

# Chronicle

NEWS AND INFORMATION FROM THE COLLEGE OF PSYCHOLOGISTS

Volume 5 • Number 3 • Fall 2003

## Report from the Chair

I welcome this opportunity to update fellow registrants on a number of important issues currently before the Board of Directors of the College.

Before I do that I would like to say thank you to the registrants who took the time to respond to my last letter. It was great communicating with so many of you. Most of the feedback was very positive and registrants expressed gratitude at being told the "cold hard facts". I also appreciate the constructive criticism and have taken it to heart.

One of the "truths" we are facing is that the average age of our registrants is increasing to a point where over the next five to ten years will likely see an increasing number of registrants retiring from practice. This has direct implications for fees. At the same time, we are aware that the government intends to implement the recommendations of the Health Professions Council to remove the existing exemptions. As you know, under the provisions of the Psychologists Regulation under the *Health Professions Act*, individuals working in schools, universities and government agencies may use the title psychologist, even though they are not registered with the College. If the exemptions are removed, a significant

number of individuals will have to seek registration with the College if they wish to continue as psychology practitioners. Then it is quite likely that the government will expect the College to find a reasonable means of facilitating this process. We have experienced a brief "trial run" with these issues during the recent "extraordinary application period" during which accommodations were made to individuals who were not eligible to become registered prior to the new registration category of Psychological Associate. Registrants will be kept informed of new developments on this important issue.

Another of the recommendations of the Health Professions Council is that registrants be granted the reserved action of diagnosis. The College is preparing a new submission on this issue, clearly in support of this recommendation as well as in its proper extension to psychological testing.

We are very pleased at our continued success in negotiating voluntary agreements to resolve complaints. At the same time, the Board has been advised that there are a number of serious matters which are heading towards a hearing. As more information on the likelihood of discipline hearings is available, the Board will make the necessary decisions regarding the potential

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### Also included:

- Call for Nominations
- Election Procedure Bylaw
- Committee Membership Policies 2001-02 and 2001-03
- Movement between Registration Categories Policy
- Updates to the 2003 Directory

## Registration Renewal

*The College will be sending out registration renewal forms by mid-November.*

The deadline for completion of the renewal form and payment of renewal fees is **December 31, 2003.**

## Board Members

Robert L. Colby  
Rana Dhatt  
Michael Elterman  
Marguerite Ford  
Emily Goetz  
Henry Harder, Chair  
Michael Joschko  
Barbara Passmore  
Derek Swain, Vice-Chair

# Report from the Registrar

The College has been working with a new system of processing complaints since January 2000. The summary tables and charts in the Annual Report for 2002 provide details in terms of the substance of common complaints and the typical consequences and means of resolution for complaints. Some of these are worth repeating because they provide important information that may alleviate the anxiety, concerns, and fears of registrants who are now facing or who will, in the future, receive a complaint notification letter from the College. Whenever possible, complaints are resolved through a voluntary formal or informal agreement between the registrant and the College. Where the Inquiry Committee has significant concerns about protecting the public interest, it is sometimes necessary to proceed further.

The College has closed 239 complaints since January 1, 2000. Of these more than two-thirds (68%, n=163) were dismissed because of lack of evidence of an ethical violation or a decision not to proceed for administrative reasons. Of the remaining one-third (n=76; 32%), 65 complaints (86%) were resolved by means of a voluntary agreement worked out between the College and the registrant. This means that to date, only 11 complaints processed by the College have required a "non-voluntary" action on the part of the registrant. Even this is an overstatement in that aside from the 2 files which resulted in a registrant's registration being cancelled, one registrant voluntarily resigned from the College (accounting for 5 complaint files), and four others were referred to the Registration Committee because the individual was no longer a registrant by the time the complaint was processed. When the Inquiry Committee is of the opinion that the psychologist's conduct presents a high risk to the public, every attempt is made to ensure that there is professional accountability. If, however, the psychologist is prepared to reflect on his/her own behaviour, take corrective action, [and the Inquiry Committee doesn't have serious public protection concerns], it is very likely that the psychologist will be able to work out an

agreement with the College to address any issues identified as concerns by the Inquiry Committee. Typical agreements are described in the Annual Report.

