

COLLEGE OF SPEECH AND HEARING HEALTH PROFESSIONALS OF BC

BYLAWS

Includes amendments up to and including October 26, 2018

DEFINITIONS AND INTERPRETATIONS.....	7
Definitions.....	7
“public body” means a “public body” as defined in Schedule 1 of the <i>Freedom of Information and Protection of Privacy Act</i>	9
"public representative" means a person who	9
Interpretations	10
 DIVISION A – GOVERNANCE AND ADMINISTRATION	 11
 Part 1 – College Board.....	 11
Composition of the board.....	11
Notice of election	11
Nomination procedure	11
Election procedure	12
Terms of office.....	13
Assuming or leaving office.....	14
Removal of elected board member	14
Deemed removal of elected board member: Disciplinary proceeding.....	14
Vacancy.....	15
Delayed application	15
Remuneration of board members.....	15
Board chair and vice-chair	15
Board meetings	16
Voting	18
Resolution in writing.....	19
Spokespersons.....	19
Board Members’ Code of Ethics.....	19
Registrar	19
 Part 2 – Committees.....	 20
Registration committee	20
Hearing Instrument Practitioner Examination Advisory Committee.....	20
Inquiry committee.....	21
Discipline committee	21
Quality assurance committee	21

Advanced competency advisory committee	22
Client relations committee	23
Finance and administration committee	23
Support personnel liaison committee.....	24
Committee terms, membership, chair and reporting requirements.....	25
Meetings of a committee.....	25
Part 3 – Panels.....	25
Definitions.....	25
Committee panels.....	26
Composition of panels	26
Activated panels.....	26
Authority of a panel	27
Meetings of a panel.....	27
Part 4 – General Meetings of Registrants	27
General meetings	27
Notice of general meetings	28
Resolutions proposed by registrants	29
Proceedings at general meetings.....	29
Voting	30
Notice to public representatives.....	31
Part 5 – College Records.....	31
Definitions.....	31
Body responsible for administering FIPPA	31
Fees for information requests.....	31
Protection of personal information	32
Disclosure of annual report.....	32
Disclosure of registration status.....	32
Manner of disposal of college records containing personal information.....	33
Part 6 – College Administration	33
Seal.....	33
Deputy registrar	33
Fiscal year	34
Banking.....	34
Payments and commitments	34
Borrowing powers.....	34
Investments	34
Accountant	34
Legal counsel	35
Insurance	35
DIVISION B – REGISTRATION AND CERTIFICATION	36
Definitions.....	36

Part 7 – Registration (All Professions)	36
Classes of registrants.....	36
Payment of registration and other fees.....	37
Fee adjustments.....	37
Inactive registration	37
Retired registration.....	38
Temporary registration.....	39
Temporary (teaching) registration	40
Examinations.....	42
Examination failures	42
Improper conduct during an examination	43
Transferring registrant (labour mobility within Canada).....	43
Substantial equivalency	44
Issuing a certificate of registration.....	44
Proof of registration	45
Return of a certificate of registration	46
Conditions and requirements for renewal (active, conditional active, inactive and retired).....	46
Registration renewal – active.....	47
Registration renewal – conditional active.....	48
Registration renewal – inactive, retired	48
Reinstatement after suspension or cancellation	49
Reinstatement following non-payment of fees	50
 Part 8 – Registration of Hearing Instrument Practitioners.....	 50
Active registration (hearing instrument practitioner)	50
Participation and voting rights	53
 Part 9 – Registration of Speech-Language Pathologists and Audiologists.....	 53
Sub-Part 9.1 – Standard Applications.....	53
Active registration (audiologist or speech-language pathologist)	53
Appearing before the committee.....	59
Participation and voting rights	59
Sub-Part 9.3 – Conditional Active Registration	60
Conditional active registration: application	60
Conditional active registrant: rights and responsibilities.....	60
 Part 10 -- Advanced Competency Certification Programs	 61
Application.....	61
Preconditions for advanced competency certification	61
General.....	62
Substantial equivalency re: advanced competency.....	63
Issuing of certificates	63
Right to a decision and a review of a denied certificate	64

Display of certificates	64
Return of certificate	65
Certification renewal.....	65
Certificate reactivation.....	66
Continuing advanced competency program.....	66
Standards of Practice.....	67
Sub-Part 10.1 – Certificates for Audiologists	67
General requirements	67
Certificate A) Vestibular Assessment and Management	67
Application.....	67
Certification requirements	68
Acceptable programs of study	68
Use of “certified”	69
Certificate B) Cochlear Implant Management.....	69
Definitions.....	69
Restriction on practice	70
Certification requirements	70
Acceptable programs of study	70
Use of “certified”	71
Sub-Part 10.2 – Certificates for Audiologists and Hearing Instrument Practitioners...	71
Certificate C) Cerumen Management	71
Application.....	71
Certification requirements	71
Acceptable programs of study	72
Use of “certified”	72
Sub-Part 10.3 – Certificates for Hearing Instrument Practitioners	72
Definitions.....	72
General requirements	73
Certificate D) Hearing Instrument Services for Children Aged 12 to 16 Years	73
Application.....	73
Additional age restriction.....	73
Clarifications.....	74
Certification requirements	74
Acceptable program of study	74
Use of “certified”	75
General practice requirements	75
Sub-Part 10.4 – Certificates for Speech-Language Pathologists	76
Definitions for Sub-Part.....	76

General requirements	76
Certificate E) Fiberoptic Endoscopic Evaluation and Management of Voice Disorders	77
Application.....	77
Acceptable programs of study	77
Use of “certified”	78
Certificate F) Fiberoptic Endoscopic Evaluation and Management of Swallowing Disorders	78
Application.....	78
Acceptable programs of study	78
Use of “certified”	80
Certificate G) Voice Restoration (Voice Protheses)	80
Application.....	80
Conditions.....	80
Acceptable programs of study	80
Use of “certified”	81
Certificate H) Communication and Swallowing Assessment and Management for Tracheostomy”	82
Definitions.....	82
Application.....	82
Certification required	82
Declaration	82
Acceptable programs of study	83
Use of “certified”	84
Providing services to children in adult facilities.....	84
Transitions.....	85
Certificate I) Videofluoroscopic Assessment of Adult Swallowing Disorders	86
Definitions.....	86
Application.....	86
Certification required	86
Acceptable programs of study	86
Use of “certified”	88
Issuing of replacement certificates.....	89
Certificate J) Videofluoroscopic Assessment of Paediatric Swallowing Disorders	89
Application.....	89
Certification required	89
Acceptable programs of study	89
Use of “certified”	91
Limited use of Certificate I for children	92

Certificate K) Management of Airway Secretions (Oropharyngeal or Tracheal Suctioning).....	92
Definition	92
Application.....	92
Certification required.....	92
Acceptable programs of study	93
Use of “Certified”	95
Part 11 – Review by the board.....	96
Definitions.....	96
Application.....	96
Board review of a decision	96
Conduct of a board review	96
Result of a board review	97
Review re: an advanced competency certificate.....	97
Part 12– Delegation to non-registrants	97
Definitions.....	97
Delegation.....	98
Ultimate responsibility.....	99
DIVISION C – STANDARDS, COMPLAINTS AND DISCIPLINE.....	99
Part 13 – Regulating Professional Practice.....	99
Code of ethics and standards of practice.....	99
Liability insurance	100
Marketing.....	100
Internet marketing.....	102
Use of titles	102
Permitted practice descriptions / Preferred areas of practice.....	102
Declaring a specialty.....	103
Ability of registrants to accept delegations or act under supervision	104
Speaking on behalf of the college/ Professional endorsements	104
Continuing Competency Credits.....	104
Assessment of professional performance.....	105
Documentation and record management	105
Annual calibration of equipment	107
Part 14 – Complaint Investigation and Resolution	107
Inspections	107
Investigations by inquiry committee.....	107
Registrar authority	108
Consent orders	108
Mediation between complainant and registrant	109
Mediation between committee and registrant	109
Appointment and payment of mediator	109

Mediation terms and agreement to mediate	109
Agreement reached by mediation	109
Agreement not reached	110
Registrant cooperation	110
Part 15 – Citations and Disciplinary Proceedings.....	110
Citation for disciplinary hearing	111
Discipline committee or panel	111
Disciplinary hearings	112
Notice of disciplinary decision	112
Retention of disciplinary committee and inquiry committee records	113
Effect of suspension	113
Fines	115
Costs.....	115
Notice of disciplinary action under section 39.1 of Act	115
Schedule “A” – Schedule of Fees	116
Schedule “B” – Tariff of Costs	118
Schedule “C” - Fees for Information Requests.....	120
Schedules D.1 to D.3 - Support Personnel.....	122
Schedule “E” – Registrant Code of Ethics.....	123

DEFINITIONS AND INTERPRETATIONS

Definitions

1. In these bylaws:

"**Act**" means the *Health Professions Act*;

"**appointed board member**" means

(i) [Repealed 2016-05-08.]

(ii) a person appointed to the board under section 17(3)(b) of the Act;

"**board**" means the board of the college;

"**board member**" means an appointed board member or an elected board member;

"**Board Members' Code of Ethics**" means the code established by the board, including standards for board members to avoid conflicts of interest;

"**client**" means a person who receives a service provided by a registrant, and includes

- (i) a patient at a health care facility,
- (ii) a resident in a long-term care facility,
- (iii) if the registrant is learning a technique or service, a subject or simulated client,
- (iv) a student attending an elementary or secondary school, and
- (v) if the context so requires, the parent or legal guardian of a child client, or the legal representative of an adult client;

"**clinical decision support tool**" means information created or approved by the quality assurance committee that supports clinical decision making, and includes professional guidelines, clinical practice guidelines, clinical procedures and protocols;

"**Code of Ethics**" means the standards of professional ethics for registrants, including standards for avoiding conflicts of interest, established by the board under section 19(1)(l) of the Act and set out in Schedule E;

"**college**" means the College of Speech and Hearing Health Professionals of British Columbia established under section 51(1) of the Act for the professions;

"**deliver**", with reference to a notice or other document, includes mail to or leave with a person, or deposit in a person's mailbox or receptacle at the person's residence or place of business, or delivery by email or similar electronic means to a person's email account;

"**elected board member**" means

(i) [Repealed 2016-05-08.]

(ii) a registrant elected to the board under section 17(3)(a) of the Act or appointed to the board under section 10;

"**examination**" means a theoretical examination, given orally or in writing, or a practical examination, or any combination of these, and includes a supplemental examination;

"**general meeting**" means a general meeting of registrants convened under section 37;

"**in good standing**" means

(a) in respect of a registrant,

(i) the registrant's registration as a member of the college is not suspended under the Act, and

(ii) no limits or conditions are imposed on the practice of the registrant under section 20, 32.2, 32.3, 33, 35, 36, 37.1, 38, 39 or 39.1 of the Act, and

(b) in respect of a member of a regulatory body that governs one or more of the professions in another jurisdiction,

(i) the member has met the continuing competency requirements or quality assurance requirements of that regulatory body,

(ii) the member has paid the applicable membership fees of that regulatory body,

- (iii) the member is not the subject of an active complaint investigation or an active citation or disciplinary proceeding initiated by that regulatory body, and
- (iv) the member does not have any sanctions or restrictions placed on his practice.

“profession” means either the profession of hearing instrument practice, speech-language pathology or audiology as the context so requires;

“professional association” means a health profession association as defined in section 1 of the Act or similar organization, that

- (a) is composed of members who are registrants or persons registered or licensed in another jurisdiction for the practice of audiology, hearing instrument dispensing, or speech-language pathology, and
- (b) has as one of its purposes the promotion of the interests of its members;

"professional misconduct of a sexual nature" means

- (i) sexual intercourse or other forms of physical sexual relations between the registrant and the client,
- (ii) touching, of a sexual nature, of the client by the registrant, or
- (iii) behaviour or remarks of a sexual nature by the registrant towards the client;

but does not include touching, behaviour and remarks by the registrant towards the client that are of a clinical nature appropriate to the service being provided.

“public body” means a “public body” as defined in Schedule 1 of the *Freedom of Information and Protection of Privacy Act*;

"public representative" means a person who

- (i) is not a registrant or former registrant; and
- (ii) has no close family or business relationship with a registrant or former registrant and includes an appointed board member;

“quality assurance program” means the program administered by the quality assurance committee under section 26.1 of the Act;

"**Regulation**" means the Speech and Hearing Health Professionals Regulation, B.C. Reg. 413/2008;

"**respondent**" means a registrant named in a citation under section 37 of the Act;

"**special resolution**" means a resolution that requires a 75 percent majority vote of those persons present and eligible to vote at a meeting;

"**Standards of Practice**" means the standards, limits or conditions for the practice of a profession by registrants established by the board under section 19(1)(k) of the Act;

"**supervision**" means a situation in which a person's practice is overseen by a qualified registrant;

"**trade union**" means a local, provincial or national organization or association of employees that

(a) has as one of its purposes the regulation of relations between those employees and their employers through collective bargaining, and

(b) includes among those employees, registrants employed in their professional capacity as audiologists, hearing instrument practitioners or speech-language pathologists;

Interpretations

1.1. Where a section in these Bylaws refers to supervision, the scope, nature or form of that supervision is to be applied in accordance with the policy, standard or guideline approved by the Board which describes the applicable scope, nature or form of that supervision.

DIVISION A – GOVERNANCE AND ADMINISTRATION

Part 1 – College Board

Composition of the board

2(1) The board consists of eight elected board members and the appointed board members.

(2) Of the eight elected board members

- (a) two must be hearing instrument practitioners,
- (b) four must be speech-language pathologists, and
- (c) two must be audiologists.

(3) An audiologist or speech-language pathologist who is also a hearing instrument practitioner may not be elected or appointed as an elected board member to represent hearing instrument practitioners under subsection (2)(a).

(4) An audiologist who spends over fifty percent of his or her time providing the services of an audiologist and is also a speech-language pathologist may not be elected or appointed as an elected board member to represent speech-language pathologists under subsection (2)(b).

(5) A speech-language pathologist who spends over fifty percent of his or her time providing the services of a speech-language pathologist and is also an audiologist may not be elected or appointed as an elected board member to represent audiologists under subsection (2)(c).

Notice of election

3(1) The registrar must notify every registrant of an election by delivering a notice at least 120 days prior to the expiry of the term of office.

(2) The notice must contain information about the nomination procedure and the election procedure.

Nomination procedure

4(1) Subject to subsections (2) to (4), if a vacant or impending vacant board member position under section 2(2) must be filled by a board member from the profession of an

active registrant or retired registrant, the active registrant or retired registrant may nominate up to two registrants from his or her profession for that position.

(2) A nomination under subsection (1) must

(a) be delivered to the registrar

(i) at least 90 days prior to the expiry of the term of office referred to in section 3(1), and

(ii) in a form approved by the registrar, and

(b) include a signed statement from the nominated registrant

(i) consenting to the nomination, and

(ii) declaring that he or she will observe the provisions of the Act, the regulations and these bylaws, the procedures related to the election, and the conduct of the election.

(3) A registrant may only be nominated under subsection (1) if the registrant

(a) is an active registrant or a retired registrant,

(b) is in good standing,

(c) is not

(i) the subject of an investigation under section 33 of the Act, or

(ii) named in an unresolved citation issued by the registrar under section 37 of the Act,

(d) has paid all fees, fines, levies or debts due and owing to the college, and

(e) subject to subsection (4), is not a director or officer of a professional association or a trade union.

(4) A registrant who meets the qualifications set out in subsection (3)(a) to (d) but holds one of the positions identified in subsection (3)(e) may be nominated under subsection (1) if, at the time his or her nomination is delivered under subsection (2), the registrant provides the registrar with a written agreement to resign that position on being elected as an elected board member.

Election procedure

5(1) The registrar must prepare and deliver to each registrant an election ballot not less than 60 days prior to the expiry of the term of office.

- (2) Each registrant is entitled to one ballot.
- (3) A registrant may vote in favour of one candidate for each vacant position to be elected regardless of the registrant class in which that registrant has been registered.
- (4) The registrar must not count a ballot unless it is received by the registrar at least 30 days prior to the expiry of the term of office and is signed by the registrant.
 - (4.1) Faxed and electronically scanned ballots are acceptable when the name and signature of the registrant is clearly identified on the ballot.
 - (4.2) Anonymous ballots are acceptable when received in an envelope where the name and signature of the registrant appear.
- (5) The person or persons receiving the most votes on the return of the ballots is elected.
- (6) In the case of a tie vote, the registrar must select the successful candidate by random draw.
- (7) The registrar must supervise and administer all board elections and may establish procedures, consistent with these bylaws and as approved by the board, for that purpose.
- (8) The registrar may determine any dispute or irregularity with respect to any nomination, ballot or election.
- (9) Where the number of persons nominated under section 4 is less than or equal to the number of positions at the close of nominations, the nominees are deemed to be elected by acclamation.
- (10) The registrar must use Form #1 to certify newly elected members of the board under section 17.1(1) of the Act.

Terms of office

- 6(1) The term of office for an elected board member is three years.
- (2) An elected board member may serve a maximum of three consecutive terms.

Repealed

6.1 [Repealed 2016-05-08.]

Assuming or leaving office

7(1) A successful candidate assumes his or her position on the board once that member has presented a completed oath of office or certificate to the registrar under section 17.11(3) of the Act.

(2) An elected board member may resign at any time by delivering a notice in writing to the registrar and the resignation is effective when received by the registrar.

Removal of elected board member

8(1) An elected member of the board ceases to hold office if he or she

- (a) ceases to become a member in good standing,
- (b) submits a written resignation to the chair of the board or the registrar,
- (c) becomes an employee of the college,
- (d) is removed by resolution under section 17.11(5) of the Act,
- (e) is absent from three or more consecutive board meetings for a reason that the board does not find acceptable, or
- (f) is elected or appointed to, or becomes employed in, a position described in section 4(3)(e).

(2) Before the board acts under section 17.11(5) of the Act, a notice of the resolution for removal must be provided to every member of the board then in office, accompanied by a brief statement of the reason or reasons for the proposed removal.

(3) An elected member of the board who is the subject of a proposed resolution for removal under section 17.11(5) of the Act must be given an opportunity to be heard before the resolution is put to a vote.

Deemed removal of elected board member: Disciplinary proceeding

9(1) If an elected member of the board

- (a) has had his or her membership as a registrant cancelled under section 39(2)(e) of the Act, or
- (b) agrees to a cancellation of his or her membership in a consent agreement reached under section 36(1) of the Act,

that elected member ceases to hold office.

(2) If an elected member of the board

- (a) has had his or her membership as a registrant suspended under sections 35(1)(b) or 39(2)(c) of the Act, or
- (b) agrees to a suspension of his or her membership in a consent agreement reached under section 36(1) of the Act, that elected member ceases to hold office during the period of suspension.

Vacancy

10(1) Any vacancy of an elected board position may be filled to the end of that board member's term by a registrant of that profession appointed by the remaining members of the board by special resolution of the board.

(2) A member of the board appointed under subsection (1) serves the remainder of the term of the vacant board position.

Delayed application

10.1 Sections 6 to 10 do not apply until after the first election referred to in section 17(2)(a) of the Act.

Remuneration of board members

11(1) A board member is entitled to be

- (a) paid an honorarium or a per diem, or both, and
- (b) reimbursed by the college for reasonable expenses necessarily incurred in connection with the business of the college,

in the amounts and on such terms and conditions as the board may set out in policies and procedures.

(2) Appointed board members and elected board members must be remunerated equally under the policies and procedures referred to in this section.

