the practice assessment program documentation approved by the Quality Assurance Committee.
- 2.3 A Registrant or Applicant required to complete a practice assessment under paragraph 2.1 may apply to the Quality Assurance Committee for deferral of the Registrant's or Applicant's participation in the practice assessment program for not more than one year after the date of notification of selection, if the Registrant or Applicant has a medical condition that prevents the Registrant or Applicant from providing services included in the practice of psychology, and provides proof of that condition in a form acceptable to the Quality Assurance Committee.
- 2.4 A Registrant or Applicant for reinstatement who fails to successfully complete a practice assessment required by the Quality Assurance Committee under this heading must complete an individualized remediation plan approved by the Quality Assurance Committee, and is responsible for any expenses incurred by the College, and for their own expenses, in respect of the remediation plan.
- 2.5 A Registrant or Applicant required to complete a practice assessment under this heading including a Registrant completing an individualized remediation plan, must complete the practice assessment process within the time specified by the Quality Assurance Committee.

Schedule 24: Audiology, Hearing Instrument Dispensing and Speech-Language Pathology: Quality Assurance

1.0 Definitions

1.1 In this Schedule:

“Conditional Registrant” means a Registrant in the Registrant classes of Audiology: Conditional, Hearing Instrument Dispensing: Conditional, and Speech-Language Pathology: Conditional;

“Full Registrant” means a Registrant in any of the Registrant classes of Audiology: Full, Hearing Instrument Dispensing: Full, and Speech-Language Pathology: Full;

“Non-Practising Registrant” means a Registrant in the Registrant classes of Audiology: Non-Practising, Hearing Instrument Dispensing: Non-Practising, and Speech-Language Pathology: Non-Practising.

2.0 Continuing Competency Credits *[Bylaws 159-162]*

2.1 Subject to paragraph 2.2, a Full Registrant, Conditional Registrant or Non-Practising Registrant must:

2.1.1 complete within a 3-year cycle not less than 45 continuing competency credits approved by the Quality Assurance Committee; and

2.1.2 report to the Committee the completion of the continuing competency credits required under subparagraph 2.1.1:

2.1.2.1 by December 31 in the last year of the 3-year cycle; and

2.1.2.2 in accordance with the reporting procedures approved by the Committee.

2.2 When a Registrant is registered in more than one profession as a Full Registrant, Conditional Registrant, or Non-Practising Registrant, in addition to completing and reporting for one profession the continuing competency credits as required under paragraph 2.1, the Registrant must also, for each other profession in which the Registrant is registered:

2.2.1 complete within the same 3-year cycle not less than 15 continuing competency credits approved by the Quality Assurance Committee; and

2.2.2 in accordance with subparagraph 2.1.2, report to the Committee the completion of the continuing competency credits required under subparagraph 2.2.1.

- 2.3 If a Registrant fails to complete and report the required continuing competency credits required under paragraphs 2.1 and 2.2 by the deadline specified in subparagraph 2.1.2.1, the Registrant must submit a deficiency plan under heading 5.0 of this Schedule.
- 2.4 A Registrant must retain documents or other information that supports the continuing competency credits reported under paragraphs 2.1 and 2.2 or further to a deficiency plan.
- 2.5 The Quality Assurance Committee may, without notice to a Registrant, audit the Registrant to ensure the accuracy and truthfulness of the continuing competency credits reported under paragraphs 2.1 and 2.2 or further to a deficiency plan.
- 2.6 If the Quality Assurance Committee finds a Registrant inaccurately or falsely reported continuing competency credits under paragraphs 2.1 and 2.2 or further to a deficiency plan, the Committee may do one or both of the following:
- 2.6.1 seek to resolve with the Registrant a resulting deficiency in credits; and/or
 - 2.6.2 report that finding to the Inquiry Committee under section 26.2 of the Act.

3.0 Assessment of Professional Performance

- 3.1 The Quality Assurance Committee or an assessor appointed by the Committee under section 26.1(4) of the Act may assess the professional performance of Registrants, including the provision of services authorized by a certified practice certificate, and for that purpose may:
- 3.1.1 assess the clinical ability of a Registrant;
 - 3.1.2 either individually or as part of an audit of a group of Registrants, collect information from a Registrant about the Registrant's professional practice; and
 - 3.1.3 establish remedial procedures to assist a Registrant in identifying and correcting deficiencies in the Registrant's clinical abilities or place of practice.
- 3.2 Upon receiving a request for practice information under paragraph 3.1, a Registrant must respond to the Quality Assurance Committee within 30 days in the manner and with the information requested.
- 3.3 The Quality Assurance Committee or an assessor appointed by the Committee under section 26.1(4) of the Act must not observe a Registrant while the Registrant is providing a service to a client except if:
- 3.3.1 the consent of the client being treated has been obtained in advance; or
 - 3.3.2 the service is being provided in a public setting.