One impediment to the expeditious and effective resolution of some complaints appears to stem from an apparent misapprehension by registrants or their counsel as to the amount of information about the complaint process that is available to the public or the degree to which complaints become a permanent part of a registrant's record. This may well account for the reluctance of some registrants to enter into undertakings or consent agreements with the College. In either case, the only information that is available to the general public is information about restrictions or limitations on one's license to practice. Complainants are entitled to know the reasons for actions on their complaints – especially as it pertains to their specific allegations. [See discussion below regarding the College's successful submission to government on this issue]. Finally on this issue, the College makes no distinction in its dealings on complaints between those members represented by counsel and those not so represented. When a registrant is represented by counsel, copies of all correspondence from the College to the registrant are copied to counsel as well. While no suggestion is intended to be made about the timing or circumstances in which counsel ought to be retained, at least three recent complaints were resolved efficiently and effectively when the registrant elected to act on his or her own behalf and discontinued legal representation. In addition, the number of undertakings signed by registrants (see the 2002 Annual Report) illustrates the success of this method of bringing complaint matters to successful resolution. Many of the voluntary agreements made with registrants now include a clause which terminates the undertaking at the point at which the Inquiry Committee is satisfied that the terms of the agreement have been met – a step which goes even further in emphasizing that the main point of such agreements is improvement in practice and resolution of concerns – rather than a public pronouncement

of wrongdoings. Undertakings are an effective means of bringing complaint matters to successful resolution. This is amply illustrated by the number of such agreements signed each year by registrants (see, for example, the 2002 Annual Report for an accounting of undertakings signed during the past year) and the high proportion of complaints in which concerns are identified which are resolved through such voluntary means.

It is interesting to take note of how other professions handle complaint investigations and other disciplinary matters. The Law Society circulates a publication entitled "Discipline Digest" to its members on a regular basis naming those members found to be in violation of their ethical code and giving a detailed description of the circumstances and the penalty. Other Colleges post this information on their web-sites.

The College of Psychologists is clear in its responsibility to provide information regarding public safety and the public interest. When necessary and where there are restrictions on practice, such information is appropriately conveyed to the public. The College also has made some significant efforts directed at protecting information not related to public protection. The submission we prepared to government in response to proposed amendments to the *Health Professions Act* is a case in point. The initial draft included a provision whereby all undertakings would need to be published on the register of the College. Largely in response to our submission, this has been amended. In addition, we made a successful submission with regard to the nature of the information to which the complainant is entitled at the end of a complaint investigation, helping to clarify that the allegations initially made by a complainant may or may not end up being identical to the issues investigated by the Inquiry Committee. We are hopeful that these changes will come into effect during the Fall sitting of the legislature.

*Respectfully submitted*  
*Andrea Kowaz, Ph.D., R.Psych.*  
*Registrar*

for, fee increases and/or a special levy. There is no question that it is preferable to resolve matters amicably and through negotiation and discussion. There is also little doubt that some matters are of such a serious nature that litigation is the necessary course of action. As appropriate, the College will provide summary information to registrants about any hearing matters.

As you know from reading the reports of the various College committees, the volume of activity at the College remains very high. Currently this is especially true for registration matters. The Board recently approved an additional .6 FTE appointment at the Deputy Registrar level to supplement the 1 FTE Deputy Registrar position currently shared by Colleen Wilkie, Ph.D., R.Psych., and Rafael Richman, Ph.D., R.Psych.

As well, when the changes to the *Health Professions Act* are implemented in the fall, we anticipate a significant increase in activity for the Quality Assurance Committee.

The Board is very pleased with the degree of responsiveness by government to our submissions on the *Health Professions Act*. The time line provided for response was very short and our Registrar worked exceptionally hard along with our counsel, Mr. Anthony Tobin and our special "bylaw consultant", Ms. Bonita Thompson, QC., to not only meet the deadlines but to make submissions which have been recognized for their clarity and substance. Many of our recommendations have been incorporated into the draft amendments for the *Health Professions Act* which will be before the legislature this fall. Of particular note is the contribution that our submission made to the differentiation of complaint allegations made by the complainant and the matters which may end up being the subject of an Inquiry Committee investigation. Another important contribution was our successful argument to ensure that letters of undertaking are not, by definition, required to be on the public record. Further, documents such as undertakings, which successfully bring complaints to resolution, may not be used in other legal proceedings. For

example, if a registrant apologizes to a complainant this apology can not be used in civil litigation against the registrant.