Board chair and vice-chair

12(1) Each year, the board members must elect from among their number a chair and a vice-chair by majority vote

- (a) at the first meeting of the board following an election under section 17(2) of the Act, or

- (b) in a year where there is no election under section 17(2) of the Act, at the first meeting that is at least eleven months after the date of the election of the chair and the vice chair in the year before.
- (2) The term of office for the chair and vice-chair begins at the time they are elected under subsection (1) and ends in the next year at the start of the board meeting described in subsection (1)(a) or (b).
- (3) While a board member remains on the board, there is no limit on the number of terms that he or she may serve as the chair or vice chair of the board, either in succession or in total.
- (4) The chair of the board must
- (a) preside at all meetings of the board and general meetings of the college,
 - (b) sign all instruments executed on behalf of the college as required,
 - (c) sign the minutes of each meeting after they are approved by the board, and
 - (d) act generally in accordance with the requirements of his or her office for the proper carrying out of the duties of the board.
- (5) The chair of the board is an *ex officio*, non-voting member of all the committees described in Part 2.
- (6) In the absence of the chair of the board, the vice-chair must perform the duties of the chair.
- (7) If both the chair and vice-chair are absent from a board meeting, the board members present must elect one of their number by majority vote to be the acting chair for that meeting.

Board meetings

- 13(1) The board must meet at least four times in each fiscal year and must provide reasonable notice of board meetings to registrants and the public.
- (2) The registrar must call a meeting of the board at the request of either the chair of the board or any three board members.
- (3) Posting notice of a board meeting on the college website is deemed to meet the requirement for notice to registrants and the public under subsection (1).
- (4) The registrar must provide the following to registrants and members of the public on request:

- (a) details of the time and place of a board meeting,
 - (b) a copy of the agenda for that meeting, and
 - (c) a copy of the minutes of any previous meeting.
- (5) The accidental omission to deliver notice of a board meeting to, or the non-receipt of such notice by, any person entitled to receive notice does not invalidate proceedings at that meeting.
- (6) Despite subsections (1) and (2), the chair of the board may call a meeting of the board without providing notice to registrants and to the public if necessary to conduct urgent business.
- (7) Subject to subsection (8), meetings of the board must be open to registrants and the public.
- (8) The board may exclude any person from any part of a board meeting if it is satisfied that one or more of the following matters may be discussed:
- (a) financial, personal or other matters of such a nature that the interest of any person affected or the public interest in avoiding public disclosure of those matters outweighs the public interest in board meetings being open to the public;
 - (b) information concerning an application by any individual for registration under section 20 of the Act, the disclosure of which would be an unreasonable invasion of the applicant's personal privacy;
 - (c) information concerning a complaint against, or an investigation of, any individual under Part 3 of the Act, the disclosure of which would be an unreasonable invasion of the individual's personal privacy;
 - (d) information the disclosure of which may prejudice the interests of any person involved in
 - (i) a proceeding under the Act, including a disciplinary proceeding under Part 3 of the Act or a review under Part 4.2 of the Act, or
 - (ii) any other criminal, civil or administrative proceeding;
 - (e) personnel matters;
 - (f) property acquisitions or disposals;
 - (g) the contents of examinations;

- (h) communications with the Office of the Ombudsperson;
 - (i) instructions given to or opinions received from legal counsel under section 58, or any other matter that is subject to solicitor-client privilege;
 - (j) information that the college 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*;
 - (k) information that the college is otherwise required by law to keep confidential.
- (9) If the board excludes any person from all or a part of a board meeting, its reasons for doing so must be noted in the minutes of the meeting.
- (10) The registrar must ensure that minutes are taken at each board meeting, retained on file and, subject to subsection (11), posted on the college website.
- (11) Before posting board meeting minutes on the college website, the registrar may edit the minutes to remove information about any matter referred to in subsection (8), provided the reasons for removing that information are noted in the edited minutes.
- (12) If some or all of the board members are unable to meet in person, the board may meet and conduct business using videoconference, teleconference and internet conference connections, using any other electronic means or using any combination of these.
- (13) Except as otherwise provided in the Act, the regulations or these bylaws, the most recent edition of *Robert's Rules of Order* governs the procedures at meetings of the board.

Repealed

14(1) [Repealed 2017-05-13.]

Repealed

15(1) [Repealed 2017-05-13.]

Voting

16(1) A majority of the board constitutes a quorum.

(2) No resolution proposed at a board meeting need be seconded, and the chair of the meeting may move or propose a resolution.

(3) In case of an equality of votes, the chair of the board meeting does not have a casting

or second vote in addition to the vote to which he or she is entitled as a board member and the proposed resolution does not pass.

(4) Voting by proxy is not permitted at a board meeting.

Resolution in writing

17(1) Where it is not possible for the board to meet to discuss an urgent issue that requires a prompt decision, the board may vote on a resolution by email or any other form of written communication, and if approved in writing by a majority of the board members voting, the resolution is valid and binding and of the same force and effect as it had been duly passed at a meeting of the board.

(2) A record of a resolution conducted under subsection (1) must be included in the minutes of the next meeting of the board.

Spokespersons

18. Only the chair of the board or other persons authorized by the chair may speak on behalf of the college concerning board decisions or policies.

Board Members' Code of Ethics

19. While carrying out their duties as college officials, a board member must at all times conduct him or herself in a manner that is in keeping with the public interest, the ethical standards of the profession, and the Board Members' Code of Ethics.

Registrar

20(1) In addition to the duties and powers of the registrar under the Act, the registrar is authorized under section 19(2.1) of the Act to

- (a) establish, by bylaw, the forms, certificate or similar documents specified in these bylaws, and
- (b) require the use of such forms by applicants or registrants.

(2) The registrar is an *ex officio* (non-voting) member of every committee.

Part 2 – Committees

Registration committee

21(1) The registration committee is established consisting of at least nine persons appointed by the board, and must include

- (a) at least two registrants from each profession, and
- (b) at least three public representatives.

(2) The number of public representatives on the registration committee must constitute at least one-third of the total number of persons on the committee.

(3) In addition to the duties and powers of the registration committee under Parts 2 and 3 of the Act, the committee is responsible for the duties and powers granted to the committee under Division B of these bylaws.

Hearing Instrument Practitioner Examination Advisory Committee

21.1(1) The hearing instrument practitioner examination advisory committee is established consisting of at least four audiologists or hearing instrument practitioners appointed by the board and must include at least two audiologists.

(2) The hearing instrument practitioner examination advisory committee reports to the registration committee.

(3) In addition to any tasks or projects the registration committee may direct the hearing instrument practitioner examination advisory committee to undertake, the committee is responsible for the following:

- (a) developing the content of the practical examination and overseeing the examination;
- (b) developing or selecting the written examination;
- (c) monitoring and making recommendations to the board in relation to the examination requirements for hearing instrument students.

(4) In carrying out its responsibilities, the hearing instrument practitioner examination advisory committee may consult, as it considers necessary or appropriate, with registrants or other individuals who have expertise relevant to a particular area of practice or on any other matter considered by the committee.

Inquiry committee

22(1) The inquiry committee is established consisting of at least five persons appointed by the board, and must include

- (a) at least one registrant from each profession, and
- (b) at least two public representatives.

(2) The number of public representatives on the inquiry committee must constitute at least one-third of the total number of persons on the committee.

(3) In addition to the duties and powers of the inquiry committee under sections 33 to 37.1 of the Act, the committee is responsible for the duties and powers granted to the committee under Part 14 of these bylaws.

Discipline committee

23(1) The discipline committee is established consisting of at least five persons appointed by the board, and must include

- (a) at least one registrant from each profession, and
- (b) at least two public representatives.

(2) The number of public representatives on the discipline committee or a panel of the committee must constitute at least one-third of the total number of persons on the committee or panel.

(3) Subject to section 12(3)(b), a person must not simultaneously be a member of the inquiry committee and the discipline committee.

(4) In addition to the duties and powers of the discipline committee under sections 38 and 39 of the Act, the committee is responsible for the duties and powers granted to the committee under Part 15 of these bylaws.

Quality assurance committee

24(1) The quality assurance committee is established consisting of at least five persons appointed by the board, and must include

- (a) at least one registrant from each profession, and
- (b) at least two public representatives.

(2) The number of public representatives on the quality assurance committee must constitute at least one-third of the total number of persons on the committee.

(3) In addition to the duties and powers of the quality assurance committee under sections 26.1 and 26.2 of the Act, the committee is responsible for the duties and powers granted to the committee under these bylaws.

(4) The quality assurance committee is responsible for:

- (a) preparing the Code of Ethics and the Standards of Practice to enhance the quality of practice and to reduce incompetent, impaired or unethical practice among registrants for approval by the board;
- (b) reviewing the existing Code of Ethics and Standards of Practice, and to recommend changes to the board for its approval;
- (c) establishing and maintaining a quality assurance program to promote high standards of practice among registrants;
- (d) assessing the professional performance of registrants;
- (e) approving continuing competency courses or programs required in these bylaws.

Advanced competency advisory committee

25(1) An advanced competency advisory committee is established consisting of the following persons appointed by the board:

- (a) at least six registrants with equal representation from each profession;
- (b) at least one physician confirmed by the College of Physicians and Surgeons of British Columbia as suitable for membership on the committee.

(2) Notwithstanding section 29(4), the advanced competency advisory committee must report to the quality assurance committee and do so in a form and at a time as directed by the quality assurance committee.

(3) In addition to any tasks or projects the quality assurance committee may direct the advanced competency advisory committee to undertake, the committee is responsible for:

- (a) developing for consideration by the committee the standards of practice for registrants who are granted an advanced competency certificate under Part 10;
- (b) monitoring the application of the approved standards and recommend to the quality assurance committee revisions to those standards;
- (c) monitoring and making recommendations to the board in relation to the requirements for advanced competency certificates under Part 10.

(3) In carrying out its responsibilities, the advanced competency advisory committee may consult, as it considers necessary or appropriate, with registrants or other individuals who have expertise relevant to a particular area of practice or on any other matter considered by the committee.

Client relations committee

26(1) The client relations committee is established consisting of at least five persons appointed by the board, and must include

- (a) at least one registrant from each profession, and
- (b) at least one public representative.

(2) The number of public representatives on the client relations committee must constitute at least one-third of the total number of persons on the committee.

(3) The client relations committee is responsible for

- (a) establishing and maintaining procedures by which the college deals with complaints of professional misconduct of a sexual nature,
- (b) monitoring and periodically evaluating the operation of procedures established under paragraph (a),
- (c) developing and coordinating, for the college, educational programs on professional misconduct of a sexual nature for registrants and the public as required,
- (d) establishing a client relations program to prevent professional misconduct, including professional misconduct of a sexual nature,
- (e) developing guidelines for the conduct of registrants with their clients, and
- (f) providing information to the public regarding the college's complaint and disciplinary process.

Finance and administration committee

27(1) The finance and administration committee is established consisting of at least three persons appointed by the board, one of which must be a board member.

(2) The finance and administration committee is responsible for

- (a) managing the college's system of financial administration, including

- (i) accounting practices and systems, including classification of accounts, internal control and auditing systems,
 - (ii) financial planning,
 - (iii) budgetary control,
 - (iv) ensuring the safekeeping of college assets, including assets held in trust,
 - (v) managing college revenues, including receipt, recording and control of funds and deposit to accounts maintained by the board,
 - (vi) producing financial reports for the use of the board, and submitting a financial statement to the accountant immediately after the close of each fiscal year,
- (b) advising the board on the needs of the college in regard to financial administration, and the financial implications of board decisions,
 - (c) advising the board on the application of legislative, regulatory and other financial requirements to the college,
 - (d) developing, establishing and administering, for the approval of the board, financial policies, systems and procedures essential to the financial administration of the college, and
 - (e) overseeing the organization, staffing and training of financial staff of the college.

Support personnel liaison committee

28(1) The support personnel liaison committee is established consisting of at least six registrants and support personnel appointed by the board, which must include

- (a) at least one registrant from each profession, one of which must be a member of the quality assurance committee, and
- (b) at least one support person from each profession.

(2) Notwithstanding section 29(4), the support personnel liaison committee must report to the quality assurance committee and do so in a form and at a time as directed by the quality assurance committee.

(3) The support personnel liaison committee is responsible for

- (a) developing and recommending to the quality assurance committee the standards of practice and other clinical decision support tools to assist registrants in the supervision, assignment and delegation to support personnel,
- (b) providing information and resources to registrants regarding their use of support personnel, and
- (c) undertaking such other tasks or projects as may be assigned by the quality assurance committee or the board.

Committee terms, membership, chair and reporting requirements

29(1) The board may set the term of a person appointed to a committee and may reappoint such a person.

(2) The board may remove a committee member by a majority vote.

(3) The board must designate the chair and vice-chair of a committee from among the members of the committee.

(4) The chair of a committee must report to the board and do so in a form and at a time as directed by the board.

(5) A committee must submit an annual report of its activities of the past year to the board and do so in a form and at a time as directed by the board.

Meetings of a committee

30(1) A majority of a committee constitutes a quorum.

(2) The absence of a public representative or an appointed board member at a meeting of a committee does not invalidate an act or decision of that committee performed or made during that meeting.

(3) Sections 11, 13(6) & (7), 15, 16 and 17 apply to a committee as if it were the board.

Part 3 – Panels

Definitions

31. In this Part,

“**profession-specific panel**” means a panel that is composed of a majority of registrants of one profession;

“**standing panel**” means a panel that will meet on an on-going basis.

Committee panels

32(1) The board or a committee may meet in panels or establish panels.

(2) A panel established under subsection (1) may be a profession-specific panel, a standing panel or both.

Composition of panels

33(1) A panel must be composed of at least three persons.

(2) If a panel is to exercise a statutory authority, the number of public representatives on the panel must constitute at least one-third of the total number of persons on the panel.

(3) If a panel is to consider an issue that requires the expertise of a registrant of one of the three professions, the panel must be a profession-specific panel.

(4) The board or committee establishing a panel must

(a) appoint the members of a panel in accordance with subsections (2) and (3), and

(b) subject to section 34(5), appoint the chair of the panel.

(5) The board or a committee may establish a roster of registrants and public representatives to sit on panels that may be established under this Part.

Activated panels

34(1) This section applies only to the board, the registration committee, the inquiry committee, the discipline committee and the quality assurance committee.

(2) If the board or a committee

(a) is to consider an issue or make a decision that

(i) is to be addressed or made by the board or a committee in the course of exercising or performing a statutory power or duty, and

(ii) requires the expertise of a registrant of one of the three professions, but

(b) the members cannot agree to establish a profession-specific panel for that purpose or assign the issue to a profession-specific standing panel,

a member of the board or committee from the profession in question may activate the creation of a profession-specific panel or refer the matter to a profession-specific standing panel of a committee.

(3) To activate a panel under subsection (2), the member must advise the chair of the board or committee in writing that that member is creating the profession-specific panel under this section.

(4) The board or committee cannot veto or over-ride a member's decision to activate a panel once the panel has been activated under subsection (2).

(5) The member who has activated the creation of a panel or the referral under subsection (2) may chair the activated panel.

Authority of a panel

35(1) A panel of the board or a committee established under this Part may exercise any power, duty, or function of the board or that committee required under the Act or these bylaws and may do so on behalf of and in the name of the board or committee, and without the need for final approval by the board or committee.

(2) A panel that has made a decision on behalf of and in the name of the board or committee must promptly report that decision to the board or committee and do so in a form and at a time as may be directed by the board or committee.

(3) A panel activated under section 34 ceases to exist after that panel has made its final report to the board or committee in accordance with subsection (2).

Meetings of a panel

36(1) A majority of the members of a panel constitute a quorum.

(2) The absence of a public representative or an appointed board member at a meeting of a panel does not invalidate an act or decision of that panel performed or made during that meeting.

(3) Sections 11, 13(6) & (7), 15, 16 and 17 apply to a panel as if it were the board.

Part 4 – General Meetings of Registrants

General meetings

37(1) A general meeting must be

- (a) held in British Columbia at a time and place determined by the board, and
- (b) open to the public.

- (2) An annual general meeting must be held at least once in every calendar year and not more than 15 months after the holding of the last preceding annual general meeting.
- (3) The following matters must be considered at an annual general meeting
 - (a) financial statements,
 - (b) the report of the board,
 - (c) the report of the registrar,
 - (d) the report of the accountant, if any; and
 - (e) a resolution proposed by a registrant under section 39, if any.
- (4) Every general meeting, other than an annual general meeting, is an extraordinary general meeting.
- (5) The board
 - (a) may convene an extraordinary general meeting by resolution of the board, and
 - (b) must convene an extraordinary general meeting within 60 days after receipt by the registrar of a request for such a meeting signed by at least 10 percent of
 - (i) the registrants from a profession who are eligible to vote, or
 - (ii) registrants who are eligible to vote.

Notice of general meetings

38(1) Subject to section 40(5), the registrar must provide notice of a general meeting to every registrant, and the public at least 45 days prior to the meeting.

- (2) Notice of a general meeting must include
 - (a) the place, day and time of the meeting,
 - (b) the general nature of the matters to be considered at the meeting,
 - (c) any resolutions proposed by the board, and
 - (d) any resolutions proposed by registrants under section 39 and delivered to the registrar before the notice is provided.
- (3) The registrar may satisfy the requirement to provide notice under subsection (1) and section 40(6) by posting on the college website notice of that complies with subsection (2).

(4) The accidental omission to provide notice of a general meeting to, or the non-receipt of such notice by, a registrant, a person entitled to receive it does not invalidate proceedings at that meeting.

Resolutions proposed by registrants

39(1) At least 30 days prior to the date of a general meeting, any 20 registrants who are eligible to vote at the meeting may deliver to the registrar a written request to introduce a resolution at the meeting.

(2) If a resolution received in compliance with subsection (1) has not been included in the notice for a general meeting under section 38(2)(d), the registrar must post a copy of the resolution on the college website at least 14 days prior to the date of the meeting.

(3) A registrant who is eligible to vote at a general meeting may propose a resolution from the floor of the meeting, and any such resolution will be noted by the chair of the meeting and placed at the end of the agenda to be debated if time permits.

(4) Subject to section 55(2), all resolutions at a general meeting are for the considerations of the board and are not binding on the board.

Proceedings at general meetings

40(1) Subject to subsection (6), a quorum for a general meeting is 10 registrants who are eligible to vote at the meeting.

(2) If there ceases to be a quorum present during a general meeting, the business then in progress must be suspended, and while a quorum is not present, no further business may be conducted, other than the adjournment or termination of the meeting.

(3) An annual general meeting or an extraordinary general meeting convened by resolution of the board under section 37(5)(a) must be adjourned to a date within 45 days, at a time and place to be determined by the board, if a quorum is not present within 30 minutes from

(a) the time appointed for the start of the meeting, or

(b) any time during the meeting when there ceases to be a quorum present.

(4) An extraordinary general meeting convened further to a request under section 37(5)(b) must be adjourned and cancelled and no further action may be taken in respect of the request to convene the meeting if a quorum is not present within 30 minutes from

- (a) the time appointed for the start of the meeting, or
 - (b) any time during the meeting when there ceases to be a quorum present.
- (5) When a general meeting is adjourned under subsection (3) or by motion, notice of the rescheduled meeting in accordance with section 38(2) must be provided to every registrant and the public at least 15 days prior to the date of the rescheduled meeting.
- (6) The registrants who attend a general meeting reconvened following an adjournment under subsection (3) and who are eligible to vote at the meeting will be deemed to be a quorum for the meeting.
- (7) No business may be transacted at a general meeting that is reconvened following an adjournment other than the business left unfinished when the meeting was adjourned.
- (8) In the absence of both the chair and the vice-chair of the board, an acting chair for a general meeting must be elected by a majority vote of the registrants present who are eligible to vote.
- (9) No resolution proposed at a general meeting need be seconded and the chair of the meeting may propose a resolution.
- (10) Except as these bylaws otherwise provide, the most recent edition of *Robert's Rules of Order* governs the procedures at a general meeting.