3.4 Where the Quality Assurance Committee is required to notify the Inquiry Committee of a matter under section 26.2(3) of the Act, it must deliver notice in writing to the Registrar.

4.0 Practice Hours Requirement

4.1 Subject to paragraph 4.2, a Full Registrant must:

4.1.1 within a 3-year cycle, practise a minimum of 750 hours in a profession in which the Full Registrant is registered, either in British Columbia or in another regulated jurisdiction; and

4.1.2 by December 31 in the last year of a 3-year cycle, report the practice of the required hours to the Quality Assurance Committee in accordance with the reporting procedures approved by the Committee.

4.2 When a Registrant is registered as a Full Registrant in more than one profession, in addition to completing and reporting the hours for one profession as required under paragraph 4.1, the Registrant must also:

4.2.1 within the same 3-year cycle, practise a minimum of 250 hours in each other profession, either in British Columbia or another regulated jurisdiction; and

4.2.2 report the practice of the hours required under subparagraph 4.2.1 to the Quality Assurance Committee in accordance with subparagraph 4.1.2.

4.3 A Full Registrant must complete the hours required under paragraph 4.1 and, if applicable, paragraph 4.2 even if the Full Registrant was a Non-Practicing Registrant for some portion of a 3-year cycle.

4.4 If a Full Registrant fails to complete and report the hours required under paragraph 4.1 and, if applicable, paragraph 4.2 by the deadline specified in paragraph 4.1, the Registrant must submit a deficiency plan under heading 5.0 of this Schedule.

4.5 A Registrant must retain documents or other information that supports the practice hours reported under paragraphs 4.1 and 4.2 or further to a deficiency plan.

4.6 The Quality Assurance Committee may, without notice to a Registrant, audit the Registrant to ensure the accuracy and truthfulness of the practice hours reported under paragraphs 4.1 and 4.2 or further to a deficiency plan.

4.7 If the Quality Assurance Committee finds a Registrant inaccuracy or falsely reported practice hours under paragraphs 4.1 and 4.2 or further to a deficiency plan, the Committee may do one or both of the following:

4.7.1 seek to resolve a deficiency in practice hours by negotiation with the Registrant; and

4.7.2 report that finding to the Inquiry Committee under section 26.2 of the Act.

5.0 Deficiency Plans

- 5.1 If a Registrant is required to submit a deficiency plan under paragraph 2.3 or 4.4, the Registrant must, on or before the March 31 immediately following the deadline specified in subparagraphs 2.1.2 and 4.1.2:
- 5.1.1 submit the plan in the form and manner specified by the Quality Assurance Committee;
 - 5.1.2 pay the deficiency plan Fee specified in Schedule 1; and
 - 5.1.3 obtain approval of the plan from the Quality Assurance Committee.
- 5.2 Despite subparagraph 5.1.2, a Registrant who is required to submit a deficiency plan under paragraph 2.3 or 4.4, does not have to pay the deficiency plan Fee if the plan is submitted on or before the February 15 immediately following the deadline specified in subparagraphs 2.1.2 and 4.1.2.

Schedule 25: Tariff of Costs – Investigations

1.0 Components of a Costs Award

- 1.1 The total costs that may be ordered or awarded to the College against a Registrant under section 33(7) or 37.1(c) of the Act consist of:
- 1.1.1 costs as provided for in the chart at paragraph 3.4;
 - 1.1.2 all reasonable and necessary disbursements at their actual cost; and
 - 1.1.3 any photocopying costs incurred at the rate of \$0.35 per page.

2.0 Timing to Which a Costs Award Applies

- 2.1 The calculation of an award of costs may include all costs set out in paragraph 1.1 incurred from the time the matter is initiated under section 32(1), 32.2, 32.3, 32.4, or 33(4) of the Act until:
- 2.1.1 if the Inquiry Committee decides to act under section 33(6)(b) of the Act, the time at which the action taken under section 33(6)(b) of the Act is complete;
 - 2.1.2 if the Inquiry Committee decides to act section 36 of the Act, the time at which the request is accepted by the Registrant;
 - 2.1.3 if the Inquiry Committee decides to act under section 33(6)(d) of the Act and there is no resolution under section 37.1 of the Act, the time at which the direction is given under section 33(6)(d) of the Act; or
 - 2.1.4 if the Inquiry Committee decides to act under section 33(6)(d) of the Act and there is a resolution under section 37.1 of the Act, the time at which the successful proposal is submitted to the Inquiry Committee.