Another major achievement was the Annual Report for 2002. I encourage all registrants to take the time to carefully review the wealth of information which is included in the report. Many thanks to the Registrar and her staff for this impressive work. If registrants read through the report, many of the anxieties and concerns related to complaints could be alleviated. Take a look, for example, at the proportion of complaints which end up being dismissed. Then look at the proportion of the complaints which are not dismissed but are resolved through voluntary agreements. Certainly for all but the most serious complaints, the statistics suggest that an open response to a complaint investigation is in the best interest of the registrant.

At the Annual General Meeting the Board received a request for information regarding the appointment of committee members. A copy of Board policies 2001-02 and 03 are enclosed for information purposes.

The terms for two Board members will be expiring on December 31, 2003. A call for nominations form and a copy of the College bylaws Section 3, Election procedure, is enclosed with your *Chronicle*.

The College staff, committee members, and Board of Directors are working hard at fulfilling the mandate of the College. Your ongoing support is much appreciated and I look forward to hearing from you.

*Respectfully submitted,*  
Henry G. Harder, Ed.D., R.Psych., Chair

### **Change of Register Address**

Bylaw 50(3) requires that registrants inform the College in writing (regular mail or fax), clearly indicating a change in address or any other information on the Register. Due to the volume of mail handled by the College and the cost and time involved in dealing with returned mail and making changes to this information, a \$100 processing fee will be assessed to Registrants who do not adhere to this bylaw.

## Quality Assurance Committee

In April of this year, the College mailed to you the draft proposal for a required continuing competency program, mandated by the **Health Professions Act**. You were invited to submit feedback by July 15.

As Chair of the Quality Assurance Committee, I would like to thank registrants for the 46 responses we received. Feedback was specific, thoughtful and helpful. Further, 46 responses (4.4%) is high for our College!

I did a content analysis of responses for our Quality Assurance Committee members to consider, itemizing issues by frequency. I added quotes from registrants suggesting specific ways to make changes for the areas mentioned most frequently.

Interestingly, the highest number of responses supported required continuing competency in principle. The next most frequent categories were:

- questions regarding the audit and inspections;
- suggestions for making categories for hours more flexible;
- suggestions for clarifying definitions of requirements; and
- suggestions for lowering cost to registrants, e.g., with online course credit.

After the Quality Assurance Committee's consideration of changes in our September meeting (we don't meet in August) a proposal will be presented to the College Board. The program will begin January 1, 2004. It is important that we all begin to log our hours then. You will receive the information for logging with your renewal form.

The College will use the first few years to fine tune the program, with input from registrants.

*Respectfully,*  
Emily Goetz, Chair  
Quality Assurance Program

# Registration Committee Update

## Exemptions

The Registration Committee has conducted a series of consultations and meetings in preparation for the government's consideration of implementing the Health Professions Council recommendation that existing exemptions (which provide individuals in government, schools and universities access to the title "psychologist") be removed. Our ongoing discussions with government continue to support the view the government does intend to implement all recommendations of the Health Professions Council. [Copies of these reports are available on the College website under the links section or at [www.healthplanning.gov.bc.ca/leg/hpc/review/index.html](http://www.healthplanning.gov.bc.ca/leg/hpc/review/index.html)].

We anticipate that the College will be involved in ongoing discussions with government along with the various groups whose members may be directly affected by removal of the exemptions.

## Review of extraordinary files

The College has met with representatives of the B.C. Association of School Psychologists (BCASP), the BC branch of the Canadian Counselling Association, the BC Association of Clinical Counsellors and other groups of individuals such as a group of university faculty to discuss the implications of implementation of this recommendation. The Registration Committee decided to establish an application period during which certain accommodations to registration criteria would be available to applicants. The extraordinary period was from January 1 to May 1, 2003. The registration criteria were not changed, rather the accommodations provided an extension of time within which registration criteria would need to be met (such as completion of the EPPP exam and the internship) and recognition of work experience in psychology. Individuals accepted for registration under these provisions will be placed on the Limited Register until all registration requirements have been met. Further, some individuals will have more ongoing restrictions on their license to practice.