Voting

- 41(1) A registrant eligible to vote at a general meeting who is present at a general meeting is entitled to one vote, and the chair of the meeting, if the chair is a registrant eligible to vote at a general meeting, is entitled to one vote.
- (2) Voting at a general meeting may be conducted
- (a) by a show of hands, or
 - (b) by a secret ballot, if
 - (i) the chair of the meeting determines that the subject matter of the vote warrants, or
 - (ii) the registrants eligible to vote at the meeting vote in favour of this option.
- (3) In case of an equality of votes, the chair of the meeting does not have a casting or second vote in addition to the vote to which he or she may be entitled under subsection (1), and the proposed resolution does not pass.

Notice to public representatives

42. Every notice provided to registrants under section 38(1) and 40(5) must also be provided to the public representatives.

Part 5 – College Records

Definitions

43. In this Part,

"**personal information**" means "personal information" as defined in Schedule 1 of the *Freedom of Information and Protection of Privacy Act*;

"**record**" means a "record" as defined in Schedule 1 of the *Freedom of Information and Protection of Privacy Act*.

Body responsible for administering FIPPA

44(1) The registrar is the "head" of the college for the purposes of the *Freedom of Information and Protection of Privacy Act*.

(2) The registrar may authorize a deputy registrar, a person employed by the college or a person who has contracted to perform services for the college to perform any duty or exercise any function of the registrar that arises under the *Freedom of Information and Protection of Privacy Act*.

(3) The board is responsible for ensuring that the registrar fulfils the duties of the head, as set out under the *Freedom of Information and Protection of Privacy Act*.

(4) The registrar must report annually to the board regarding the steps the registrar has taken to fulfil the head's duties as set out under the *Freedom of Information and Protection of Privacy Act*.

Fees for information requests

45. Subject to section 75 of the *Freedom of Information and Protection of Privacy Act*, an applicant who requests access to a college record under section 5 of the *Freedom of Information and Protection of Privacy Act* must pay the fees, as set out in Schedule C for services required to comply with the information request.

Protection of personal information

46(1) The board must take all reasonable measures to ensure that the collection, use, and disclosure of personal information occurs in accordance with the *Freedom of Information and Protection of Privacy Act*.

(2) The board must take reasonable measures to ensure that, if personal information is sent to any person or service organization for processing, storage or destruction, a contract is made with that person or organization that includes an undertaking by the person or organization that confidentiality will be maintained.

Disclosure of annual report

47. The college must

- (a) make its annual report available electronically on the college website without charge,
- (b) notify every registrant that the annual report is available, and
- (c) provide a hard copy of the annual report to any person on request upon payment of the applicable fee specified in Schedule C.

Disclosure of registration status

48(1) Where the board or the registrar receives an inquiry about the registration status of a person, the registrar must disclose, in addition to the matters required by section 22 of the Act,

- (a) whether or not the person is a registrant or a former registrant,
- (b) whether or not the discipline committee has ever issued an order relating to the person under section 39 of the Act and the details of the order,
- (c) whether or not the person has ever signed a consent order under section 36 of the Act, and
- (d) the details of a consent order pertaining to a change in the person's registration status or a restriction on the practice of the profession of the registrant.

(2) Except with the consent of the person affected, the registrar must not release the names of complainants, clients, or their families or information that might otherwise enable a person inquiring about the status of a registrant to establish the identity of complainants, clients or their families.

Manner of disposal of college records containing personal information

49. The board must ensure that a college record containing personal information is disposed of only by

- (a) effectively destroying a physical record by utilizing a shredder or by complete burning,
- (b) erasing information recorded or stored by electronic methods on tapes, disks or cassettes in a manner that ensures that the information cannot be reconstructed,
- (c) returning the record to the person the information pertains to, or
- (d) returning the record to the registrant who compiled the information.

Part 6 – College Administration

Seal

50(1) The board must approve a seal for the college.

(2) Before the college seal is affixed to a document, the board must approve the use of the seal and designate the persons to so affix the seal.

(3) The seal of the college must be affixed to

- (a) certificates of registration,
- (b) certificates of advanced competency,
- (c) support personnel certificates, and
- (d) such other documents as the board may direct by resolution.

Deputy registrar

51. If a deputy registrar is appointed by the board,

- (a) the deputy registrar is authorized to perform all duties and exercise all powers of the registrar, subject to the direction of the registrar, and
- (b) if the registrar is absent or unable for any reason to act, the deputy registrar is authorized to perform all duties and exercise all powers of the registrar.

Fiscal year

52. The fiscal year of the college commences on April 1 and ends on March 31 of the following year.

Banking

53. The board must establish and maintain such accounts with a chartered bank, trust company or credit union as the board determines necessary from time to time.

Payments and commitments

54(1) The registrar may approve payments and commitments for the purchase of goods and services up to \$10,000.

(2) The board or a board member designated by the board must approve payments and commitments for the purchase of goods and services in the amount of \$10,000 or more.

(3) The board must not purchase real property without a special resolution approved by the registrants of the college at a general meeting.

Borrowing powers

55(1) The board may raise money or guarantee or secure the payment of money in the name of the college, in any manner determined by the board, in order to carry out the purposes of the college.

(2) The registrants may, by special resolution at a general meeting, restrict the borrowing powers of the board.

Investments

56. The board may invest funds of the college in any investments authorized under sections 15.1 and 15.2 of the *Trustee Act* in the name of the college and may change those investments.

Accountant

57(1) The board may appoint a chartered accountant or a certified general accountant to prepare information about the financial systems and records of the college.

(2) The registrar must submit the financial statement to the accountant within 60 days of the end of the fiscal year.

(3) The registrar must include an overview of the College's finances in the annual report, with a notice that a copy of the accountant's full financial report is available on request.

Legal counsel

58. The board or, with the approval of the board, a committee or panel, may retain legal counsel for the purpose of assisting the board, committee or panel in carrying out any power or duty under the Act, the regulations or these bylaws.

Insurance

59. The board may cause the college to maintain insurance in such amounts and on such terms and conditions as the board may determine from time to time, including:

- (a) general or third-party liability insurance;
- (b) directors and officers insurance;
- (c) fidelity insurance or bonding in respect of its officers and employees.

DIVISION B – REGISTRATION AND CERTIFICATION

Definitions

60. For the purposes of these bylaws:

“**active registrant**” means a registrant who has been registered in one or more of the classes of registrants established in sections 61(a) to (c);

“**conditional active registrant**” means a registrant who has been registered in one or more of the classes of registrants established in sections 61 (c.1) or (c.2);

“**inactive registrant**” means a registrant who has been registered in one or more of the classes of registrants established in sections 61(g) to (i);

“**retired registrant**” means a registrant who has been registered in one or more of the classes of registrants established in sections 61(j) to (l);

“**temporary registrant**” means a registrant who has been registered in one or more of the classes of registrants established in sections 61(m) to (o);

“**temporary registrant (teaching)**” means a registrant who has been registered in one or more of the classes of registrants established in sections 61(p) to (r).

Part 7 – Registration (All Professions)

Classes of registrants

61. The following classes of registrants are established:

- (a) active registration – audiologist;
- (b) active registration – hearing instrument practitioner;
- (c) active registration – speech-language pathologist;
 - (c.1) conditional active registration – audiologist;
 - (c.2) conditional active registration – speech-language pathologist;
- (d) [Repealed 2016-05-08.]
- (e) [Repealed 2016-05-08.]
- (f) [Repealed 2016-05-08.]
- (g) inactive registration – audiologist;
- (h) inactive registration – hearing instrument practitioner;
- (i) inactive registration – speech-language pathologist;

- (j) retired registration – audiologist;
- (k) retired registration – hearing instrument practitioner;
- (l) retired registration – speech-language pathologist;
- (m) temporary registration – audiologist.
- (n) temporary registration – hearing instrument practitioner;
- (o) temporary registration – speech-language pathologist;
- (p) temporary registration, teaching – audiologist.
- (q) temporary registration, teaching – hearing instrument practitioner;
- (r) temporary registration, teaching – speech-language pathologist.

Payment of registration and other fees

62(1) Where a section in these bylaws states that an applicant, a registrant or a support person must pay an application, examination, registration, renewal or any other fee, the applicant, registrant or support person, as the case may be, must make payment

- (a) in full and in the amount specified in Schedule A,
- (b) by the date specified, and
- (c) if payment is made in the form of a cheque or money order, that it be made payable to “College of Speech and Hearing Health Professionals of BC”.

(2) The college may establish other methods to ensure the full and prompt payment of fees, including payment by credit card.

Fee adjustments

63(1) If a registrant is registered as a registrant in two or more professions, that registrant need only pay the fees for one profession.

(2) If a registrant is granted registration other than in the first quarter of the fiscal year, the registration committee must reduce the applicable registration fee for the balance of the licensing year, pro-rated on a quarterly basis.

Inactive registration

64(1) The registration committee may grant inactive registration to an active registrant if the registrant has completed on-line:

- (a) an application for inactive registration (Form #16),

- (b) a statutory declaration attesting that, while registered under this section, he or she will not provide in the province of British Columbia during the registration year the services of a hearing instrument practitioner, speech-language pathologist or audiologist, as the case may be (Form #16), and
 - (c) payment of the inactive registration fee, as set out in Schedule A.
- (2) An inactive registrant
- (a) must fulfil during the period of inactive registration the continuing competency requirements of an active registrant as required by section 159,
 - (b) may not provide in the province of British Columbia the services of a hearing instrument practitioner, speech-language pathologist or audiologist, as the case may be,
 - (c) may use the occupational title granted to his or her profession but only with the addition of “(Inactive)” at the end.
- (3) An inactive registrant may only be registered under this section a maximum of three consecutive years.
- (4) An inactive registrant is eligible:
- (a) to vote in an election for members of the board under section 5;
 - (b) to vote at a meeting of the membership under section 41;
 - (c) but not to be nominated or appointed as a member of the board under sections 4 or 10.

Retired registration

65(1) The registration committee may grant retired registration to an active registrant if the registrant has completed on-line:

- (a) an application for retired registration (Form #16),
 - (b) a statutory declaration attesting that he or she will no longer provide the services of a hearing instrument practitioner, speech-language pathologist or audiologist, as the case may be (Form #16), and
 - (c) payment of the retired registration fee, as set out in Schedule A.
- (2) An retired registrant
- (a) may not provide the services of a hearing instrument practitioner, speech-language pathologist or audiologist, as the case may be,

- (b) may not provide in the province of British Columbia the services of a hearing instrument practitioner, speech-language pathologist or audiologist, as the case may be,
 - (c) may use the occupational title granted to his or her profession but only with the addition of “(Retired)” at the end.
- (3) An retired registrant must apply every year to renew and maintain retired registration, by renewing as prescribed in section 78.
- (i) [Repealed 2016-05-08.]
 - (ii) [Repealed 2016-05-08.]
- (4) A retired registrant is eligible:
- (a) to be nominated or appointed as a member of the board under sections 4 or 10;
 - (b) to vote in an election for members of the board under section 5;
 - (c) to vote at a meeting of the membership under section 41.

Temporary registration

66(1) An applicant may be granted temporary registration by the registration committee for a period of time to be established by the committee, not to exceed three months, if the applicant

- (a) is a member in good standing of a regulatory body that governs one or more of the professions in another jurisdiction, and
- (b) is a Canadian citizen or is entitled to work in Canada; and
- (c) has delivered to the registrar
 - (i) a signed Form #2 registration application (temporary registration),
 - (ii) a completed Form #3 statutory declaration attesting that he or she will only be providing the services a hearing instrument practitioner, speech-language pathologist or audiologist, as the case may be, in the province for a period of time not to exceed three months,
 - (iii) a signed Form #5 criminal record check authorization, current within six months of the application,
 - (iv) payment of the criminal records check and temporary registration fees, as set out in Schedule A, and

- (v) proof of professional liability insurance or coverage required by section 151 and effective on or before the date of registration.
- (2) A person who has been granted temporary registration under subsection (1)
 - (a) may only perform the services of an active registrant as may be required by the registration committee and under such supervision or upon such limits or conditions that the committee may also set, and
 - (b) may use the occupational title granted to his or her profession but only with the addition of “(Temporary)” at the end.
- (3) The temporary registration of a person registered under subsection (1) expires after three months from the date the person is placed on the temporary register.
- (4) A temporary registrant may apply to renew a temporary registration for an additional three months before it expires by
 - (a) submitting a completed Form #4 registration renewal (temporary registration), and
 - (b) paying the renewal fee, as set out in Schedule A.
- (5) A temporary registrant is not eligible
 - (a) to be nominated or appointed as a member of the board under sections 4 or 10;
 - (b) to vote in an election for members of the board under section 5;
 - (c) to vote at a meeting of the membership under section 41.

Temporary (teaching) registration

- 67(1) This section applies to a person who
- (a) will be demonstrating on a person the performance of a restricted activity that has been granted to the professions under section 5 of the Regulation,
 - (b) will not be doing the demonstration for longer than three months, and
 - (c) is not a registrant of the college or the registrant of another college established under the Act that has been granted the same restricted activity, where such a demonstration is being done,
 - (d) to help a student fulfil the conditions or requirements for registration as a member of the college under section 50(4)(b) of the Act,
 - (e) to help a registrant fulfil the conditions or requirements to be granted an advanced competency certificate as required under section 6 of the Regulation, or

(f) for any other educational or training purpose.

(2) An applicant may be granted temporary registration (teaching) by the registration committee for a period of time established by the committee, but not to exceed three months, if the applicant

(a) is either

- (i) a member in good standing of a regulatory body that governs one or more of the professions in another jurisdiction, or
- (ii) in possession of academic qualifications in relation to the restricted activity to be demonstrated that are acceptable to the committee,

(b) has delivered to the registrar

- (i) a signed Form #2 registration application (temporary registration, teaching),
- (ii) a completed Form #3 statutory declaration attesting
 - (A) that he or she will only be performing a restricted activity for the purposes set out in subsection (1),
 - (B) to his or her registration status in a regulatory body or academic qualifications, as specified in subsection (2)(a),
- (iii) payment of the temporary registration fee, as set out in Schedule A, and
- (iv) proof of professional liability insurance or coverage required by section 151 and effective on or before the date of registration.

(3) A person who has been granted temporary registration (teaching) under subsection (2)

(a) may only perform the services of an active registrant as may be required by the registration committee and under such terms or conditions as the committee may set, and

(b) must not use an occupational title granted to registrants under section 3 of the Regulation.

(4) The temporary registration of a person granted under subsection (2) expires after three months from the date the person is placed on the temporary register (teaching).

(5) A temporary registrant (teaching) may apply to renew a temporary registration (teaching) for an additional three months before it expires by

- (a) submitting a completed Form #4 registration renewal (temporary registration, teaching), and
 - (b) payment of the renewal fee, as set out in Schedule A.
- (6) A temporary registrant (teaching) is not eligible
- (a) to be nominated or appointed as a member of the board under sections 4 or 10;
 - (b) to vote in an election for members of the board under section 5;
 - (c) to vote at a meeting of the membership under section 41.

Examinations

68(1) All examinations required to be taken under these bylaws must be prepared or approved by the registration committee.

- (2) The registration committee may
- (a) determine the time and place for the holding of an examination, designate examiners or invigilators and determine the procedures for the conduct of the examinations,
 - (b) review the results of the examination or re-examination for each applicant and make a determination as to that applicant's qualification for registration, and
 - (c) notify the applicant of the results of the examination or re-examination as soon as is practicable.
- (3) An applicant for whom an examination administered by the College is required under these bylaws must
- (a) pay the examination fee, as set out in Schedule A, and at least two weeks prior to the date of the examination, and
 - (b) attend for examination at a date, time and place as set by the registration committee.

Examination failures

69(1) An applicant who fails an initial examination is entitled to two further opportunities to repeat the examination and must complete all attempts within two years from the date of the applicant's initial application.

- (2) An applicant who fails an examination a third time may apply for licensure again, but only after the passage of two years.

Improper conduct during an examination

70(1) Where an examiner or invigilator has reason to believe that an applicant has engaged in improper conduct during the course of an examination, the invigilator

- (a) must make a report to the applicable committee, and
- (b) may recommend in that report that the applicable committee take one or more of the following courses of action
 - (i) fail the applicant,
 - (ii) pass the applicant,
 - (iii) require the applicant to rewrite the examination, or
 - (iv) disqualify the applicant from participating in any examination for a defined period of time.

(2) After considering a report made under subsection (1)(a), the applicable committee may take one or more of the courses of action specified in subsection (1)(b).

(3) The applicable committee must provide an applicant disqualified under subsections (1)(b)(iv) and (2) written reasons for that disqualification.

Transferring registrant (labour mobility within Canada)

71(1) This section applies to an applicant who is registered as a member of a profession in another Canadian jurisdiction and is seeking to be registered as an active registrant in British Columbia under these bylaws under the *BC-Alberta Trade, Investment and Labour Mobility Agreement* or the *national Agreement on Internal Trade*.

(2) Where, at the time of application, an applicant is a member of a regulatory body that governs one or more of the professions in another jurisdiction, the applicant must arrange for that regulatory body to provide to the registration committee

- (a) a letter to be sent directly to the committee
 - (i) confirming that the applicant is currently a member in good standing of the profession being applied for, and
 - (ii) stating the type of registration or membership held by the applicant in that regulatory body, and
- (b) any other information or documents requested by the committee.

- (c) is not the subject of an active complaint investigation or an active citation or disciplinary proceeding initiated by the home jurisdiction; and
- (d) does not have any sanctions or practice restrictions placed on his or her practice by the home jurisdiction.

(3) The provisions of sections 82(2)(a), (b), (e), (f), (h), (i), (j) and (k), apply to an applicant who is applying to transfer as a hearing instrument practitioner under this section.

(4) The provisions of sections 85(3)(a), (b), (f), (g), (i), (j), (k) and (l) apply to an applicant who is applying to transfer as an audiologist or speech-language pathologist under this section.

Repealed

72. [Repealed 2016-05-08.]

Substantial equivalency

73. Despite sections 82 and 85, the registration committee has the discretion, in satisfying itself under section 20 of the Act that an applicant meets the conditions or requirements for registration as a registrant of the college, to consider whether the applicant's knowledge, skills, abilities, and employment experience are substantially equivalent to the standards of academic or technical achievement and the competency or other qualifications of

- (a) a hearing instrument practitioner as required in sections 82(1)(a) and (c), and to grant registration on that basis, if the applicant also meets the requirements established in sections 82(1)(b) and (d) to (i), or
- (b) an audiologist or speech-language pathologist as required in sections 85(1)(a) and (2), and to grant registration on that basis, if the applicant also meets the requirements established in sections 85(1)(b) to (h).

Issuing a certificate of registration

74(1) The registrar must, on the instruction of the registration committee, issue a certificate of registration to a person who, in the committee's determination, meets the requirements for registration.

- (2) A certificate of registration issued under subsection (1) must state
 - (a) the class of registration as listed in section 61,

- (b) the name of the certificate holder,
 - (c) the date the certificate was issued,
 - (d) the expiry date as set by subsections (3) or (4), and
 - (e) the limits or conditions that may apply to that registrant or class of registrant, if any.
- (3) A certificate of registration for active registration, conditional active registration, inactive registration, or retired registration is valid until no later than the following March 31.
- (4) A certificate of registration for temporary registration or temporary registration (teaching) or any renewal of such a certificate is valid until the end date of the period of registration established by the registration committee under section 66 or 67.

