

CONTINUED COMPETENCY ACTIVITIES LOG - Year 20 \_\_\_\_\_

(Form Last Modified July 2012)

Name: \_\_\_\_\_ Registration No: \_\_\_\_\_ Date: \_\_\_\_\_

Print clearly or type. (PLEASE INCLUDE YOUR IDENTIFYING INFORMATION ON THIS PAGE AS REQUESTED, BUT NOWHERE ELSE ON THIS FORM.)

A. DIRECT PARTICIPATORY, FORMAL PROGRAMS (MINIMUM OF 12 HOURS PER YEAR)						
ACTIVITY	FULL NAME OF IN-PERSON WORKSHOP/COURSE/CONFERENCE	FULL NAME OF SPONSOR		ALL DATES ATTENDED	NO. OF HOURS	
<b>Formal Conferences, Courses, or Workshops In Person Modal Activity:</b> Conferences, workshops, in-person courses, all College meetings, annual meetings of professional associations of psychology or sponsored learning institutes. Typically the event is planned in advance; speakers have professional credentials in mental health, health, or industrial / organizational behaviour; printed documentation is provided; usually a registration fee is charged. The activity must be within the framework of the definition of psychology as per the <i>Psychologists Regulation</i> .  <b>NOTE:</b> If claiming banked hours from the previous year, ensure you include all relevant information on these activities.						
ACTIVITY	FULL NAME OF ON-LINE WORKSHOP/COURSE/CONFERENCE	FULL NAME OF SPONSOR	SPECIFY CPA/APA/ OTHER	DATE(S)	NO. OF HOURS	
<b>On-Line Modal Activity:</b> The on-line course is sponsored by CPA/APA, or another professional accrediting body in the area of specialization (e.g. I/O).* The activity must be within the framework of the definition of psychology as per the <i>Psychologists Regulation</i> . *Specify accrediting body if 'Other.' If not sponsored please include statement explaining relevance to your professional activities.						
<b>TOTAL HOURS FOR SECTION A</b>						

**B. SELF STUDY (MINIMUM OF 11 HOURS PER YEAR)**

ACTIVITY	FULL NAME OF MATERIAL READ (E.G., JOURNAL, BOOK, ON-LINE RESEARCH, ON-LINE COURSE)	DATE(S)	NO. OF HOURS
<p><b>Reading Modal Activity:</b> Reading academic journals and books,* reviewing the Code of Conduct, Practice Advisories, and other College publications. Non- CPA/APA on-line courses are eligible for inclusion in Category B. Preparation for presentations, courses, or workshops given by you can be included in this category if you learned something new and practice enhancing.</p> <p><i>*At a minimum, specify book and journal titles. If not self-evident, provide information regarding relevance of topics to your professional activities. Attach sheet for readings as necessary.</i></p>			
	<b>METHOD</b>	<b>DATE(S)</b>	<b>NO. OF HOURS</b>
<p><b>Review of Practice Modal Activity:</b> Review of one's practice of psychology with knowledge of the above documents to identify any areas in need of improvement.</p>			
<b>TOTAL HOURS FOR SECTION B</b>			

**C. STRUCTURED INTERACTIVE ACTIVITIES (MINIMUM OF 12 HOURS PER YEAR)**

ACTIVITY	FOR DISCUSSION GROUPS, SPECIFY TOPICS OF DISCUSSION. FOR CONSULTS REGARDING SPECIFIC CLIENTS OR PRACTICE ISSUES, INDICATE CASE CONFERENCE OR PEER CONSULTATION AS APPROPRIATE, AND SPECIFY GENERAL NATURE OF DISCUSSION.	CONFIRM WITH LICENSED HEALTH PRACTITIONER(S) AND LIST PROFESSION(S)	DATE	NO. OF HOURS
<p><b>Routine Consultation with Peers</b>  <b>Modal Activity:</b>                      Regularly scheduled or routine consultations with peers (one or more colleagues who are licensed professionals in mental health, health, or industrial/organizational behaviour). For example, peer consultation and/or case conferences are acceptable, whereas staff meetings where the focus is on administrative issues are not acceptable.  <b>Note:</b> Ensure you indicate the professions of the group members.</p> <p><b>Structured Interactive Activities do not include:</b></p> <ul style="list-style-type: none"> <li>- supervision, or presentations or workshops you provide, where the intent is to provide information or guidance to others.</li> <li>- case conferences at which you are the only licensed health professional.</li> </ul>				
<b>TOTAL HOURS FOR SECTION C</b>				

**D. ETHICS (MINIMUM OF 5 HOURS PER YEAR)**

ACTIVITY	INDICATE CATEGORY A, B, OR C	DESCRIPTION OF ACTIVITY	DATE(S)	NO. OF HOURS
Describe which of the above activities from Categories A, B, and/or C satisfy the minimum requirement for 5 hours per year explicitly on ethics. <b>Note:</b> Registrants cannot request a reduction in required ethics hours.				
<b>TOTAL HOURS FOR SECTION D</b>				

**Are you banking Category A Hours for next year? Remember to keep this information for your records!**

**CHECKLIST FOR USE WITH CONTINUING COMPETENCY LOG**

**FOR YOUR USE ONLY – DO NOT SUBMIT**

**Category A**

- I have specified the full names of workshops, conferences, and courses.
- I have specified the full names of the sponsors of these activities.
- I have only included CPA/APA sponsored on-line activities, or those sponsored by another professional accrediting body in my area of specialization.
- In the event the on-line activity I am claiming does not meet the previous criterion I have attached a detailed rationale for why the activity should be considered. I am aware the Quality Assurance Committee may determine that this activity does not meet the requirements for Category A, in which event the activity may count towards my Category B activities.
- I have not included any workshops, courses, or presentations given by me in Category A.

**Category B**

- I have specified the names of books and/or chapters and/or journals and/or articles read, and the full names of any on-line courses.
- I have included any preparation time for workshops, courses, or presentations given by me in which I learned something new and practice enhancing in Category B.
- I have noted any time spent in a review of my practice related to continuing competency reading as appropriate in the second section of Category B.

**Category C**

- Activities claimed by me in this category were interactive in nature and were conducted with other regulated/licensed health, mental health, or industrial/organizational practitioners.
- I have not included any listserv activities on my log sheet in any category, including Category C.
- I have included any participation in BCPA Ethics Salons in Category C, not Category A.
- I have indicated the profession(s) of the participants in my Category C activities.
- I have specified the topics that were discussed in any discussion groups, and the general issues addressed in any case conference or peer consultation.

**Category D**

- I have clearly indicated from which Category (A, B, or C) each activity is drawn, and provided a description of the activity.
- Activities indicated in Category D are specifically related to ethics.

**General:**

- I have ensured that all activities claimed fall within the framework of the definition of psychology as per the *Psychologists Regulation*.
- I have remembered to specify dates and hours (or portions thereof) for all activities claimed by me.
- I have retained for my records the details of any hours I wish to bank from Category A.

**Total Continuing Competency Hours:**

\_\_\_\_\_ Category A  
\_\_\_\_\_ Category B  
\_\_\_\_\_ Category C  
\_\_\_\_\_ Category D (Drawn from previous 3 categories)

**Category A** \_\_\_\_\_  
**Category B** \_\_\_\_\_  
**Category C** \_\_\_\_\_  
**Total** \_\_\_\_\_