A total of 136 applications were received during the extraordinary application period and reviewed to

determine whether or not they met the basic eligibility criteria established by the Registration Committee. Of these 136 applications it was determined that 80 individuals did meet the eligibility criteria, 22 additional individuals may meet the criteria but additional supporting documentation is required. This means that approximately 102 applicants for registration are likely under the extraordinary application period. In terms of the remaining 34 applications reviewed, 10 were determined to have clearly not met the criteria, 24 applications were already designated or reallocated to other application categories such as regular or reciprocal and a review determined that there was no advantage to processing their applications under the extraordinary provisions. The individuals who did not meet the criteria did not have any degree in psychology or equivalent.

## Processing Fee

Bylaw 50(3) requires that registrants inform the College in writing (regular mail or fax), clearly indicating a change in address or any other information on the Register. Due to the volume of mail handled by the College and the cost and time involved in dealing with returned mail and making changes to this information, a \$100 processing fee will be assessed to Registrants who do not adhere to this bylaw.

## Retention of Title

Registrants whose registration has been suspended or cancelled as the result of a decision of the Board, Registration or Inquiry Committee, for a period of six months or less, will retain the title in effect at the time of their suspension or cancellation. If the suspension or cancellation has been for longer than six months, the individual will be required to make a new application for registration. This is an important consideration, especially for registrants who may have been accepted for registration during a grandfathering period. For example, if a psychologist, registered at the master's level, does not pay their renewal fees and is removed from the Register, they will need to reapply as a new applicant (psychological associate) if they are off the register for more than six months.

## Limited Register for non-practicing registrants

If a registrant is working, he or she cannot choose to be on the limited register by virtue of the specific nature of his or her employment. Placement on the limited register by way of signing Declaration B on the registration renewal form is exclusively for registrants who are temporarily not working [practising] for reason of medical, parental or maternity leave, sabbatical or are registered in another psychology jurisdiction ("Out of Province").

## Renewal

Registrants are reminded that renewal materials will be mailed out in the fall (by mid November) and that renewal materials must be received by the College by December 31, 2003.

*Respectfully submitted,  
Michael Elterman, Ph.D., R.Psych.  
Chair, Registration Committee*

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# Legislation Committee

The College will soon provide additional guidelines and clarification concerning registrants' obligations with respect to the transfer/sharing of psychology file materials to clients or others. This issue was discussed previously in the **Chronicle** (Winter 1996) article, **Access to Psychological Test Scores**.

The areas which will be clarified include:

1. Release of psychology materials to persons other than the client (and possibly without client permission) where the psychologist must endeavour to protect the client's rights and confidentiality.
2. Release (to clients or others) of raw test data, which may include test items and stimuli where the psychologist must endeavour to protect the security of the tests.

*Respectfully submitted,  
Michael Joschko, Chair  
Legislation Committee*

# Preventing Ethical Complaints

We wish to share some useful information in an article circulated by Ken Pope on preventing complaints. The article is written by a defense attorney, Brandt Caudhill, Jr., Esq., whose practice is representing psychologists and other therapists in malpractice suits and with regulatory body complaints. This perspective adds useful tips which supplement the information we presented in a previous issue of this publication which covered the most common mistakes made by registrants as reflected in the College's own review of complaints. This article is entitled:

***"Malpractice and Licensing Pitfalls for Therapists: A Defense Attorney's List"***

1. Excessive or inappropriate self-disclosure
2. Business relationships with patients
3. Using techniques without proper training
4. Using incorrect diagnoses deliberately (e.g., for insurance company coverage)
5. Avoiding the medical model (e.g., informed consent, note taking, standards of care)

6. The true love exception for sexual relationships – "generally a therapist who is choosing to engage in such a relationship with a patient is effectively choosing to discard his or her career".
  7. Inadequate notes – "Notes are essential for survival in this litigious age. Notes should not only be accurate, but should be meaningful in terms of content...a therapist should never agree to not take notes at a patient's request"
  8. Failure to obtain an adequate history
  9. Uncritically accepting what a patient says (e.g., "To accept implausible memories of sexual abuse")
  10. Use of inappropriate syndrome testimony "Using syndromes which are not appropriately researched or acknowledged by the profession is below the standard of care"
  11. Out of the office contact
  12. Failure to obtain peer consultation
- For further information, see Dr. Pope's website at

<http://kspope.com>.