Proof of registration

75(1) A registrant must be able to provide proof that he or she is a registrant of the college and registered in the applicable class of registration, by one or more of the following:

- (a) displaying a certificate of registration issued under section 74 in a prominent location at the registrant's place of business to which the general public has access;
 - (b) referring the public to the register posted on the college website;
 - (c) allowing a member of the public to inspect the wallet identification card issued by the college.
- (2) In relation to subsection 75(1)(a), if a registrant has more than one place of business, the registrant must display
- (a) the certificate of registration in the registrant's main place of business, and
 - (b) a copy of that certificate of registration in every other place of business other than the main place of business.

76. [Repealed 2018-10-26.]

Return of a certificate of registration

77. A registrant must immediately return to the registration committee a certificate of registration or any photocopies of it, and any other proof of registration issued by the committee, if any of the following occur:

- (a) if the registrant has been served notice that his or her certificate of registration has been suspended or cancelled under Part 3 of the Act;
- (b) if the registrant is deemed to no longer be a registrant of the college under section 76.
- (c) [Repealed 2016-05-08.]

Conditions and requirements for renewal (active, conditional active, inactive and retired)

78(1) To be eligible for renewal of registration, an active registrant, conditional active registrant, inactive registrant or retired registrant must meet all of the following conditions and requirements on or before March 31:

- (a) complete on-line or deliver to the registrar a completed Form #4 application for renewal;
- (b) pay the renewal fee applicable to his or her class of registration set out in Schedule A;
- (c) pay any other outstanding fee, debt or levy owed to the college;
- (d) attest that he or she is in compliance with the Act, the regulations and these bylaws, and is in compliance with any limits or conditions on his or her practice imposed under section 20, 32.2, 32.3, 33, 35, 36, 37.1, 38, 39 or 39.1 of the Act;
- (e) provide proof of having met all applicable requirements of the quality assurance program under sections 159 and 160.

(2) Notice of the renewal fee to be paid under subsection (1)(b) must

- (a) no later than January 31, be delivered to each active registrant, inactive registrant and retired registrant, and each conditional active registrant who is eligible for renewal of his or her registration under section 87.9(3) and (4), and
- (b) describe the consequences of late payment or non-payment of the renewal fee.

(3) A renewal fee may be paid in advance instalments if approved by the registration committee.

(4) Despite subsection (1), to be eligible for renewal of registration, a new active registrant or conditional active registrant also must, on or before the first March 31 after he or she is granted registration as an active registrant or conditional active registrant, successfully complete the jurisprudence course specified by the registration committee.

Registration renewal – active

78.1(1) The registrar must provide an active registrant with written confirmation of renewal of registration if the active registrant has

(a) met all the conditions and requirements established in section 78(1), and

(b) if applicable,

(i) paid the renewal late fee in accordance with subsections (2) and (3),

and

(ii) successfully completed the jurisprudence course under section 78(4).

(2) In addition to the renewal fee under section 78(1)(b), an active registrant must pay the renewal late fee set out in Schedule A if he or she does not, on or before March 31,

(a) meet all the conditions and requirements established in section 78(1), and

(b) if applicable, successfully complete the jurisprudence course under section 78(4).

(3) The registration of an active registrant described in subsection (2) is cancelled if he or she fails to do all of the following on or before April 30:

(a) meet all the conditions and requirements established in section 78(1);

(b) if applicable, successfully complete the jurisprudence course under section 78(4);

(c) pay the renewal late fee set out in Schedule A.

(4) A renewal of registration for an active registrant is valid until no later than the following March 31.

Registration renewal – conditional active

78.2(1) Subject to section 87.9(3) and (4), the registrar must provide a conditional active registrant with written confirmation of renewal of registration if the conditional active registrant has

- (a) met all the conditions and requirements established in section 78(1), and
- (b) if applicable,
 - (i) paid the renewal late fee in accordance with subsections (2) and (3), and
 - (ii) successfully completed the jurisprudence course under section 78(4).

(2) Subject to section 87.9(3) and (4), in addition to the renewal fee under section 78(1)(b), a conditional active registrant must pay the renewal late fee set out in Schedule A if he or she does not, on or before March 31,

- (a) meet all the conditions and requirements established in section 78(1), and
- (b) if applicable, successfully complete the jurisprudence course under section

78(4).

(3) The registration of a conditional active registrant described in subsection (2) is cancelled if he or she fails to do all of the following on or before April 30:

- (a) meet all the conditions and requirements established in section 78(1);
- (b) if applicable, successfully complete the jurisprudence course under section 78(4);
- (c) pay the renewal late fee set out in Schedule A.

(4) Subject to subsection (5), a renewal of registration for a conditional active registrant is valid until no later than the following March 31.

(5) A renewal of conditional active registration must not extend the total period of registration under section 87.9 beyond two years.

Registration renewal – inactive, retired

78.3(1) The registrar must provide an inactive registrant or retired registrant with written confirmation of renewal of registration if the inactive registrant or retired registrant has

- (a) met all the conditions and requirements established in section 78(1), and
- (b) if applicable, paid the renewal late fee in accordance with subsections (2) and (3).

(2) In addition to the renewal fee under section 78(1)(b), an inactive registrant or retired registrant must pay the renewal late fee set out in Schedule A if he or she does not, on or before March 31, meet all the conditions and requirements established in section 78(1).

(3) The registration of an inactive registrant or retired registrant described in subsection (2) is cancelled if he or she fails to do both of the following on or before April 30:

- (a) meet all the conditions and requirements established in section 78(1);
- (b) pay the renewal late fee set out in Schedule A.

(4) Subject to subsection (5), a renewal of registration for an inactive registrant or retired registrant is valid until no later than the following March 31.

(5) A renewal of inactive registration must not extend the period of registration under section 64 beyond three years.

Reinstatement after suspension or cancellation

79(1) A registrant whose registration has been suspended or cancelled under sections 39(1)(d) or (e) of the Act may apply to the registration committee for reinstatement

- (a) after the period of time of suspension or cancellation set out in the disciplinary decision, or
- (b) if a period of time was not set out in the disciplinary decision, after the expiration of two years from the date of the suspension or cancellation, by
- (c) submitting Form #7, application for reinstatement, and
- (d) paying the reinstatement fee as set out in Schedule A.

(2) When considering an application for reinstatement under this section, the registration committee must consider whether

- (a) the applicant poses a risk to clients or public health or safety, and
- (b) the goals of deterrence and rehabilitation, including whether any quality assurance programs ordered by the discipline committee or panel have been met.

Reinstatement following non-payment of fees

80(1) A former registrant who ceased to be registered under section 78(7) by reason only of a failure to renew his or her registration may apply for reinstatement under section 21(4) of the Act, if the former registrant

- (a) applies for reinstatement by submitting Form #7, application for reinstatement not later than June 30th,
- (b) is not in contravention of the Act, the Regulation or these bylaws, and
- (c) pays the registration renewal fee and reinstatement fee, both as set out in Schedule A.

(2) Despite subsection (1), the board may reinstate a person without charging any fee if the person is able to demonstrate to the satisfaction of the board that he or she was unable to comply with section 78 for reasons of undue hardship.

Part 8 – Registration of Hearing Instrument Practitioners

Active registration (hearing instrument practitioner)

82(1) For the purposes of section 20(2) of the Act, an applicant to become an active registrant (hearing instrument practitioner) must meet the following criteria:

- (a) has successfully completed a recognized diploma course in hearing instrument dispensing approved by the board;
- (b) has successfully completed examinations prepared or approved by the registration committee;
- (c) completion of a period of supervised practice training
 - (i) of 660 hours' duration and of a form approved by the committee,
 - (ii) to be completed within a number of consecutive months as required by the committee, and
 - (iii) under the supervision of a person approved by the committee;
- (d) be a Canadian citizen or entitled to work in Canada;
- (e) be able to speak and write English at a proficiency level acceptable to the registration committee;
- (f) be of good character satisfactory to the committee and consistent with the responsibilities of a registrant and the standards expected of a registrant;

- (g) not have been charged with or convicted of an indictable offence under the *Criminal Code* (Canada) if the nature or circumstances of the offence give rise to concerns about the applicant's competence or fitness to practice the profession, as provided under section 20(2.2) of the Act;
 - (h) has professional liability insurance or coverage in the form and amount required by section 151;
 - (i) has paid the application, examination, criminal records check, and registration fees, as set out in Schedule A.
- (2) An applicant must provide or arrange to provide the registration committee with the following forms, documents or information as proof of meeting the criteria set out in subsection (1):
- (a) a signed Form #8 application registration (student – hearing instrument practitioner);
 - (b) a completed Form #3 statutory declaration, including statements certifying that
 - (i) the applicant owns or has access to the minimum equipment for the practice of the profession as required by the committee, and
 - (ii) the applicant has not contravened or otherwise failed to comply with the Act or the bylaws;
 - (c) a copy of the applicant's post-secondary transcript sent directly to the registrar from the post-secondary institution or a notarized copy of the original transcript, certificate, diploma or degree, or other evidence satisfactory to the registration committee, of the successful completion of the educational program specified in subsection (1)(a), and evidence satisfactory to the registration committee that the applicant is the person named in any transcript, certificate, diploma or degree;
 - (d) proof in a form acceptable to the registration committee of completion of the supervised practice training specified in subsection (1)(c);
 - (e) proof in a form acceptable to the registration committee of Canadian citizenship or entitlement to work in Canada;
 - (f) if requested by the committee, a copy of the applicant's language proficient test results sent directly to the registrar from the training institution or a notarized

- copy of the original test results, or other evidence satisfactory to the committee that the applicant meets the requirement of subsection (1)(e) and is the person named in a test result;
- (g) letters of recommendation, attesting to the good character of the applicant and such other information as the committee may require, sent directly to the registrar from two persons who
- (i) are not related to the applicant,
 - (ii) have known the applicant for more than two years, and
 - (iii) will not benefit if the applicant is licensed under this Part;
- (h) information concerning a current proceeding for or a finding of professional misconduct, incompetence or incapacity in British Columbia or another jurisdiction in relation to the profession or another health profession;
- (i) a signed Form #5 criminal record check authorization form, current within six months of the application;
- (j) proof of professional liability insurance or coverage required by section 151 and effective on or before the date of registration;
- (k) payment in full of the application, examination, criminal records check and registration fees, as set out in Schedule A.
- (3) The registration committee may require the applicant to appear before the committee in order to determine that the applicant has satisfied the requirements of subsections (1) and (2).
- (4) The registration committee may publish the results of the examination completed by the applicant under subsection (1)(b).
- (5) A person who applies to become an active registrant (hearing instrument practitioner), must complete all licensing and examination requirements within two years of the date the application was first filed, unless granted an extension by the committee for a period of time set by the committee.

Repealed

82.1 [Repealed 2016-05-08.]

Repealed

82.2 [Repealed 2016-05-08.]

Repealed

82.3 [Repealed 2016-05-08.]

Participation and voting rights

83. An active registrant (hearing instrument practitioner) is eligible:

- (a) to be nominated or appointed as a member of the board under sections 4 or 10;
- (b) to vote in an election for members of the board under section 5;
- (c) to vote at a meeting of the membership under section 41.

Part 9 – Registration of Speech-Language Pathologists and Audiologists

Repealed

84. [Repealed 2016-05-08.]

Sub-Part 9.1 – Standard Applications

Active registration (audiologist or speech-language pathologist)

85(1) For the purposes of section 20(2) of the Act, to become an active registrant (audiologist or speech-language pathologist) an applicant must meet the following criteria:

- (a) has successfully completed at least a master's degree in speech-language pathology or audiology, or both, from a university with a program of study that meets or exceeds the requirements set out in subsection (2) and is acceptable to the registration committee;
- (b) has successfully completed the certification examination prepared by Speech-Language and Audiology Canada;
- (c) be a Canadian citizen or entitled to work in Canada;
- (d) be able to speak and write English at a proficiency level acceptable to the registration committee;
- (e) be of good character, satisfactory to the registration committee and consistent with the responsibilities of a registrant and the standards expected of a registrant;

- (f) not have been charged with or convicted of an indictable offence under the *Criminal Code* (Canada), if the nature or circumstances of the offence give rise to concerns about the applicant's competence or fitness to practice the profession, as provided under section 20(2.2) of the Act;
- (g) has professional liability insurance or coverage in the form and amount required by section 151;
- (h) has paid the application, criminal records check and registration fees, as set out in Schedule A.

(2) To be acceptable to the registration committee under subsection (1)(a), the course work must meet the following requirements:

(a) 135 hours of course work in basic knowledge, with at least one course in the area of anatomical, physiological and neurological basis of speech, language and hearing functioning, and

(i) for an applicant to audiology, at least two courses in the area of the physical basis and perceptual processes of hearing;

(ii) for an application to speech-language pathology, at least two courses in the area of fundamental information pertaining to the use of speech and language processes;

(b) 180 hours in basic knowledge related to other professions, with at least

(i) two courses in the area of basic principles and methods involved in conducting research in human behaviour,

(ii) 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, and include at least one of the following:

(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;

(D) counselling and interviewing;

- (iii) one course is required in the area of professional practices and issues or administrative organization of audiology or speech-language pathology programs;
- (c) 405 hours in professional competency, which
 - (i) in relation to audiology, must include the following:
 - (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;
 - (K) professional practice issues specific to audiology;
 - (ii) in relation to speech-language pathology, must include the following:
 - (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;
 - (L) professional practice issues specific to speech-language pathology;
- (d) 45 hours in professional competency in relation to all communication disorders, which
- (i) in relation to audiology, must include the following:
 - (A) speech and language development, delays and disorders, such as screening or identification programs for speech, language and hearing problems throughout the lifespan;
 - (B) potential impact of hearing loss on speech and language acquisition;
 - (C) screening procedures for speech-language delays and disorders;
 - (ii) in relation to speech-language pathology, must include the following:
 - (A) development of normal hearing;
 - (B) hearing disorders and related speech-language disorders, such as symptoms of hearing disorders, including associated speech, language and voice profiles;
 - (C) screening procedures and basic audiometric testing; application of audiometric information to the speech-language assessment;
 - (D) modification in speech and language procedures to accommodate varying degrees of hearing loss;
 - (E) approaches to habilitation and rehabilitation of speech and language of the hearing impaired;
 - (F) use, care and maintenance of hearing aids, assistive listening devices, and amplification systems.
- (e) 300 hours of supervised university accredited clinical practicum of direct contact, which
- (i) in relation to audiology, there must be:
 - (A) at least 50 hours with children;
 - (B) at least 50 hours with adults;

- (C) at least 100 hours of assessment;
- (D) at least 50 hours of intervention; and

the following activities must be covered with those hours:

- (E) hearing measurement;
- (F) audiological assessment;
- (G) electrophysiological and other diagnostic measurements;
- (H) amplification (systems, selection, fitting, verification and validation);
- (I) implantable hearing devices

(ii) in relation to speech-language pathology, there must be:

- (A) at least 50 hours with children;
- (B) at least 50 hours with adults;
- (C) at least 50 hours of assessment;
- (D) at least 100 hours of intervention; and

the following activities must be covered with those hours:

- (E) articulation or phonological disorders;
- (F) preschool or school-aged language development and literacy;
- (G) developmental language disorders;
- (H) acquired language disorders;
- (I) cognitive communication disorders;
- (J) voice disorders;
- (K) resonance disorders or structurally related disorders, such as cleft lip and palate;
- (L) fluency disorders;
- (M) neurologically based speech disorders;
- (N) augmentative and alternative communication;
- (O) dysphagia;
- (P) prevention and identification activities;

(f) 20 hours of direct contact or simulation with a maximum of 50 hours in simulation, which

- (i) in relation to audiology, must include exposure to speech-language pathology assessment, intervention or prevention activities, or
- (ii) in relation to speech-language pathology, must include exposure to audiology assessment, intervention or prevention.

(3) An applicant must provide or arrange to provide the registration committee with the following forms, documents or information as proof of meeting the criteria set out in subsection (1):

- (a) a signed Form #2 application form for registration (active);
- (b) a completed Form #3 statutory declaration, including statements certifying that the applicant has not contravened or otherwise failed to comply with the Act or these bylaws;
- (c) a copy of the applicant's post-secondary transcript sent directly to the registrar from the post-secondary institution or a notarized copy of the original transcript, certificate, diploma or degree, or other evidence satisfactory to the registration committee, of the successful completion of the educational program specified in subsection (1)(a), and evidence satisfactory to the registration committee that the applicant is the person named in any transcript, certificate, diploma or degree;
- (d) proof in a form acceptable to the registration committee of completion of the supervised practice training specified in subsection (2)(e);
- (e) proof of successful completion of the Speech-Language and Audiology Canada certification examination specified in subsection (1)(b);
- (f) proof in a form acceptable to the registration committee of Canadian citizenship or entitlement to work in Canada;
- (g) Upon request, applicants are required to provide evidence, satisfactory to the committee, that the applicant meets the requirement of subsection (1)(d). Evidence may include:
 - (i) a notarized copy of original language proficiency test results;
 - (ii) a copy of the applicant's language proficiency test results sent directly to the registrar from the training institution;
 - (iii) or other evidence satisfactory to the committee.

- (h) letters of recommendation, attesting to the good character of the applicant and such other information as the committee may require, sent directly to the registrar from two persons who
 - (i) are not related to the applicant,
 - (ii) have known the applicant for more than two years, and
 - (iii) will not benefit if the applicant is licensed under this Part;
- (i) information concerning a current proceeding for or a finding of professional misconduct, incompetence or incapacity in British Columbia or another jurisdiction in relation to the profession or another health profession.
- (j) a signed Form #5 criminal record check authorization form, current within six months of the application;
- (k) proof of professional liability insurance or coverage required by section 151 and effective on or before the date of registration;
- (l) payment in full of the application, criminal records check and registration fees, as set out in Schedule A.

Appearing before the committee

86. The registration committee may require an applicant to appear before the committee in order to determine if that applicant has satisfied the requirements of sections 85 or 87.9.

Participation and voting rights

87. An active registrant (audiologist or speech-language pathologist) is eligible:

- (a) to be nominated or appointed as a member of the board under sections 4 or 10;
- (b) to vote in an election for members of the board under section 5;
- (c) to vote at a meeting of the membership under section 41.

Sub-Part 9.2 [Repealed 2011-04-02.]

Repealed

87.1 [Repealed 2016-05-08.]

Sub-Part 9.3 – Conditional Active Registration

Conditional active registration: application

87.9(1) Subject to subsections (2) and (5), if an applicant for active registration has not successfully completed the certification examination required under section 85(1)(b), the registration committee may grant the applicant conditional active registration provided he or she meets all the other requirements of section 85(1).

(2) An applicant who wants the registration committee to consider him or her for conditional active registration under subsection (1) must

(a) indicate that desire on a Form #2 application form, and

(b) complete Section III of a Form #3 statutory declaration attesting that he or she will write the certification examination on the next date that examination is scheduled.

(3) A conditional active registrant must be registered as an active registrant in the appropriate class if, within two years of being granted registration under subsection (1), he or she successfully completes the certification examination required under section 85(1)(b) and provides evidence satisfactory to the committee of that successful completion.

(4) The registrar must cancel a conditional active registrant's registration if,

(a) within two years of being granted registration under subsection (1), the registrant fails the certification examination required under section 85(1)(b) three times, or

(b) two years after being granted registration under subsection (1), a conditional active registrant has not successfully completed the certification examination required under section 85(1)(b) and provided evidence satisfactory to the registration committee of that successful completion.

(5) The registration committee cannot grant registration under subsection (1) to a person who has previously been a conditional active registrant.