3.0 Units Under this Tariff

- 3.1 The value of a unit under this tariff is \$150.
- 3.2 Where this tariff provides for a range of allowable units for an item, the Inquiry Committee may assess any number within that range, and, in deciding on the appropriate number of units to assess:
- 3.2.1 must take into account the concept that the minimum number of units is meant for matters which are quicker and less complex, and the maximum number of units is meant for matters which are lengthier and more complex; and

3.2.2 may consider any impact that the Registrant’s level of cooperation had on the length and complexity of the investigation.

3.3 Where this tariff provides a number of units per day, but the time spent during a day is three hours or less, only half the number of units per day may be allowed for that day.

3.4 The number of units allowable under this Tariff is set out in the chart below:

<u>Item</u>	<u>Event</u>	<u>Units allowable</u>
1	Investigations, correspondence, conferences, or instructions relating to an investigation for which provision is not made elsewhere in this tariff	1 - 25
2	All processes for obtaining disclosure and inspection of documents for which provision is not made elsewhere in this tariff	1 - 10
3	Instructions to an inspector	1 - 5
4	All processes related to an application under section 29 of the Act	1 - 20
5	All processes related to extraordinary action under section 35 of the Act	1 - 10
6	Preparation for attendance before the Inquiry Committee (per day of attendance)	5
7	Attendance before the Inquiry Committee (per day)	10
8	All processes relating to drafting and finalizing undertakings and consents under section 36 or section 37.1 of the Act	1 - 10
9	All processes relating to drafting and finalizing undertakings and consents under section 37.1 of the Act	1 - 10

Schedule 26: Tariff of Costs – Hearings

1.0 Components of a Costs Award

- 1.1 The total costs that may be ordered or awarded under sections 37.1(d), 37.1(5), 39(4) or 39(5) of the Act consist of:
- 1.1.1 costs as provided for in the chart at paragraph 2.4;
 - 1.1.2 all reasonable and necessary disbursements at their actual cost; and
 - 1.1.3 any photocopying costs incurred at the rate of \$0.35 per page.

2.0 Units Under this Tariff

- 2.1 The value of a unit under this tariff is \$150.
- 2.2 Where this tariff provides for a range of allowable units for an item, the Inquiry Committee or Discipline Committee, as applicable, may assess any number within that range, and, in deciding on the appropriate number of units to assess:
- 2.2.1 must take into account the concept that the minimum number of units is meant for matters which are quicker and less complex, and the maximum number of units is meant for matters which are lengthier and more complex; and
 - 2.2.2 may consider any impact that a party's conduct had on lengthening or shortening the proceeding, including the timing and content of any admissions or agreements.
- 2.3 Where this tariff provides a number of units per day, but the time spent during a day is three hours or less, only half the number of units per day may be allowed for that day.
- 2.4 The number of units allowable under this Tariff is set out in the chart below:

<u>Item</u>	<u>Event</u>	<u>Units allowable</u>
1	Investigations, correspondence, conferences, instructions or negotiations relating for which provision is not made elsewhere in this tariff	1 - 25
2	Preparation and delivery of the citation and any amendment to it or any particulars of it	1 - 20
3	All process for providing and obtaining disclosure of records, excluding summaries of witness evidence	1 - 20

4	All process and communication associated with contacting, interviewing and issuing summons to non-expert witness, per witness	1 - 10
5	All process and communication associated with contacting, interviewing and consulting expert witnesses, per witness	1 - 10
6	Providing and obtaining summaries of anticipated evidence, per witness	1
7	Attendance at a pre-hearing conference, including preparation for the conference not otherwise provided for in this tariff	5
8	Attendance at a contested pre-hearing application before the Discipline Committee, including preparation for the application not otherwise provided for in this tariff, per day	10
9	Written submissions for a contested pre-hearing application, where no attendance required	1 - 15
10	Preparation of affidavit, per affidavit	1 - 10
11	All process for making or obtaining admissions	1 - 10
12	Preparation for attendance at a hearing before the Discipline Committee, per day of attendance	5
13	Attendance at a hearing before the Discipline Committee, per day	10
14	Written submissions regarding determinations under section 39(1) of the Act	1 - 20
15	Written submissions regarding appropriate order(s) under section 39(2) of the Act	1 - 20
16	Written submissions regarding the amount of costs, if not by consent	5 - 10