## Yellow Pages/ Super Pages Advertising

The Code of Conduct section 10.6 requires that registrants include their registration number in all advertisements. This includes your telephone book listings. This requirement emerged from the refusal on the part of the Super Pages to provide any screening of individuals requesting a listing under "Psychologists". Identifying yourself by your registration number is both a protection of public and protection of title issue.

## Deputy Registrar-Registration Position

The College of Psychologists of British Columbia requires a Deputy Registrar-Registration to assist with the efficient functioning of the three primary mandates of the College. These mandates are the protection of the public through the investigation and adjudication of complaints, the registration of psychologists for practice in British Columbia and the establishment and maintenance of continuing competency standards among registrants. This is a part-time (0.6 f.t.e.) position.

### **Reporting to the Registrar, the Deputy Registrar's responsibilities will include:**

- assisting with ensuring standards and criteria for the profession meet the requirements of the applicable legislation;
- assisting with ensuring that registration qualifications, procedures and examinations comply with the *Health Professions Act* and the bylaws of the College;
- assisting with the management of the registration of applicants under the Mutual Recognition Agreement;
- assisting with the development and monitoring of administrative, management and practice procedures.

### **The successful candidate will:**

- have extensive senior administrative experience in a regulatory or association setting;
- be a self-starter with demonstrated leadership abilities and good interpersonal and communications skills.
- have a proven track record in project and change management;
- be a team contributor; and
- be a registrant of the College of Psychologists or eligible for registration.

**Interested candidates should submit their resume by noon on October 1, 2003 to:**

Dr. Andrea M. Kowaz, Registrar, College of Psychologists of British Columbia  
Suite #404, 1755 West Broadway, Vancouver, B.C. Fax: (604) 736-6133

# Managing multiple relationships in the rural setting

Many registrants of the College practice psychology in a rural setting. It is clear that while most ethical codes, including our Code of Conduct, specify standards in dealing with such relationships, multiple relationships are a reality in most rural practices. A recent article in Professional Psychology: Research and Practice addresses this issue (Campbell and Gordon, 2003 "Multiple Relationships in Rural Practice" Vol. 34 (4) pp. 430-434). The 2002 APA Code places decision-making on the three prongs of risk of exploitation, loss of therapist objectivity, and harm to the professional relationship. The Code of Conduct is explicit and essentially a combination of these three concerns:

## 5.17 Prohibited dual relationships

A registrant must not undertake or continue a professional relationship with a client when the objectivity or competency of the registrant is impaired

because of the registrant's present or previous familial, social, sexual, emotional, financial, supervisory, political, administrative, or legal relationship with the client or with another relevant person associated with or related to the client.

The article makes some useful suggestions for the practitioner in the rural setting, which are each consistent with the Code of Conduct:

1. Imagine the worst case scenario (Coyle, 1999).
2. Seek consultation.
3. Maintain clear boundaries in as many areas as possible so that the client's needs take priority over those of the psychologist. (Stockman, 1990).
4. Maintain confidentiality.
5. Terminate the dual therapeutic, social or business relationship as soon as possible.

The authors endorse abstinence from multiple roles while acknowledging that this avoidance may have its own consequences. "At times psychologists will find themselves in multiple roles with clients, and they are cautioned to proceed with prudence in these relationships and to seek consultation liberally".

Campbell, C.D., and Gordon, M.C. (2003) Acknowledging the inevitable: Understanding multiple relationships in rural practice. *Professional Psychology : Research and Practice*. 34 (4) pp. 430-434.

Coyle, B.R. (1999). Practice tools for rural psychiatric practice. *Bulletin of the Menninger Clinic*, 63, 202-222.

Stockman, A. F.(1990) Dual relationships in rural practice: An ethical dilemma. *Journal of Rural Community Psychology*, 11(2), 31-45.

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## Representation of Credentials

Many registrants are apparently not yet familiar with the requirements of the Code of Conduct with regard to representation of academic and professional credentials.

The purpose of this article is to call attention to the standards included in the Code of Conduct to aid registrants in the appropriate representation of hard-earned academic and professional credentials and to ensure that clear and accurate information is available to the public.