Conditional active registrant: rights and responsibilities

87.10 (1) A conditional active registrant

- (a) must fulfill the responsibilities of an active registrant under the Act, Regulation and these bylaws, while practicing his or her profession under general supervision as defined by policy,
 - (b) must fulfill during the period of conditional active registration the continuing competency requirements of an active registrant as required by section 159,
 - (c) may use a title reserved in the Regulation for exclusive use by his or her profession but only with the addition of “(Conditional)” at the end.
- (2) A conditional active registrant is eligible
- (a) to vote in an election for members of the board under section 5, and
 - (b) to vote at a meeting of the membership under section 41, but is not eligible to be nominated or appointed as a member of the board under sections 4 or 10.
- (3) A conditional active registrant must not
- (a) apply for advanced competency certification under Part 10,
 - (b) supervise individuals who are fulfilling the conditions or requirements for registration as a member of the college,
 - (c) supervise a support person or student,
 - (d) delegate any aspect of practice to a support person or student, or
 - (e) practice as a sole private practitioner.

Part 10 -- Advanced Competency Certification Programs

Application

88. The requirements of sections 89 to 93 apply to all the certificates required in this Part.

Preconditions for advanced competency certification

88.1. The following preconditions apply to a registrant seeking an advanced competency certificate under this Part:

- (a) a registrant may not apply for an advanced competency certificate until the registrant has completed one year of clinical experience as registered audiologist, hearing instrument practitioner or speech-language pathologist, as the case may be;
- (b) if the registrant completed the educational pre-requisites specified in the applicable program of study seven years or more before applying for an

advanced competency certificate, that registrant may not be granted the applicable certificate until the registrant has completed such additional education or training as the committee may determine is necessary in the circumstances;

- (c) a registrant may commence the applicable program of study within that registrant's first year of clinical experience, but may not be granted the applicable certificate until that registrant has completed one full year of clinical experience;
- (d) a registrant must complete the applicable program of study within three years of the date the registrant started that program.

General

89(1) The quality assurance committee

- (a) must monitor or administer the advanced competency certification programs described in this Part, and
 - (b) holds the exclusive authority to make a decision as to whether or not a registrant should be granted a particular certification.
- (2) In relation to each of the advanced competency certificate programs that are described in this Part, the training of a registrant must take place
- (a) under the direct supervision by another registrant or health professional who is already qualified or certified to perform the activity that is the subject of that certificate, and
 - (b) is acceptable to the committee, and
 - (c) in a setting that allows the training registrant to obtain sufficient clinical experience, including direct contact with clients.
- (2.1) In relation to each program of study described in this Part, each such program must provide the registrant with the following competencies:
- (a) an understanding of infection control guidelines applicable to that competency;
 - (b) an understanding of emergency safety procedures applicable to that competency.

(3) The quality assurance committee may issue a directive that lists the specific programs of study that the committee determines meets the requirements for each certification program described in this Part.

(4) To be granted an advanced competency certificate under this Part, an active registrant must

- (a) submit to the registrar a completed Form #9 application for advanced competency certification,
- (b) provide proof in a form acceptable to the committee of any specific requirement for a particular advanced competency certificate, and
- (c) pay the advanced competency certification fee (initial) as set out in Schedule A.

Substantial equivalency re: advanced competency

89.1. The quality assurance committee has the discretion, in satisfying itself that a registrant meets the conditions or requirements to be granted an advanced competency certificate under this Part, to consider whether the registrant's knowledge, skills and abilities are substantially equivalent to the standards of academic or technical achievement and the competency or other qualifications as specified for a certificate in this Part.

Issuing of certificates

90(1) The registrar must, on the instruction of the quality assurance committee, issue an advanced competency certificate (Form #10) to an active registrant who, in the committee's determination, meets the requirement for that certificate as set out in this Part.

(2) A certificate issued under subsection (1) must state

- (a) the specific advanced competency being certified,
- (b) the name of the certificate holder,
- (c) the date the certificate was issued,
- (d) the expiry date set for the certificate, and
- (e) the limits or conditions that may apply to that registrant or certificate, if any.

(3) For the purposes of paragraph 90(2)(d), an advanced competency certificate granted by the committee under this Part

(a) expires on the date specified by the committee, which cannot be a date past March 31st of the third year following the year it was granted, but

(b) may be renewed under section 94, so long as it has not otherwise expired before being renewed.

Right to a decision and a review of a denied certificate

91(1) The quality assurance committee must, within 30 days of making a decision under this Part to refuse an active registrant's request for an advanced competency certificate, deliver a written notice to the registrant setting out the committee's decision and reasons, and advising the denied registrant of his or her right to apply for a review of that decision under subsection (2).

(2) An active registrant who has been denied an advanced competency certificate by the quality assurance committee under this Part may request a review of that decision by the board under Part 11.

Display of certificates

92(1) A registrant granted an advanced competency certification under this Part must either

(a) be able to provide proof that he or she is certified in the applicable advanced competency program, or

(b) display a certificate in a prominent location at the registrant's place of business to which the general public has access.

(2) If a registrant chooses to only display a certificate under subsection (1)(b), and has more than one place of business, the registrant must display

(a) the certificate in the registrant's main place of business, and

(b) a copy of the certificate in every other place of business other than the main place of business.

Return of certificate

93. If a registrant's advanced competency certificate is suspended or cancelled, the registrant must return it and any copies of it to the registrar immediately on being served notice that the certificate has been suspended or cancelled.

Certification renewal

94(1) To be eligible to renew an advanced competency certificate, an active registrant must, before the expiry date for that certificate,

- (a) submit to the registrar a completed Form #11 advanced competency certificate renewal, including a statutory declaration attesting that he or she is in compliance with the Act, the regulations, these bylaws, and any limits or conditions imposed under sections 39(2)(b) or (d) of the Act,
- (b) pay the advanced competency certification renewal fee in the amount specified in Schedule A,
- (c) pay any other outstanding fee, debt or levy owed to the college, and
- (d) meet the continuing advanced competency requirements of section 95.

(1.1) In addition to reporting on completion of the continuing competency credit requirement, a registrant must also report within the statutory declaration as to whether or not the registrant used or applied the advanced competency as certified in the Part during the period of certification.

(1.2) For the purposes of an advanced competency certificate renewed under this section, the provisions of section 90(2) apply to the renewed certificate.

(2) Notice of the certificate renewal fees must be delivered to each registrant no later than 60 days before the expiry date, and must describe the consequences of late payment and non-payment of fees.

(3) Each registrant must pay the certificate renewal fee, as set out in Schedule A, in full on or before the expiry date.

(4) Where a registrant fails to pay a certificate renewal fee on or before the expiry date, he or she ceases to be entitled to provide services covered under the terms and conditions of that advanced competency certificate.

(5) On receipt of payment of the certificate renewal fee, the registrar must issue to the registrant making payment a receipt and a statement that the registrant is, subject to his or

her compliance with the Act, the regulations, and these bylaws, entitled to provide the services covered under the terms and conditions of the advanced competency certificate.

Certificate reactivation

94.1(1) If a former registrant who was granted an advanced competency certificate under this Part prior to becoming a former registrant is later reinstated under either section 79 or 80, any advanced competency certificate held by that reinstated registrant that did not expire prior to the date of reinstatement is reactivated.

(2) An advanced competency certificate reactivated under subsection (1) expires

(a) on the expire date set by the committee under section 90(3), or

(b) on March 31st of the third year following the year it was granted,

whichever date occurs first.

Continuing advanced competency program

95(1) A registrant who has been granted an advanced competency certificate must,

(a) complete at least four hours of continuing competency credits in the specific advanced competency, as approved by the quality assurance committee, and do so prior to the expiry or renewal date for that certificate, and

(b) report the continuing competency credits earned during the cycle to the quality assurance committee in accordance with the reporting schedule and procedures approved by the committee.

(2) A registrant must retain documents or other information that support the continuing advanced competency credits being reported to the quality assurance committee under subsection (1).

(3) The quality assurance committee may without notice to a registrant audit the registrant to ensure the accuracy and truthfulness of the continuing advanced competency credits that the registrant has reported under subsection (1)(b).

(4) If the quality assurance committee finds an inaccuracy or a false report and is unable to resolve that deficiency by subsequent negotiation with the registrant, the committee may report that finding to the inquiry committee, which may in turn investigate the registrant for a breach of this section under Part 3 of the Act and Part 14 of these bylaws.

Standards of Practice

96. A registrant who has been issued an advanced competency certificate under this Part must apply and follow the Standards of Practice for the performance of the services covered by that certificate as may be approved by the board.

Sub-Part 10.1 – Certificates for Audiologists

General requirements

96.1 (1) The requirements of this section apply to all the advanced competency certificates for audiologists set out in this Sub-Part.

(2) A registrant

(a) may not be granted an advanced competency certificate under this Sub-Part until the registrant has completed one year of clinical experience as an audiologist, but may commence the acceptable program of study within the first year of clinical experience, and

(b) must have completed the program of study no more than three years prior to applying for certification.

(3) The quality assurance committee may grant to an audiologist an advanced competency certificate specified in this Sub-Part and as required by section 6(2) of the Regulation, if the registrant has completed successfully a program of study in the advanced competency that is acceptable to the committee as meeting the requirements for each specific certificate.

(4) [Repealed 2016-05-08.]

Certificate A) Vestibular Assessment and Management

Application

97. This advanced competency certificate program applies to the restricted activity set out in section 5(1)(d) of the Regulation.

Certification requirements

98. The quality assurance committee may grant to an audiologist a certificate in vestibular assessment and management as required by section 6(2) of the Regulation, if the audiologist

- (a) has completed pre-requisites and a program of study that is acceptable to the committee, and
- (b) has performed vestibular system function assessments and management under supervision.

(2) [Repealed 2016-05-08.]

Acceptable programs of study

99. To be acceptable to the committee under section 98(a), the program of study in the assessment and management of vestibular system function must

- (a) be either
 - (i) a pre-requisite graduate level course of at least three credit hours in vestibular assessment and management, or
 - (II) an equivalent course the committee determines is substantially similar to such a graduate level course, and
- (b) which in either case provides a registrant with the following competencies:
 - (i) understanding of the anatomy and physiology of the auditory, visual and somatosensory systems;
 - (ii) understanding of electrophysiological tests including auditory brainstem response, electrooculography, and vestibular evoked myogenic potential;
 - (iii) understanding, administering and interpreting pre-testing screening, including vertebral artery screening test and cervical vertigo test;
 - (iv) understanding of administering and interpreting postural stability test;
 - (v) understanding of assessments and evaluations for the presence of oscillopsia;

- (vi) understanding and experience in administering and interpreting electronystagmography or videonystamography, including oculo-motor testing, positioning and positional testing, air and water-caloric testing and ice-water caloric testing;
- (vii) understanding of autorotation tests and computerized dynamic posturography;
- (viii) understanding of treatment for different forms of benign paroxysmal positional vertigo;
- (ix) understanding of vestibular rehabilitation therapy;
- (x) understanding of outcome measures and monitoring therapy;
- (xi) recognition of contraindications to vestibular assessment or portions thereof;
- (xii) recognition of criteria for referral to medical specialist or another professional;
- (xiii) recognition of complications and how to deal with them.

Repealed

100. [Repealed 2011-04-01.]

Use of “certified”

101. An active registrant who has been certified by the quality assurance committee in assessment of vestibular system function and has been placed on the appropriate registry, is entitled to use the designation “Certified in Vestibular Assessment and Management”, and may not use any other title or designation for this certification.

Certificate B) Cochlear Implant Management

Definitions

102. For the purposes of sections 103 to 106:

“**cochlear implant**” means a device that directly stimulates the auditory nerve, and can provide sound for people who have a severe to profound hearing loss, or receive little or no benefit from conventional hearing aids, and consists of two parts: internal implant and speech processor;

“cochlear implant management” means a process or continuum of care involving an interprofessional team, where

- (i) management includes candidacy assessment, programming and post-implant evaluations,
- (ii) candidacy assessment includes comprehensive audiological evaluation to determine if the potential recipient meets the criteria to receive a cochlear implant,
- (iii) programming of the speech processor establishes individualized listening programs so the recipient can receive full access to speech sounds, and
- (iv) post--implant evaluations are used to monitor a recipient’s progress;

“internal implant” means a tiny electrode that is surgically implanted into the inner ear and a receiver is placed under the skin behind the ear;

“speech processor” means a device the client wears on the body or behind the ear and the transmitting coil, that is connected to the internal implant via a magnet.

Restriction on practice

103. A registrant must not provide or perform cochlear implant management unless that registrant is an audiologist who has successfully completed a certification program as required by sections 104 and 105.

Certification requirements

104. The quality assurance committee may grant to an audiologist a certificate in cochlear implant management, if the audiologist has completed successfully a program of study that is acceptable to the committee.

(2) [Repealed 2016-05-08.]

Acceptable programs of study

105. To be acceptable to the committee under section 104(a), the program of study in cochlear implant management must be either

- (a) a graduate level course in cochlear implant management, including candidacy assessment, programming and equipment maintenance, and post-implant evaluation, or
- (b) a program of study the committee determines is substantially similar to such a graduate level course, but in either case, the program of study must provide a registrant with the following competency:
- (c) knowledge of the anatomy and physiology of the complete auditory system;
- (d) knowledge of current candidacy requirements and function of a cochlear implant;
- (e) skill regarding external cochlear implant equipment and accessories, including trouble-shooting in the case of equipment malfunction;
- (f) recognition of contraindications to implantations;
- (g) recognition of criteria for referral to medical specialist or another professional;
- (h) recognition of complications and how to deal with or respond to each complication.

Use of “certified”

106. An active registrant who has been certified by the quality assurance committee in cochlear implant management and has been placed on the appropriate registry, is entitled to use the designation “Certified in Cochlear Implant Management”, and may not use any other title or designation for this certification.

Sub-Part 10.2 – Certificates for Audiologists and Hearing Instrument Practitioners

Certificate C) Cerumen Management

Application

107. This advanced competency certificate program applies to the restricted activities set out in sections 5(1)(b), (c) and (d), and sections 5(2)(a), (b) and (c) of the Regulation.

Certification requirements

108. The quality assurance committee may grant to an audiologist or a hearing instrument practitioner a certificate in cerumen management as required by section 6(1) of the Regulation, if the audiologist or hearing instrument practitioner has successfully

completed a program of study that is acceptable to the committee and has done so no more than three years prior to applying for certification.

(2) [Repealed 2016-05-08.]

Acceptable programs of study

109. To be acceptable to the committee under section 108(1), the program of study in cerumen management must be acceptable to the quality assurance committee and provide a registrant with the following competency:

- (a) knowledge of the anatomy, physiology and pathophysiology of the external ear canal, pinna and the tympanic membrane;
- (b) knowledge of infection control and prevention of disease transmission (universal precautions);
- (c) knowledge of the cerumen removal techniques of aural suction, aural irrigation and instrument extraction, and demonstrated skill in at least one of these procedures
- (d) knowledge of the equipment required to perform cerumen removal;
- (e) demonstrated skill in the use of otoscopy;
- (f) recognition of contraindications;
- (g) recognition of criteria for referring the client to medical specialist or another health professional;
- (h) recognition of complications and procedures to be followed;
- (i) knowledge of triggerable reflexes, and the need for emergency protocols.

Use of “certified”

110. An active registrant who has been certified by the quality assurance committee in cerumen management and has been placed on the appropriate registry, is entitled to use the designation “Certified in Cerumen Management”, and may not use any other title or designation for this certification.

Sub-Part 10.3 – Certificates for Hearing Instrument Practitioners

Definitions

111. For the purposes of this Sub-Part:

“**child**” means an individual who has not attained the age of 16 years;

“**certified hearing instrument practitioner**” means a hearing instrument practitioner who has been granted an advanced competency certificate under this Sub-Part.

General requirements

112. Notwithstanding the pre-conditions set out in paragraphs 88.2(a) and (c), a hearing instrument practitioner may not

(a) apply for an advanced competency certificate under this Sub-Part until that registrant has completed two years of clinical experience as registered hearing instrument practitioner;

(b) be granted the applicable certificate under this Sub-Part until that registrant has completed two full years of such clinical experience.

Certificate D) Hearing Instrument Services for Children Aged 12 to 16 Years

Application

113. This advanced competency certificate program applies to hearing instrument practitioners who

(a) are not also audiologists, and

(b) intend to provide hearing instrument dispensing services to a child, including the restricted activities set out in section 5(2)(e) and (f) of the Regulation, as specified by section 6(3) of the Regulation.

Additional age restriction

113.1 (1) For the purposes of this section, “**authorized professional**” means a registrant of another college established or continued under the Act, who is authorized by or under an enactment to conduct a developmental assessment of a child.

(2) In addition to the age restriction set out in section 6(3) of the Regulation, a hearing instrument practitioner who is not also an audiologist may not prescribe, dispense or fit a hearing instrument in respect of a child who

(a) has not attained the age of 12 years or more, or

- (b) has been assessed by an authorized professional as having a developmental age of less than 12 years in relation to the cognitive and motor skills that are necessary for a child to be tested properly and for that child to be able to use a hearing instrument independently.

Clarifications

113.2 For greater certainty, a hearing instrument practitioner who is not also an audiologist may perform the following services to individuals in the corresponding age groups:

- (a) a service that includes the performance of a restricted activity set out in section 5(2)(a) of the Regulation, subject to sections 107 to 110, to an individual of any age;
- (b) a service that includes the performance of a restricted activity set out in sections 5(2)(b) and (c) of the Regulation, subject to sections 107 to 110, to a child who has attained the age of 12 years or more;
- (c) a service that involves the performance of a restricted activity set out in section 5(2)(d) of the Regulation to an individual of any age.

Certification requirements

113.3 The quality assurance committee may grant to a hearing instrument practitioner the advanced competency certificate as required by section 6(3) of the Regulation, if the registrant has completed successfully a program of study in the advanced competency of hearing instrument dispensing services for children that is acceptable to the committee as meeting the requirements for that certificate.

Acceptable program of study

113.4 To be acceptable to the committee under section 113.3, the program of study in hearing instrument dispensing services for children must provide a hearing instrument practitioner with the following competency in relation to children who have attained the age of 12 years or more:

- (a) understanding normal speech and language development and ongoing language development pertinent to a child;

- (b) understanding and use of hearing assistance technology that may be applicable to a child;
- (c) ability to perform and interpret hearing assessments;
- (d) ability to interpret hearing assessment results while considering the child's functional environments;
- (e) understanding the need for a referral for further testing;
- (f) ability to prescribe a hearing instrument appropriate to the child;
- (g) understanding the psychosocial consequences of hearing loss, including the emotional implications of the loss;
- (h) understanding the child's current and ongoing educational considerations, including classroom and speech acoustics;
- (i) ability to perform counselling, including instruction and support in the use of the hearing assistance technology;
- (j) ability to actively participate on the care team, including educators;
- (k) understanding the need for a referral to augment care;
- (l) demonstrated ability to properly document the assessment and treatment plan;
- (m) understanding the application of criteria for ongoing monitoring and follow-up.

Repealed

113.5 [Repealed 2016-05-08.]

Use of "certified"

114(1) A certified hearing instrument practitioner is entitled to use the designation "Certified in Hearing Instrument Dispensing Services for Children Aged 12 to 16", and may not use any other title or designation to indicate this certification.

(2) For greater certainty, an audiologist who is also registered as a hearing instrument practitioner may, subject to section 155, state that he or she is licensed or authorized by the College to provide hearing instrument dispensing services to children of any age.

General practice requirements

114.1 A certified hearing instrument practitioner may provide hearing instrument dispensing services to a child, including the performance of a restricted activity set out in

section 5(2)(e) or (f) of the Regulation, only in accordance with the Standards of Practice approved by the board.

Sub-Part 10.4 – Certificates for Speech-Language Pathologists

Definitions for Sub-Part

115. For the purposes of this Sub-Part:

“**entry-to-practice understanding**” means the applicant or registrant can, in a clinical setting, comprehend and apply that information as would be obtained through coursework at the graduate level by explaining the information, modifying a treatment plan, relating that information to other information, and summarizing or explaining the information;

“**advanced understanding**” means the applicant or registrant, in addition to having an entry-to-practice understanding, can in a clinical setting analyse, synthesize or evaluate information by designing treatment plans, differentiating between two different situations or types of information, and interpreting current or new information.

General requirements

116(1) The requirements of this section apply to all the advanced competency certificates for speech-language pathologists set out in this Sub-Part.

(2) A registrant

(a) may not be granted an advanced competency certificate under this Sub-Part until the registrant has completed one year of clinical experience as a speech-language pathologist, but may commence the acceptable program of study within the first year of clinical experience, and

(b) must have completed the program of study no more than three years prior to applying for certification.

(3) The quality assurance committee may grant to a speech-language pathologist an advanced competency certificate specified in this Sub-Part and as required by section 6(4) of the Regulation, if the registrant has successfully completed a program of study in the advanced competency that is acceptable to the committee as meeting the requirements for each specific certificate.

(4) [Repealed 2016-05-08.]

Certificate E) Fiberoptic Endoscopic Evaluation and Management of Voice Disorders

Application

117. This advanced competency certificate program applies to the restricted activities set out in sections 5(3)(c) and (d) of the Regulation.

Acceptable programs of study

118. To be acceptable to the committee under section 116(3), the program of study in fiberoptic endoscopic evaluation and management of voice disorders must involve instruction specific to fiberoptic endoscopic evaluation and management of voice disorders, including practical training, and provide a registrant with the following competency:

- (a) an entry-to-practice understanding of oral, nasal, pharyngeal, laryngeal and esophageal anatomy and physiology;
- (b) an advanced understanding of phonatory anatomy and physiology, voice assessment, including the use of applicable diagnostic equipment (procedures and interpretation) and rehabilitation;
- (c) an ability to identify and describe normal and abnormal physiology for respiration, airway protection, and voice production;
- (d) an ability to recognize anatomical landmarks as viewed endoscopically;
- (e) an ability to recognize altered anatomy as it relates to laryngeal function;
- (f) an ability to recognize changes in anatomy and physiology of phonation over the life span;
- (g) an ability to identify indications and contraindications for a flexible fiberoptic endoscopic evaluation of swallowing;
- (h) an ability to identify elements of a comprehensive endoscopic fiberoptic endoscopic evaluation of vocal function;
- (i) an ability to detect and interpret abnormal swallow findings in terms of the underlying anatomy and pathophysiology;
- (j) an ability to apply appropriate treatment interventions to determine the effect on phonation;

- (k) an ability to use results of the examination to make appropriate recommendations, to guide treatment of the client, and to determine treatment outcomes;
- (l) an ability to make appropriate recommendations or referrals for other examinations as needed;
- (m) an ability to recognize when to re-evaluate vocal function;
- (n) an ability to use endoscopy as a biofeedback tool;
- (o) an ability to use endoscopic images to educate clients, family, and staff either during or after the examination;
- (p) knowledge of use and contraindications of topical anesthetics and an ability to use topical anesthetics as appropriate;
- (q) in relation to the above competencies, an understanding of the inter-relationship between the presenting communication disorders and the potential swallowing disorder.

Use of “certified”

119. An active registrant who has been certified by the quality assurance committee in fiberoptic endoscopic evaluation and management of voice disorders and has been placed on the appropriate registry, is entitled to use the designation “Certified in Fiberoptic Endoscopic Evaluation and Management of Communication and Voice Disorders”, and may not use any other title or designation for this certification.

Certificate F) Fiberoptic Endoscopic Evaluation and Management of Swallowing Disorders

Application

120. This advanced competency certificate program applies to the restricted activity set out in section 5(3)(c) of the Regulation.

Acceptable programs of study

121. To be acceptable to the committee under section 116(3), the program of study in fiberoptic endoscopic evaluation and management of swallowing must involve instruction specific to fiberoptic endoscopic evaluation and management of swallowing disorders, including practical training, and must provide a registrant with the following

competency:

- (a) an entry-to-practice understanding of oral, nasal, pharyngeal, laryngeal and esophageal anatomy and physiology;
- (b) an advanced understanding of the anatomy and physiology involved in swallowing assessment, including the use of applicable diagnostic equipment (procedures and interpretation) and rehabilitation;
- (c) an ability to identify and describe normal and abnormal aerodigestive physiology for respiration, airway protection, and swallow;
- (d) an ability to recognize anatomical landmarks as viewed endoscopically;
- (e) an ability to recognize altered anatomy as it relates to swallowing function;
- (f) an ability to recognize changes in anatomy and physiology of the swallow over the life span;
- (g) an ability to identify indications and contraindications for a flexible fiberoptic endoscopic evaluation of swallowing;
- (h) an ability to identify elements of a comprehensive endoscopic fiberoptic endoscopic evaluation of swallowing;
- (i) an ability to detect and interpret abnormal swallow findings in terms of the underlying anatomy and pathophysiology;
- (j) an ability to apply appropriate treatment interventions, implement postural changes, and alter the bolus or method of delivery to determine the effect on the swallow;
- (k) an ability to use results of the examination to make appropriate recommendations, to guide treatment of the client, and to determine treatment outcomes;
- (l) an ability to make appropriate recommendations or referrals for other examinations as needed;
- (m) an ability to recognize when to re-evaluate swallowing function;
- (n) an ability to use endoscopy as a biofeedback tool;
- (o) an ability to use endoscopic images to educate clients, family, and staff either during or after the examination;
- (p) knowledge of use and contraindications of topical anesthetics and an ability to

use topical anesthetics as appropriate;

(q) in relation to the above competencies, an understanding of the inter-relationship between potential communication disorders and the presenting swallowing disorder.

Use of “certified”

122. An active registrant who has been certified by the quality assurance committee in fiberoptic endoscopic evaluation and management of swallowing and has been placed on the appropriate registry, is entitled to use the designation “Certified in Fiberoptic Endoscopic Evaluation and Management of Swallowing”, and may not use any other title or designation for this certification.

Certificate G) Voice Restoration (Voice Prostheses)

Application

123. This advanced competency certificate program applies to the restricted activities set out in section 5(3)(e) and (g) of the Regulation.

Conditions

123.1. Notwithstanding the pre-conditions set out in paragraphs 88.2(a) and (c), a speech language pathologist may not

- (a) apply for an advanced competency certificate for voice restoration (voice prostheses) until that registrant has completed two years of clinical experience as registered speech language pathologist, or
- (b) be granted the applicable certificate until that registrant has completed two full years of such clinical experience.

Acceptable programs of study

124. To be acceptable to the committee under section 116(3), the program of study in assessing and managing voice disorders and restoration using tracheo-esophageal puncture (TEP) techniques and prostheses must provide a registrant with the following competency:

- (a) an entry-to-practice understanding of oral, nasal, pharyngeal, laryngeal and esophageal anatomy and physiology, head and neck cancer, including tumour

- staging, effects of treatments such as irradiation, and physiological changes;
- (b) an advanced understanding of parameters of voice assessment and intervention, including familiarity with diagnostic equipment, laryngectomy rehabilitation, causes, anatomical changes and emotional aspects of laryngectomy, preoperative consultation assessment and treatment to individuals who will be alaryngeal with communication and swallowing needs resulting from cancer (or its treatment) or other medical conditions, selection criteria for appropriate TEP candidates, placement, care and use of indwelling prostheses, and selection of appropriate candidates for a tracheostoma valve;
 - (c) an ability to size and fit removable TEP prostheses;
 - (d) an ability to teach the client or significant other to use and care for various types of prostheses and the tracheostoma valve;
 - (e) an ability to resolve problems related to sound production and to teach the client to do the same;
 - (f) an ability to resolve problems related to leaking of liquid or food from the fistula site and to teach the client to do the same;
 - (g) an ability to resolve problems related to tissue changes and to teach the client to do the same;
 - (h) an ability to resolve problems related to stoma size;
 - (i) knowledge of use and contraindications of topical anesthetics and an ability to use topical anesthetics as appropriate.

Use of “certified”

125. An active registrant who has been certified by the quality assurance committee in voice disorders and restoration using TEP and has been placed on the appropriate registry, is entitled to use the designation “Certified in Voice Restoration (Voice Prostheses)”, and may not use any other title or designation for this certification.

Certificate H) Communication and Swallowing Assessment and Management for Tracheostomy

Definitions

125.1. For the purposes of sections 126 to 128.2:

“adult” means an individual who has attained the age of 12 years;

“child” means an individual who has not attained the age of 12 years;

Application

126. This advanced competency certificate program applies to the restricted activity set out in section 5(3)(e) of the Regulation.

Certification required

126.1(1) Pursuant to section 5(3)(e) of the Regulation, a registrant must not assess or manage swallowing and communication disorders of an adult or a child with a tracheostomy, with or without ventilator dependency, unless the registrant is certified pursuant to this certification program.

(2) A registrant may be certified in the assessment and management communication and swallowing disorders of adults or children with a tracheostomy, or both adults and children with a tracheostomy, as the registrant has declared pursuant to section 126.2.

Declaration

126.2(1) When applying to be certified in the assessment and management of swallowing and communication disorders of an adult or a child with a tracheostomy or when renewing a certificate under section 94, the registrant must declare to the quality assurance committee on a form approved by the committee whether the registrant will provide such services to adults, children or both.

(2) Once a registrant has provided a declaration pursuant to subsection (1) that registrant must limit the provision of assessment and management of swallowing and communication disorders to adults or children with a tracheostomy, or both, as the registrant has declared.

(3) If a registrant determines that it is necessary to change a declaration provided pursuant to subsection (1), that registrant must promptly notify the quality assurance committee and provide a new and revised declaration.

Acceptable programs of study

127. To be acceptable to the committee under section 116(3), the program of study in assessing and managing swallowing and communication disorders for tracheostomy clients, with or without ventilator dependency, must provide a registrant with the following competencies:

- (a) an entry-to-practice understanding of swallowing and communication assessment and intervention, including that pertaining to tracheostomy and ventilation;
- (b) an ability to identify and describe normal and abnormal respiration, airway protection and the implications of tracheotomy on swallowing and voice production;
- (c) an advanced clinical understanding and knowledge for swallowing and communication care in clients with a tracheostomy, with or without ventilator dependency;
- (d) familiarity with the operation of relevant equipment;
- (e) an advanced understanding of the assessment and diagnosis of communication and swallowing disorders in clients with tracheostomy, with or without ventilator dependency;
- (f) an understanding and ability to select clients for communication and swallowing management and treatment options (including speaking valves);
- (g) an advanced understanding of, and demonstrated ability in, placing a one-way speaking valve on clients with or without ventilator dependency;
- (h) an understanding of the use and placement of various types of tracheostomy tubes;
- (i) an ability to instruct the client to perform the recommended treatment strategies independently, including placement of one way speaking valves;
- (j) an ability to resolve problems related to sound production or swallowing, and to instruct the client to be self-sufficient in resolving those problems;

- (k) demonstrated proficiency in documenting client assessment, diagnostic and intervention results.

Use of “certified”

128(1) An active registrant who has been certified by the quality assurance committee in communication and swallowing disorders for both adults and children with tracheostomies and has been placed on the appropriate registry, is entitled to use the designation “Certified in Communication and Swallowing Assessment and Management for Tracheostomy (Adult and Paediatric)”, and may not use any other title or designation for this certification.

(2) An active registrant who has been certified by the quality assurance committee in communication and swallowing disorders for only adults with tracheostomies and has been placed on the appropriate registry, is entitled to use the designation “Certified in Communication and Swallowing Assessment and Management for Tracheostomy (Adult)”, and may not use any other title or designation for this certification.

(3) An active registrant who has been certified by the quality assurance committee in communication and swallowing disorders for only children with tracheostomies and has been placed on the appropriate registry, is entitled to use the designation “Certified in Communication and Swallowing Assessment and Management for Tracheostomy (Paediatric)”, and may not use any other title or designation for this certification.

Providing services to children in adult facilities

128.1 A registrant who

- (a) was granted
 - (i) a Certificate in Voice Restoration (Tracheostomy Tubes or Speaking Tubes) pursuant to sections 116 and 127 as they existed prior to the effective date of this section, or
 - (i) a Certificate in Communication and Swallowing Assessment and Management for Tracheostomy pursuant to sections 116 and 127 as amended after the effective date of this section, and
- (b) has declared an adult only practice pursuant to section 126.2, may, notwithstanding that declaration, provide the services covered under this

advanced competency certificate to a child without so notifying the committee and submitting a revised declaration in the following circumstances:

- (c) if the child has attained the age of 11 years;
- (d) if the child requires care and assessment in a tertiary and predominately adult hospital or health care facility.

Transitions

128.2(1) A Certificate in Voice Restoration (Tracheostomy Tubes or Speaking Tubes) granted pursuant to sections 116 and 127 as they existed prior to the effective date of this section expires on the expiry date as specified on that certificate, but may be renewed under section 94 and, when renewed, it may be reissued as a Certificate in Communication and Swallowing Assessment and Management for Tracheostomy pursuant to this section.

(2) A registrant who had been granted a Certificate in Voice Restoration (Tracheostomy Tubes or Speaking Tubes) prior to the effective date of this section may, until such time as the original certification expires or is renewed under section 94, refer to

- (a) that certificate as a Certificate in Communication and Swallowing Assessment and Management for Tracheostomy, or
- (b) as being Certified in Communication and Swallowing Assessment and Management for Tracheostomy.

(3) In addition to the requirements of subsection (2), a registrant must provide a declaration to the quality assurance committee under section 126.2, and pursuant to such a declaration:

- (a) if the registrant provides the certified services to both adults and children with tracheostomies, the registrant may add to the designation “(Adult and Paediatric)”;
- (b) if the registrant provides the certified services to only adults with tracheostomies, the registrant may add to the designation “(Adult)”;
- (c) if the registrant provides the certified services to only children with tracheostomies, the registrant may add to the designation “(Paediatric)”.

(4) On renewal of a Certificate in Voice Restoration (Tracheostomy Tubes or Speaking Tubes) that was granted prior to the effective date of this section, the Registrar must issue

the registrant who meets the requirements of section 94 a new Certificate in Communication and Swallowing Assessment and Management for Tracheostomy for adults, children or both as the registrant has declared pursuant to section 126.2.

Certificate I) Videofluoroscopic Assessment of Adult Swallowing Disorders

Definitions

129. For the purposes of this section to section 131.4:

“**adult**” means an individual who has attained the age of 16 years;

“**child**” means an individual who has not attained the age of 16 years or an adult under the age of 20 who has been diagnosed with a condition or disorder that gives that adult a developmental age of someone under 16;

“**paediatric**” means the care or services that are provided to a child.

Application

129.1. This advanced competency certificate program applies to the restricted activity set out in sections 5(3)(d) and (e) of the Regulation.

Certification required

130(1) A registrant must not conduct a videofluoroscopic assessment of an adult’s swallowing disorder unless the registrant is certified in this advanced competency.

(2) Nothing in these bylaws authorizes a registrant to order or administer radiation, including fluoroscopy for diagnostic or imaging purposes, or to operate videofluoroscopic equipment.

Acceptable programs of study

130.1(1) To be acceptable to the committee under section 116(3), the program of study in videofluoroscopic assessment of swallowing disorders must provide a registrant with the following competency:

(a) an entry-to-practice understanding of dysphasia, potential results depending on the causative factors of swallowing disorders, and parameters of anatomical landmarks as viewed fluoroscopically in the lateral and anterior-posterior planes

- including familiarity with diagnostic equipment;
- (b) an ability to identify and describe normal and abnormal physiology for respiration, airway protection, and voice production;
- (c) an advanced understanding of
- (i) normal and abnormal anatomy and physiology for respiration, airway protection, voice and swallowing,
 - (ii) the interrelationship of respiration, voice and swallowing,
 - (iii) typical age-related changes in anatomy and physiology of the swallow,
 - (iv) changes in swallowing anatomy and physiology related to various medical conditions/surgical procedures,
 - (v) the potential effects of common medications on swallowing;
 - (vi) instrumental swallowing studies to provide a foundational understanding of the instrumental assessment, follow up management based on the assessment, and regulatory issues and professional standards related to the instrumental assessment,
 - (vii) indications and contraindications and advantages and disadvantages of the videofluoroscopic swallowing study,
 - (viii) elements of a comprehensive videofluoroscopic swallowing study, and the implementation of same,
 - (ix) proper positioning of the individual for optimal imaging and functional assessment,
 - (x) the roles of various team members who may be involved in the study, and
 - (xi) use of the appropriate treatment interventions and their rationale, including postural changes, maneuvers, bolus modifications, delivery method, and sensory enhancement techniques to improve safety and efficiency of the swallow;
- (d) an ability to prepare standard bolus types and viscosities prior to the examination according to facility specific protocol and results of most recent clinical swallowing evaluation;
- (e) an ability to present bolus types in a calibrated and consistent pattern;
- (f) an ability to evaluate the integrity of airway protection before, during, and

after swallowing;

(g) an ability to evaluate the effectiveness of postures, maneuvers, bolus modifications, and sensory enhancement techniques;

(h) an ability to evaluate the individual's tolerance of and ability to perform and repeat appropriate therapeutic interventions;

(i) an ability to conduct the examination in a timely manner to minimize radiation exposure;

(j) an ability to monitor possible adverse reactions to the examinations;

(k) based on the study results, an ability to provide recommendations regarding

(i) safety for oral versus non-oral delivery of nutrition and hydration,

(ii) specific oral intake modifications,

(iii) therapeutic interventions for meals,

(iv) positioning,

(v) safe feeding precautions,

(vi) need for and timing of reevaluation,

(vii) necessary referrals,

(viii) prognosis, and

(ix) individual's cultural preferences and attitudes towards eating/diet.

(l) in relation to the above competencies, an advanced understanding of the inter-relationship between respiration and swallowing.

(2) The competency listed in subsection (1) need to be demonstrated in specific to settings and populations.

Use of "certified"

130.3 An active registrant who has been certified by the quality assurance committee in videofluoroscopic assessment of adult swallowing disorders and has been placed on the appropriate registry, is entitled to use the designation "Certified in Videofluoroscopic Assessment of Adult Swallowing Disorders", and may not use any other title or designation for this certification.

Issuing of replacement certificates

130.4(1) If a registrant was granted a Certificate I “Videofluoroscopic Assessment of Swallowing Disorders” under the former sections 129 to 131 prior to the date this section came into force, the registrar may issue a replacement certificate to the registrant in the form of a Certificate I “Videofluoroscopic Assessment of Adult Swallowing Disorders”, if the quality assurance committee determines that the registrant had obtained at the time of applying for the original certificate the competency set out in section 130.1(1).

(2) For greater certainty, sections 89 to 96 apply to a replacement certificate issued under this section.

Certificate J) Videofluoroscopic Assessment of Paediatric Swallowing Disorders

Application

130.5. This advanced competency certificate program applies to the restricted activities set out in sections 5(3)(d) and (e) of the Regulation.

Certification required

131(1) A registrant must not conduct a paediatric videofluoroscopic swallowing assessment of a child unless that registrant is certified in this advanced competency.

(2) Nothing in these bylaws authorizes a registrant to order or administer radiation, including fluoroscopy for diagnostic or imaging purposes, or to operate video fluoroscopic equipment.