The standards allow for identification of the highest practice-relevant degree in representation of credentials. The use of "ABD" (all but dissertation), "Ph.D. candidate", etc., are confusing. It is only acceptable to list a completed (and granted) degree that is acceptable to the Registration Committee.

Registrants may belong to a number of different professional organi-

zations such as CPA and APA. Most such organizations have no requirement for formal training or experience. As such, their representation as a credential is not acceptable. The only abbreviation other than a Master's or Doctorate which may be listed with the R.Psych. or R.Psych. Associate designation, is that of the American Board of Professional Psychology (ABPP).

Registration as a psychology practitioner in B.C., as is the case throughout North America, is generic. There is no such thing as a "registered clinical psychologist" and any such term or implication that the College has registered someone in a specialty area is misleading and should not be used. It is permissible to communicate clearly that one has a speciality practice area such as "Practice in Clinical Psychology" or "Specializing in clinical and forensic psychology". The Code of Conduct

provides examples of acceptable representation.

A number of other related issues arise from questions received by the College. As one example, a registrant who runs a business staffed by mainly non-registrants wanted to know if he could represent them as psychological assistants. Other than the provisions of existing exemptions which deal largely with university, school, government and hospital settings, the term "psychological" and its abbreviations are protected. It is therefore inappropriate to use such terms or to list such individuals under letterhead which uses the term "psychological". The point is to ensure that the public is aware as to whether or not they are receiving services from a registrant of the College.

Section 9 of the Code provides standards for dealing with these and related issues.

# Annual registration renewal policies

<b>Due Date</b>	Each registrant of the College must pay to the College an annual renewal fee on or before <b>December 31 of each year</b> . This applies to all registrants regardless of placement on the Full or Limited Register.
<b>Mailing of Renewal Notices</b>	A mailing in November includes: <ul style="list-style-type: none"> <li>• a renewal form</li> <li>• an explanatory memo from the Registrar</li> </ul>
<b>Late Payments</b>	As per the <i>Health Professions Act</i> , s 21(3)(b), "The registrar must cancel the registration of a registrant in the register if the registrant has failed to pay a fee for renewal of registration or another fee within the required time." Registrants who submit their payments after December 31 will be removed from the register (see Reinstatement and Possible Disciplinary Action).
<b>Payment Plans</b>	The full amount is due on or before December 31. <u>There are no payment plans.</u>
<b>Returned Cheques</b>	Registrants whose cheques are returned by the bank for any reason will be considered to have not paid their renewal fee. In addition, an administrative fee of \$50.00 will be charged.
<b>Reinstatement</b>	As per the <i>Health Professions Act</i> , s 21(4), "A board may, on grounds the board considers sufficient, cause the registration of a former registrant to be restored to the register on payment to the board of (a) any fees or other sums in arrears and owing by the former registrant to the board, and (b) any reinstatement fee required by the bylaws. As per bylaw 54(1), "A former registrant whose registration was cancelled under section 21(3) of the Act may be reinstated by the board under section 21(4) of the Act if the former registrant submits <ol style="list-style-type: none"> <li>a signed and completed application for reinstatement in Schedule H,</li> <li>all documents, fees, and information required for renewal of registration in section 53(3), and</li> <li>a reinstatement fee in an amount equal to 35% of the registrant's annual registration renewal fee.</li> </ol> (2) The board may waive all or any part of the reinstatement fee referred to in subsection (1)(c) if the board is satisfied that imposition of the fee would cause undue financial hardship for the former registrant." Registrants who are reinstated within a six month period of being removed from the register for reasons of non-payment of fee will maintain their title (i.e., psychologist). Registrants who are removed from the register for longer than six months will need to make an application for registration.
<b>Possible Disciplinary Action</b>	Registrants who practice psychology after they have been removed from the register will be considered to have violated the Code of Conduct.
<b>Insurance</b>	As per bylaw 61, "All registrants must maintain or be included in coverage under professional liability insurance in an amount not less than \$1,000,000 per occurrence." This applies to all registrants regardless of whether they are on the Full or Limited Register.
<b>Register Address</b>	As per the <i>Health Professions Act</i> 21(2), "The registrar must maintain a register and must enter in it the name and address of every person granted registration under section 20." Please note that under the <i>Health Professions Act</i> , 54(1), "If a notice or other document is required to be delivered to a person under this Act, the regulations or the bylaws, it is deemed to have been received by the person 7 days after the date on which it was mailed if it was sent by registered mail,... in the case if a document to be delivered to a registrant, to the last address for the registrant recorded in the register referred to in section 21(2)..."  A legal land address is required (i.e, no post office boxes except for rural addresses in which case both a land address and post office box are required.)
<b>Changes of Registration Categories</b>	For registrants who intend to move from the Limited to Full Register, or vice versa, please refer to the policy posted on the College website and included in this mailout. Please note that the College needs 30 days notice for registrants applying to move from the Limited to Full Register. For registrants who wish to retire with no further involvement with the College, please inform the College in writing. As of March 1, 2002, registrants who are employed in BC cannot remain on the Limited Register as non-practicing.
<b>Annual Certificate</b>	As per bylaw 53(8), "a registrant must prominently display his or her current annual certificate in the premises routinely used by the registrant to practice psychology. Receipt and annual certificate(s) will be mailed to those who have completed their registration renewal.