Acceptable programs of study

131.1(1) To be acceptable to the committee under section 116(3), the program of study in videofluoroscopic assessment of paediatric swallowing disorders must provide a registrant with the following competency in relation to children:

- (a) an entry-to-practice understanding of dysphagia, potential results depending on the causative factors of swallowing disorders, and parameters of anatomical landmarks as viewed fluoroscopically in the lateral and anterior-posterior planes including familiarity with diagnostic equipment;
- (b) an ability to identify and describe normal and abnormal aerodigestive

physiology for respiration, airway protection, and voice production at various developmental stages;

- (c) an advanced understanding, at various developmental stages, of
 - (i) normal and abnormal aerodigestive anatomy and physiology for respiration, airway protection and swallowing,
 - (ii) the interrelationship of respiration and swallowing,
 - (iii) typical age-related changes in anatomy and physiology of the swallow,
 - (iv) changes in swallowing anatomy and physiology related to various congenital and acquired medical conditions or surgical procedures,
 - (v) the potential effects of common medications on swallowing;
 - (vi) instrumental swallowing studies to provide a foundational understanding of the instrumental assessment, follow up management based on the assessment, and regulatory issues and professional standards related to the instrumental assessment,
 - (vii) indications and contraindications and advantages and disadvantages of the videofluoroscopic swallowing assessment,
 - (viii) elements of a comprehensive videofluoroscopic swallowing assessment, and the implementation of same,
 - (ix) proper positioning of the child for optimal imaging and functional assessment,
 - (x) the roles of various team members who may be involved in the assessment, and
 - (xi) use of the appropriate treatment interventions and their rationale, including postural changes, manoeuvres, bolus modifications, delivery method, and sensory enhancement techniques to improve safety and efficiency of the swallow;
- (d) an ability to prepare standard bolus types and viscosities prior to the examination according to facility specific protocol and results of most recent clinical swallowing evaluation;

- (e) an ability to present bolus types in a calibrated and consistent pattern;
 - (f) an ability to evaluate the integrity of airway protection before, during, and after swallowing;
 - (g) an ability to evaluate the effectiveness of postures, manoeuvres, bolus modifications, and sensory enhancement techniques;
 - (h) an ability to evaluate the child's tolerance of and ability to perform and repeat appropriate therapeutic interventions;
 - (i) an ability to conduct the examination in a timely manner to minimize radiation exposure;
 - (j) an ability to monitor possible adverse reactions to the examinations;
 - (k) based on the assessment results, an ability to provide recommendations regarding
 - (i) safety for oral versus non-oral delivery of nutrition and hydration,
 - (ii) specific oral intake modifications,
 - (iii) therapeutic interventions for meals,
 - (iv) positioning,
 - (v) safe feeding precautions,
 - (vi) need for and timing of re-evaluation,
 - (vii) necessary referrals,
 - (viii) prognosis, and
 - (ix) the child's cultural preferences and attitudes towards eating and diet.
- (2) The competency listed in subsection (1) must be demonstrated for specific paediatric populations.

Use of "certified"

131.3. An active registrant who has been certified by the quality assurance committee in videofluoroscopic assessment of paediatric swallowing disorders and has been placed on the appropriate registry, is entitled to use the designation "Certified in Videofluoroscopic Assessment of Paediatric Swallowing Disorders", and may not use any other title or designation for this certification.

Repealed

131.4 [Repealed 2016-05-08.]

Limited use of Certificate I for children

131.5 A registrant who holds only a Certificate I “Videofluoroscopic Assessment of Adult Swallowing Disorders” issued under section 130(1), may conduct a videofluoroscopic assessment of a child without holding a Certificate J “Videofluoroscopic Assessment of Paediatric Swallowing Disorders” under section 131(1), if

- (a) the child has attained the age of 11 years, and
- (b) the child requires a videofluoroscopic assessment in a tertiary and predominately adult hospital or health care facility.

Certificate K) Management of Airway Secretions (Oropharyngeal or Tracheal Suctioning)

Definition

131.6. For the purposes of sections 131.7 to 131.10:

“**oropharyngeal suctioning**” means to remove oropharyngeal secretions using a vacuum extraction device that is inserted orally into the pharynx;

“**tracheal suctioning**” means to remove tracheal secretions using a vacuum extraction device that is inserted into a tracheal opening.

Application

131.7. This advanced competency certificate program applies to the restricted activities set out in sections 5(3)(d) and (e) of the Regulation.

Certification required

131.8(1) A registrant must not perform oropharyngeal suctioning or tracheal suctioning unless the registrant is certified in the management of airway secretions pursuant to this certification program.

(2) A registrant may be certified in the management of airway secretions and authorized to perform either oropharyngeal suctioning or tracheal suctioning, or both.

(3) Before a registrant may be certified in management of tracheal secretions and perform tracheal suctioning, that registrant must also be certified in and hold one or both of the following:

- (a) Certificate G “Voice Restoration (Voice Prostheses)”, as per sections 123 to 124;
- (b) Certificate H “Communication and Swallowing Assessment and Management for Tracheostomy”, as per sections 126 to 128.2.

Acceptable programs of study

131.9(1) To be acceptable to the committee under section 116(3), the program of study in managing airway secretions must

- (a) involve knowledge, skills and abilities specific to managing secretions and suctioning, including practical training pertaining to communication and swallowing disorders, and
- (b) provide a registrant with the competency specified in subsections (2) or (3), or both, as applicable.

(2) In relation to oropharyngeal suctioning, the program of study must provide a registrant with the following competency:

- (a) an entry-to-practice understanding of secretions, suctioning and the impact of suctioning on oxygen levels and airway management;
- (b) an entry to practice understanding of anatomy and physiology related to the respiratory system;
- (c) an advanced understanding of oral hygiene care and oral suctioning;
- (d) an advanced understanding of normal secretion management and clearance;
- (e) an advanced understanding of the impact and inter-relationship of communication and swallowing assessment and treatment and secretion management;
- (f) an advanced understanding of when a client requires oropharyngeal suctioning as part of the management of communication and swallowing disorders;
- (g) an advanced understanding of the risks and possible complications of oral hygiene and oropharyngeal suctioning and how to mitigate those risks;

- (h) an ability to demonstrate the necessary steps involved in oropharyngeal suctioning;
 - (i) knowledge of emergency procedures and infection control procedures in a clean environment
 - (j) an understanding of the equipment required for oropharyngeal suctioning and its proper use;
 - (k) an ability to evaluate client outcomes;
 - (l) an understanding of the need for team referrals and collaboration;
 - (m) an ability to document procedures and outcomes.
- (3) In relation to tracheal suctioning, the program of study must provide a registrant with the following competency:
- (a) an entry-to-practice level understanding of tracheal secretions, suctioning and the impact of tracheal suctioning on oxygen levels and airway management;
 - (b) an advanced understanding of changes in the anatomy and physiology of the respiratory system related to tracheotomy;
 - (c) an advanced level understanding of oral hygiene care and oral suctioning; tracheostomy tube cleaning and insertion;
 - (d) an advanced understanding of normal secretion management and clearance and how that differs in a tracheostomized client;
 - (e) an advanced understanding of the inter-relationship between communication and swallowing assessment and treatment and secretion management in a tracheotomy client;
 - (f) an advanced understanding of when a client requires tracheal suctioning as part of the management of communication and swallowing disorders;
 - (g) an understanding of potential risks and complications of tracheal suctioning and how to mitigate those risks;
 - (h) an ability to demonstrate the steps involved in tracheal suctioning;
 - (i) knowledge of emergency procedures and infection control procedures, including those pertaining to a sterile environment;
 - (j) an understanding of the equipment required for tracheal suctioning and its proper use;

- (k) an ability to evaluate client outcomes;
- (l) an understanding of the need for team referrals and collaboration;
- (m) an ability to document procedures and outcomes.

Use of “Certified”

131.10(1) An active registrant who has been certified by the quality assurance committee in the management of airway secretions for both oropharyngeal and tracheal suctioning pursuant to this certification program and has been placed on the appropriate registry, is entitled to use the designation “Certified in the Management of Airway Secretions (Oropharyngeal and Tracheal Suctioning)”, but may not use any other title or designation for this certification.

(2) An active registrant who has been certified by the quality assurance committee in the management of airway secretions for only oropharyngeal suctioning pursuant to this certification program and has been placed on the appropriate registry, is entitled to use the designation “Certified in the Management of Oropharyngeal Secretions”, but may not use any other title or designation for this certification.

(3) An active registrant who has been certified by the quality assurance committee in the management of airway secretions for only tracheal suctioning pursuant to this certification program and has been placed on the appropriate registry, is entitled to use the designation “Certified in the Management of Tracheal Secretions”, but may not use any other title or designation for this certification.

Part 11 – Review by the board

Definitions

132. For clarity, a reference to “the board” in this Part is a reference to the college board as defined in section 1 of these bylaws, and not the Health Professions Review board established under Part 4.2 of the Act.

Application

133. This Part applies if a section elsewhere in these bylaws grants to a person the right to request a review by the board of a committee decision.

Board review of a decision

134(1) A person applying for a review under this Part must, within 30 days of the day on which written notice of the committee’s decision is sent to that person, deliver to the registrar:

- (a) a copy of all information that person provided to the committee leading up to its decision;
- (b) a copy of the committee’s decision;
- (c) the reason(s) why the person believes that the committee’s decision is wrong;
- (d) any other information the person believes the board should consider.

(2) Only the person directly affected by the decision and the committee are parties to a review under this Part.

(3) The board may approve policies and procedures not inconsistent with the Act or this Part to administer its reviews.

Conduct of a board review

135(1) On receipt of an application for a review under section 134, the board must conduct a review of the committee’s decision in keeping with the sections in this Part and any review policies and procedures approved by the board.

(2) A review under this section is a review on the record.

(3) Despite subsection (2), the board may hear evidence that is not part of the record as reasonably required by the board so as to provide a full and fair disclosure of all matters related to the issue under review.

Result of a board review

136(1) On completing its review under this Part, the board may make an order

- (a) confirming the committee's original decision,
- (b) directing the committee to make the decision that it should have made, or
- (c) sending the matter back to the committee for reconsideration, with or without direction.

(2) The board must, no later than 30 days after making its order under subsection (1), deliver a copy of the order to the parties to the review.

Review re: an advanced competency certificate

137(1) If the matter under review is a decision of the registration committee to deny an active registrant an advanced competency certificate under Part 10, the board may make an order under section 136(1) directing the committee to grant an advanced competency certificate, with or without limits or conditions, or certification, as the case may be, only if the board is satisfied that

- (a) the committee failed to act fairly in considering the application for certification,
- (b) the certification decision
 - (i) was made arbitrarily or in bad faith, or for an improper purpose,
 - (ii) was based entirely or predominantly on irrelevant factors, or
 - (iii) failed to take into account requirements under the Act or the bylaws, and
- (c) the conditions described in subsections (2)(a) or (b) are met.

(2) The following conditions apply for the purposes of subsection (1)(c):

- (a) the registrant's knowledge, skills and abilities must be substantially equivalent to the standards of academic or technical achievement and the competency or other qualifications required for certification by others in that class of registration, and
- (b) the registrant must meet any other conditions or requirements for advanced certification that apply to that class of registration.

Part 12– Delegation to non-registrants

Definitions

138. In this Part:

“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.

Delegation

139 (1) A registrant must not delegate an aspect of practice to a non-registrant except in accordance with this Part, the Standards of Practice and all applicable clinical decision support tools.

(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 the Standards of Practice and all applicable clinical decision support tools.

(3) Subject to subsection (4), (5) or (6), a registrant must not delegate to a non-registrant an aspect of practice that includes the performance of a restricted activity.

(4) An audiologist may delegate to a communication health assistant an aspect of practice that includes the performance of one or more of the following restricted activities:

- (a) the restricted activity described in section 5(1)(b) of the Regulation;
- (b) 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;
- (c) the restricted activity described in section 5(1)(e) of the Regulation.

(5) A hearing instrument practitioner may delegate to a communication health assistant an aspect of practice that includes the performance of one or both of the following restricted activities:

- (a) the restricted activity described in section 5(2)(a) of the Regulation;
- (b) 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.

- (6) A speech-language pathologist may delegate to a communication health assistant an aspect of practice that includes the performance of one or both of the following restricted activities:
- (a) the restricted activity described in section 5(3)(b) of the Regulation;
 - (b) the restricted activity described in section 5(3)(f) of the Regulation.
- (7) When delegating an aspect of practice that includes a restricted activity under subsection (4), (5) or (6), a registrant must
- (a) be satisfied the communication health assistant is competent to provide or perform the aspect of practice safely and in accordance with the Standards of Practice and all applicable clinical decision support tools, and
 - (b) provide the communication health assistant with appropriate instructions specific to providing or performing the aspect of practice on the client.

Ultimate responsibility

140 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.

DIVISION C – STANDARDS, COMPLAINTS AND DISCIPLINE

Part 13 – Regulating Professional Practice

Code of ethics and standards of practice

150(1) While providing services to the public, a registrant must at all times conduct his or her practice

- (a) in a manner that is in keeping with the ethical standards of the profession, and
- (b) in accordance with the Code of Ethics and the Standards of Practice, as approved by the board.

(2) A registrant must take reasonable steps to ensure that other registrants, assistants, students, and non-registrants employed by or supervised by the registrant, are aware of and act in accordance with the requirements of the Code of Ethics and the Standards of Practice, so far as they apply to those persons.

Liability insurance

151. An active registrant, conditional active registrant or temporary registrant must either

- (a) obtain and at all times maintain insurance that
 - (i) is in an amount of at least \$2,000,000 per claim and in a form satisfactory to the board, and
 - (ii) 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
- (b) confirm that the registrant's employer has in place insurance as specified in paragraph (a).

Marketing

152(1) In this part,

- (a) "**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,
- (b) "**marketing**" includes
 - (i) an advertisement,
 - (ii) 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
 - (iii) contact with a prospective client initiated by or under the direction of a registrant.

(2) A registrant must not engage in marketing his or her professional services or authorize marketing that

- (a) is false,

- (b) contains material inaccuracies,
 - (c) is reasonably capable of confusing, deceiving or misleading a member of the public,
 - (d) is likely to create in the mind of the recipient or intended recipient an unjustified expectation about the results that the registrant can achieve,
 - (e) exploits or takes advantage of the public's physical or emotional states, or the public's lack of knowledge of professional subject matters,
 - (f) contains claims or assertions that cannot be verified by a member of the public acting as a reasonable consumer of professional services,
 - (g) uses comparative statements that include reference to fees, services, products or facilities,
 - (h) implies that the registrant can obtain results
 - (i) not achievable by other registrants,
 - (ii) by improperly influencing a public body or official, or any corporation, agency or person having any interest in the welfare of the recipient,
 - (iii) by any other improper means, or
 - (i) compares the quality of services provided with those provided by
 - (i) another registrant,
 - (ii) a person authorized to provide health care services under another enactment, or
 - (iii) another health profession,
 - (j) tends to undermine the professionalism, ethics, integrity or dignity of the profession or otherwise brings the profession into disrepute, or
 - (k) is otherwise contrary to the public interest.
- (3) A registrant who, in any advertisement, includes a statement of fees for a specific service or product
- (a) 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
 - (b) must not in the advertisement compare the fees or product prices charged by the registrant with those charged by another registrant.

(4) 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

- (a) a copy of any such publication
- (b) a recording of any such broadcast made by use of any electronic media, including radio, television and microwave transmission, and
- (c) a written record of when and where the publication or broadcast was made.

(5) 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 his or her marketing.

Internet marketing

153. If a registrant uses a website to market his or her services, the home page of the registrant's website must clearly show:

- (a) that the registrant is licensed in British Columbia;
- (b) the physical location of the registrant's office or clinic;
- (c) the registrant's 10-digit office or clinic telephone number.
- (d) the contact information for the college;
- (e) a notice to clients that unresolved concerns they may have about the registrant's practice may be reported to the college.

Use of titles

154(1) A registrant when using a title required by section 3 of the Regulation may use, in connection with that title, only the term "registered" before that title.

(2) A registrant must not use the term "regulated", "licensed", "certified" or any other term to suggest or denote they are a registrant of the college or hold a special certification, unless the registrant is specifically authorized to use "certified" under Part 10 (Advanced Competency Certification Programs).

Permitted practice descriptions / Preferred areas of practice

155(1) In describing his or her practice as a registrant or as someone permitted to provide the services of a registrant, a registrant may list

- (a) the services that he or she is trained in and is capable of providing as a registrant,

- (b) the techniques that he or she has been trained to provide as a registrant, or
 - (c) the typical types of communication and related disorders that he or she is trained to diagnose, assess, treat or prescribe as a registrant.
- (2) In complying with subsection (1), a registrant
- (a) may not list a service, technique or problem that falls outside the scope of practice of a registrant, as required under the Regulation or as may otherwise be directed by the board,
 - (b) may state that the listed service, technique or problem is a "preferred area of practice" using that or similar phrasing, and
 - (c) may not misrepresent any clinical expertise that he or she holds or has obtained.

Declaring a specialty

156(1) Despite sections 154 and 155, a registrant may

- (a) declare or inform the public that the registrant specializes in the performance of a specific technique or the provision of a particular service, or
 - (b) refer to certificate or diploma the registrant has obtained in relation to a technique or service, so long as, while doing so, the registrant
 - (c) describes accurately the precise nature of the technique or service, or
 - (d) identifies the educational program or agency that granted the certificate or diploma to the registrant in relation to that technique or service, but
 - (e) does not use the term "specialist" or otherwise suggest the registrant is a specialist in that technique or service.
- (2) To ensure compliance with this section, the registration committee may require a registrant provide the committee with proof in support of any declaration or reference made under subsections (1)(a) or (b).
- (3) In complying with subsection (1)(b), a registrant may use an abbreviated version of a recognized national or international clinical certification credential in the form approved by the national or international organization that provided the registrant with that credential.

Ability of registrants to accept delegations or act under supervision

157. A registrant is entitled to undertake a restricted activity outside of the scope of practice of that registrant's profession if such activity is authorized by and undertaken in accordance with the bylaws of another college established under the Act that has authority to regulate the activity in question.

Speaking on behalf of the college/ Professional endorsements

158. A registrant must not

- (a) state publicly that he or she speaks on behalf of the college, unless he or she has been expressly authorized by the board to state the official position of the college, and
- (b) endorse or lend himself or herself as a professional 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.

Continuing Competency Credits

159(1) An active registrant, conditional active registrant or inactive registrant must

- (a) complete within a three-year cycle not less than 45 continuing competency credits approved by the quality assurance committee, and
 - (b) report the continuing competency credits earned during the cycle to the committee in accordance with the reporting schedule and procedures approved by the committee.
- (2) A registrant must retain documents or other information that supports the continuing competency credits reported under subsection (1).
- (3) 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 subsection (1).
- (4) If the quality assurance committee finds an inaccuracy or false reporting and is unable to resolve that deficiency by subsequent negotiation with the registrant, it may report that finding to the inquiry committee.

Assessment of professional performance

160(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, and for that purpose may

- (a) assess the clinical ability of a registrant,
- (b) either individually or as part of an audit of a group of registrants, collect information from a registrant about the practice of his or her profession, and
- (c) establish remedial procedures to assist a registrant in identifying and correcting deficiencies in his or her clinical abilities or place of practice.

(2) Upon receiving a request for practice information under subsection (1), a registrant must respond to the quality assurance committee within 60 days in the manner and with the information requested.

(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

- (a) the consent of the client being treated has been obtained in advance, or
- (b) the service is being provided in a public setting.

(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.

Repealed

161 [Repealed 2017-05-13.].

Repealed

162 [Repealed 2017-05-13.].