# Guidelines for Reporting Under the Motor Vehicle Act (s.230)

The College has participated in a series of discussions with the Superintendent of Motor Vehicles along with representatives of the College of Physicians and Surgeons, the BC Medical Association, the College and professional association of the Optometrists, and BCPA. The issues discussed include discussions of whether or not reporting should be mandatory as well as some insurance and liability coverage issues. The College has prepared a draft practice advisory for registrants on how to respond to our

responsibilities under the *Motor Vehicle Act*. The College extends our gratitude and appreciation to Dr. Pat McFarland, R.Psych., for her participation in the meetings along with the Registrar and in particular, for her hard work on the draft. This draft is included below and your feedback is invited. Please submit your feedback in writing to the College by October 15, 2003. As outlined in the Fall issue, psychologists, optometrists, and medical practitioners have a duty to report to the Superintendent of Motor Vehicles a patient who (a) has a medical

condition that makes it dangerous if he/she continues to drive *and* (b) who continues to drive after being warned. The College, along with representatives of BCPA and the other colleges and associations, have been meeting with the Superintendent of Motor Vehicles to clarify issues relating to scope of practice and ethical responsibilities. The following guidelines are intended to help define psychologists' statutory obligations with respect to this section of the Act.

Scope of Practice for Psychologists	S. 230 (a)	S. 230 (b)	Action
Direct interest	Danger is <b>clear</b> .	Client has been warned and continues to drive.	1. Inform client that you will be advising Motor Vehicles. 2. Submit report to Sup't. of Motor Vehicles.
Direct interest	Danger is <b>clear</b> .	Client has been warned, but unknown whether continues to drive (e.g., may have been seen for only one session).	1. Inform client and/or physician, where possible. 2. Submit report to Sup't. of Motor Vehicles or request in writing that physician follow up.
Direct interest	Danger is <b>possible</b> .	Client has been warned and continues to drive.	Offer client the choice of undergoing an appropriate specialized driving assessment or of your submitting a report to the Sup't. of Motor Vehicles.
Direct interest	Danger is <b>possible</b> .	Client has been warned, but unknown whether continues to drive (e.g., may have been seen for only one session).	Report concerns in writing to family physician, requesting that he/she follow up. When client doesn't have a family physician, submit report to Sup't. of Motor Vehicles and attempt to inform client of your action.
Outside scope of practice (e.g., a medical condition such as diabetes, visual changes, etc.)	Danger is <b>possible</b> or <b>probable</b> .		1. Inform client that you will be advising the family physician of your concerns. 2. Inform family physician in writing, outlining your concerns and requesting follow-up. 3. If client and/or family physician don't follow up, and concerns remain, consider submitting report to Sup't. of Motor Vehicles.

*Reporting under the Motor Vehicle Act raises obvious ethical issues, particularly with respect to confidentiality. For this reason, clients who drive should be informed at the commencement of the professional relationship of the limits of confidentiality with respect to the Motor Vehicle Act (Code of Conduct, s. 6.1). The Code of Conduct (s. 6.7) permits disclosure without the client's consent where there is a risk of harm.*