Documentation and record management

163(1) A registrant must take all reasonable measures to ensure that his or her collection, protection, use, disclosure and disposal of client personal information meets the requirements of

- (a) the *Freedom of Information and Protection of Privacy Act* if the registrant practices as an employee of a public body, or
 - (b) the *Personal Information Protection Act* if the registrant is in private practice or does not otherwise practice as an employee of a public body.
- (2) Without limitation, under subsection (1), a registrant must
- (a) ensure that personal information collected from clients is current, legible, accurate and completely recorded,
 - (b) at all times protect and maintain the confidentiality of personal information collected from clients,
 - (c) upon request, provide clients, or the legal representatives of clients, with access to their personal information in accordance with, as applicable, the *Personal Information Protection Act* or the *Freedom of Information and Protection of Privacy Act*, and all other relevant legal requirements, and
 - (d) ensure that all records from his or her 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.
- (3) 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) In accordance with such requirements as the board may establish, a registrant in private practice must
- (a) prepare a plan for the disposition of any client records that may remain in the registrant's possession at the time he or she ceases to practice, and
 - (b) upon request, produce a copy of the plan to the quality assurance committee or the registrar.

Annual calibration of equipment

164(1) For the purposes of this section “calibrated equipment” means any equipment or device that

(a) is used to assess or screen hearing, middle ear function or cochlear function, and

(b) requires calibration to maintain its accuracy,

and includes without limiting the meaning of this term, audiometers, acoustic immittance meters, otoacoustic emission measurement equipment, real ear measurement equipment that is not self-calibrating and sound level meters.

(2) A registrant must ensure the following is done:

(a) any calibrated equipment used by that registrant or any person under the direction or supervision of the registrant is properly calibrated

(i) at least once every calendar year, or

(ii) at the frequency specified by the manufacturer;

(b) a calibration report is prepared for each calibrated equipment and retained for at least two years from the date the calibration was performed.

Part 14 – Complaint Investigation and Resolution

Inspections

165. If an inspector intends to observe a registrant provide a service to a client, the inspector must obtain the consent of the client being treated, unless that service is being provided in a public setting.

Investigations by inquiry committee

166(1) The inquiry committee must notify a registrant who is the subject of an investigation and any complainant of the disposition of the investigation and any action taken under section 33(4) of the Act.

(2) Before agreeing to accept an undertaking or consent under section 36 of the Act, the inquiry committee may review all previous complaints and disciplinary matters involving the registrant to be satisfied that the proposed undertaking or consent is appropriate in the circumstances.

(3) The inquiry committee may order that the identity of a complainant not be disclosed to the respondent or any other party if the committee is of the view that such disclosure may place the complainant at undue risk of harm.

Registrar authority

167. The registrar is authorized to act under section 32(3) of the Act.

Consent orders

168(1) In this section, "consent order" means an agreement under sections 32.2(4)(b) or 32.3(3)(b) of the Act, the record of an undertaking or a consent given under section 36 of the Act, or a consent order under section 37.1 of the Act.

(2) A consent order must

- (a) include any consent to a reprimand or to 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 or 37.1 of the *Act*,
- (c) specify the length of time that an undertaking specified in paragraph (b) is binding on the registrant,
- (d) specify the procedure that the registrant may follow to be released from an undertaking specified in paragraph (b), and
- (e) subject to sections 22 and 39.3 of the Act and these bylaws, specify which terms or conditions of the consent order may be disclosed to others, including the public.

(3) If 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 requires the respondent to take any corrective or remedial action, the inquiry committee may direct the registrar

- (a) to monitor the respondent's compliance with that requirement, and
- (b) to report periodically to the chair of the inquiry committee regarding the respondent's compliance with that requirement.

Mediation between complainant and registrant

169. The inquiry committee may recommend under section 33(6)(b) of the Act that a complaint be mediated between the complainant and the registrant if

- (a) the committee believes it is in the public interest to mediate the complaint, and
- (b) the complainant and the registrant agree to mediation.

Mediation between committee and registrant

170. The inquiry committee may recommend under section 33(6)(b) of the Act that a complaint be mediated between the committee and the registrant if

- (a) the committee believes it is in the public interest to mediate the complaint without the complainant, and
- (b) the committee and the registrant agree to mediation in the absence of the complainant.

Appointment and payment of mediator

171. If the parties agree to mediation under either section 169 or 170, the inquiry committee must appoint a mediator at the college's expense who is acceptable to the parties that will attend the mediation.

Mediation terms and agreement to mediate

172(1) A mediation must be conducted in accordance with any policies and procedures approved by the board that are not inconsistent with this Part.

- (2) The mediator must conduct the mediation process in accordance with the terms of a written Agreement to Mediate, which must be executed by the parties, the mediator and any other persons the parties agree may attend the mediation.
- (3) An Agreement to Mediate must contain a confidentiality provision that are acceptable to the inquiry committee, and may list any exceptions to that condition.

Agreement reached by mediation

173(1) In this section, "mediated agreement" means a written agreement between the parties that is reached through mediation.

- (2) Where an agreement between the parties is reached through mediation,

- (a) the terms of the agreement must be set out in a mediated agreement that must be signed by the mediating parties,
 - (b) the agreement must contain an enforcement provision that is enforceable by and acceptable to the inquiry committee, and
 - (c) a copy of the signed mediated agreement must be submitted by the mediator to the inquiry committee.
- (2) Where a term of a mediated agreement requires the registrant to undertake or consent to an action referred to in section 36 of the Act, that undertaking or consent must be monitored and enforced by the inquiry committee.
- (3) Where a mediated agreement is reached, the inquiry committee must:
- (a) report the resolution of the matter to the board;
 - (b) if the mediation did not involve the complainant, report the resolution of the matter to the complainant;
 - (c) retain a copy of the signed mediated agreement on file.

Agreement not reached

174. Where an agreement is not reached through mediation, the mediator must refer the matter back to the inquiry committee with or without recommendations, and the committee may then take any other action under section 33(6) of the Act.

Registrant cooperation

175(1) A registrant must cooperate with the inquiry committee during an investigation of a complaint against that or any other registrant.

(2) If a registrant refuses to cooperate with the inquiry committee during an investigation, the committee must advise the respondent that continued refusal may

- (a) constitute a breach of subsection (1) or the Code of Ethics, and
- (b) become a new, separate complaint against the registrant.

(3) Despite subsection (1) or (2), a registrant may refuse to mediate a complaint under sections 169 or 170, and the committee may not use that refusal against the respondent in any subsequent proceeding.

Part 15 – Citations and Disciplinary Proceedings

Citation for disciplinary hearing

176(1) Before the issuance of a citation under section 37 of the Act, on the direction of the inquiry committee, the registrar may join two or more complaints or other matters which are to be the subject of a discipline hearing in one citation, as the panel considers appropriate in the circumstances

(2) After the issuance of a citation or citations under section 37 of the Act, on the direction of the discipline committee, the registrar may, as the committee considers appropriate in the circumstances,

- (a) join two or more complaints or other matters which are to be the subject of a discipline hearing,
- (b) sever two or more complaints or other matters which are to be the subject of a discipline hearing, or
- (c) amend a citation.

(3) If a citation is amended under subsection (2)(c) before a discipline hearing, the amended citation must be delivered to the respondent by personal service or sent by regular mail to the respondent at the last address for the respondent recorded in the register referred to in section 21(2) of the Act not fewer than 14 days before the date of the hearing

(4) If a citation is amended under subsection (2)(c) before a discipline hearing and the amended citation changes the date, time or place of the hearing, the registrar must notify any complainant of the amendment not fewer than 14 days before the date of the hearing.

Discipline committee or panel

177(1) No person may sit on the discipline committee or panel while he or she is a member of the inquiry committee.

(2) No member of the discipline committee may sit on the panel hearing a matter in which he or she

- (a) was involved in the investigation leading to the citation or was a member of the inquiry committee that recommended the citation, or
- (b) has had any other prior involvement that would create a reasonable apprehension of bias.

Disciplinary hearings

178(1) A respondent may apply to the discipline committee to raise pre-hearing and procedural matters that the committee may address by way of a hearing if it so requires.

(2) The registrar or the discipline committee must provide information about the date, time and subject matter of the hearing to any person on request.

(3) The discipline committee must provide notice by registered mail or by personal service to a person who is required to attend a hearing under section 38(6) of the Act.

(4) The discipline committee must ensure that a discipline hearing is recorded.

(5) Any person may obtain, at his or her expense, a transcript of any part of the hearing that he or she was entitled to attend, by submitting a request in writing to the registrar.

(6) In determining the penalty to be imposed on a registrant under section 39(2) of the Act, the discipline committee must, after making a determination on the facts, consider a previous relevant disciplinary decision regarding the registrant, including

- (a) an order under section 35 of the Act,
- (b) an undertaking or consent to a reprimand given by the registrant under section 36(1) of the Act,
- (c) a deemed order under section 37.1 of the Act,
- (d) a decision under section 39 of the Act,
- (e) an undertaking by the registrant or a decision of the discipline committee under the *Hearing Aid Act*, R.S.B.C. 1996, c.186.

(7) If the discipline committee or panel determines that one or more of the allegations against a respondent in a citation have been proven, the committee must hold a separate hearing as to the appropriate order, unless the respondent agrees otherwise.

Notice of disciplinary decision

179(1) In addition to the public notification required under section 39.3 of the Act with respect to any of the actions referred to in section 39.3(1)(a) to (e) of the Act, the registrar must notify

- (a) all registrants and certified support personnel,
- (b) the regulatory bodies governing the practice of the registrant in every other Canadian jurisdiction,

- (c) any other governing body of a health profession inside or outside of Canada, and
- (d) the employer of the registrant, if known and applicable.

(2) Notification required under subsection (1)(a)

- (a) must include all information included in the public notification under section 39.3 of the Act, and
- (b) unless otherwise directed by the inquiry committee or the discipline committee, as the case may be, must exclude any information withheld from the public notification under section 39.3(3) or (4) of the Act.

(3) Unless otherwise directed by the inquiry committee or the discipline committee, as the case may be, notification provided to other regulatory or governing bodies under subsections (1)(b) or (c) may include information that has been withheld from the public notification under section 39.3(3) or (4) of the Act.

(4) In addition to any notification required under section 39.3(3) of the Act, the board must within a reasonable time after the discipline committee acts under section 39 of the Act, advise every registrant of

- (a) the name of the respondent,
- (b) the facts of the case,
- (c) the reasons for the decision, and
- (d) the disposition of the case, including the nature of any limitation or suspension, and the date it is in effect.

Retention of disciplinary committee and inquiry committee records

180(1) Records of the inquiry committee must be retained for not less than 10 years following the conclusion of an investigation and records of the discipline committee must be retained for not less than 10 years following the date a decision is rendered.

(2) Despite subsection (1), documents setting out decisions and reasons of the inquiry or discipline committee relating to actions taken under sections 32, 32.2, 32.3, 33(6)(c) or (d), 35, 36, 37.1, 38, 39 or 39.1 of the Act must be kept on permanent record at the office of the college.

Effect of suspension

181(1) During any period of suspension of a license, a registrant must:

- (a) not engage in the practice of the profession ;
- (b) not hold himself or herself out as being a registrant;
- (c) not hold office in the college;
- (d) not make appointments for clients or prospective clients;
- (e) not contact or communicate with clients or prospective clients, except for the purposes of
 - (i) advising clients or prospective clients of the fact and duration of the suspension, or
 - (ii) advising a client or prospective client that another registrant will continue to operate in the suspended registrant's place, or
 - (iii) referring the client or prospective client to another registrant in good standing;
- (f) remove from their premises and the building in which the premises are located, their name and any sign relating to their practice;
- (g) prominently display, a notice of suspension in a form and in a location approved by the registrar, which states the duration and reasons for the suspension;
- (h) immediately surrender to the registrar their license;
- (i) pay any fee or special assessment required by the college when due in order to remain a registrant.

(2) A registrant who has been suspended is not entitled to a refund of the annual fee for the portion of the suspension or of any special assessment that the registrant has paid.

(3) No current or former registrant is entitled to any refund of any fine, fee, debt or levy paid to the college solely on the basis that it was paid during or in relation to a period of suspension

(4) During the period of suspension, a suspended registrant may permit another registrant in good standing to practice within the suspended registrant's office, provided that the suspended registrant

- (a) complies with the provisions of subsection (1), and
- (b) must not, directly or indirectly, receive any payment in respect of services provided by the other registrant under this subsection.

(5) Any communication under subsection (1)(d) may be made in writing in a form approved in advance by the registrar, or by employing office staff, an answering service or other telephonic device specifically for this purpose.

Fines

182. The maximum amount of a fine that may be ordered by the discipline committee under section 39(2)(f) of the Act is \$50,000.

Costs

183. The tariffs of costs applicable to sections 33(7), 37.1(1) & (5), and 39(4) & (5) of the Act are set out in Schedule B of these bylaws.

Notice of disciplinary action under section 39.1 of Act

184. The discipline committee must notify a registrant not fewer than 14 days before making an order under section 39.1 of the Act.

Schedule “A” – Schedule of Fees

1. For the purposes of this Schedule:

- (a) “advanced competency certification fee (initial)” is the fee that applies to all active registrants who apply for an advanced competency certificate under Part 10;
- (b) “advanced competency recertification fee” is the fee that applies to all active registrants who wish to renew and maintain an advanced competency certificate granted under Part 10;
- (c) “application fee” is a one-time fee that applies to all persons applying to become registrants of the college in any class, including applicants applying under sections 82, 85, and 87.9;
- (d) “examination fee” is a fee that applies to applicants who take a practical examination and applies every time an examination is attempted;
- (e) “criminal records check fee” is the fee that applies to a criminal records check as required by the *Criminal Records Review Act*;
- (f) “registration fee (active or conditional active)” is the fee that applies to all active or conditional active registrants when they are first registered with the college;
- (g) “reinstatement fee” is the fee that applies to all classification of registrants following a lapse of their registration renewal prior to June 30 and the applicable renewal fee must be paid in addition to the reinstatement fee;
- (h) “renewal fee (active or conditional active registrant)” is the annual fee that applies to active and conditional active registrants after their initial or first year of registration with the college;
- (i) “renewal fee (inactive registrant)” is the annual fee that applies to the inactive classification which can be renewed for no more than 3 consecutive years;
- (j) “renewal fee (retired registrant)” is the annual fee that applies to the retired classification which prohibits a registrant from practice but entitles the registrant to be nominated for a position on the College board;

(k) “renewal late fee” is the annual fee applied to the renewal fee of registrants who renew after the deadline of March 31 but prior to May 1 of the same year.

<i>Type of fee</i>	<i>Amount</i>
Application fee (active, conditional active registrants, or Student Hearing Instrument applicants)	\$225
Criminal records check fee (active, conditional active, or temporary registrant)	\$28
Registration fee (active or conditional active registrant)	\$600
Registration fee (temporary registrant, and one-time renewal)	\$100
Renewal fee (active or conditional active registrant)	\$500
Renewal fee (inactive registrant)	\$225
Renewal fee (retired registrant)	\$200
Renewal late fee (all classifications)	\$200
Examination fee (dispensing, practical)	\$350
Reinstatement fee (lapse of membership)	\$500
Advanced competency certification fee (initial), for each of the first two certificates, with no additional fee for additional certificates	\$45
Advanced competency recertification fee, for each of the first two certificates, with no additional recertification fee for additional certificates	\$25

Schedule “B” – Tariff of Costs

INVESTIGATION TARIFF

1. For the purposes of assessing costs under this tariff, qualifying expenses incurred by the college from the time

- (a) the registrar receives a complaint in writing under section 32(1) of the Act, or
- (b) the inquiry committee initiates an investigation of a matter on its own motion under section 33(4) of the Act,

until the time the inquiry committee directs the registrar to issue a citation or otherwise disposes of the complaint under section 33(6) of the Act are deemed to be expenses incurred for the investigation of the complaint or matter.

<i>Expense</i>	<i>Rate of indemnity</i>
Legal representation for the purposes of the investigation	Up to 50% of actual legal fees
Other reasonable and necessary professional services contracted for the purposes of the investigation, including per diems paid to the members of the inquiry committee	100% of actual fees
Other reasonable and necessary disbursement incurred for the purposes of the investigation, including disbursements incurred by legal counsel	100% of actual disbursements

DISCIPLINARY HEARING TARIFF

2. For the purposes of calculating costs under this tariff, qualifying expenses incurred from the time that the inquiry committee directs the registrar to issue a citation under section 36(6)(d) of the Act until

(a) the inquiry committee accepts a written proposal for consent under sections 37.1(2) or (5) of the Act,

(b) the discipline committee dismisses the matter under section 39(1) of the Act, or

(c) the discipline committee issues an order under section 39(2) of the Act,

are deemed to be expenses for the purposes of preparing for and conducting the hearing.

<i>Expense</i>	<i>Rate of indemnity</i>
Legal representation for the purposes preparing for and conducting the hearing	Up to 50% of actual legal fees
Reasonable and necessary expert witness fees for the purposes of preparing for and conducting the hearing	100% of actual fees
Other reasonable and necessary professional services contracted for the purposes of preparing for and conducting the hearing, including per diems paid to the members of the inquiry committee or discipline committee	100% of actual fees
Other reasonable and necessary disbursement incurred for the purposes of preparing for and conducting the hearing, including disbursements incurred by legal counsel	100% of actual disbursements

Schedule "C" - Fees for Information Requests

1. For an applicant other than a commercial applicant:

(a) for locating and retrieving a record	\$7.50 per 1/4 hour,
(b) for producing or reproducing a document (such as, but not limited to, a certificate, wallet ID card. Does not apply for a name change due to marital status.)	\$25 per document,
(c) for producing a record from a machine readable record	\$16.50 per minute for cost of use of central mainframe processor and all locally attached devices plus \$7.50 per 1/4 hour for developing a computer program to produce the record,
(d) for preparing a record for disclosure and handling a record	\$15 per 1/4 hour,
(e) for shipping copies	actual costs of shipping by method chosen by applicant,
(f) for making photocopies and computer printouts	\$1.00 per page,
(g) for making or copying compact disks	\$10.00 per disk
(h) for making or copying photographs (colour or black and white)	\$5.00 to produce a negative \$12.00 each for 16" x 20" \$9.00 each for 11" x 14" \$4.00 each for 8" x 10" \$3.00 each for 5" x 7",
(i) for making photographic print of textual, graphic or cartographic records	\$12.50 each, 8" x 10" black and white)
(j) for making hard copy laser or dot matrix print, black and white	\$1.00 per page
(k) for making hard copy laser or dot matrix print, colour	\$2.00 per page

(l) for duplicating an audio cassette	\$10.00 plus \$7.00 per 1/4 hour
(m)for duplicating a video cassette (1/4" or 8 mm) or a DVD	\$11.00 per 60-minute cassette plus \$7.00 per 1/4 hour of recording \$20.00 per 120-minute cassette or DVD plus \$7.00 per 1/4 hour of recording

2. For a commercial applicant:

(a) for each service listed in item 1	the actual cost of providing that service
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3. Where a service is not listed in item 1, the registrar may set the fee for providing that service, but that fee may not exceed the actual cost of providing that service.

Schedules D.1 to D.3 - Support Personnel

DRAFTING NOTE: The College's work on these schedules (and Part 12) continues. Once the revised versions have been approved by the Board, they will be added to the bylaws.

Schedule “E” – Registrant Code of Ethics

INTRODUCTION

The ethical conduct of Audiologists, Hearing Instrument Practitioners, and Speech-Language Pathologists is one of the most important factors in the delivery of quality care and is one of the public’s primary expectations of health care professionals. Continued public trust in the self-regulated, speech and hearing health professions, is dependent on individual registrants adhering to the CSHHPBC values and ethical principles. The CSHHPBC core documents, standards of practice, and related clinical tools (e.g. clinical policies) are integrally linked to the registrant Code of Ethic principles. Registrants must adhere to and not circumvent the Registrant Code of Ethics.

REGISTRANT VALUES

Beneficence: Maximize benefits and minimize harm for the welfare of the client

Client Autonomy: Understand and respect clients’ rights to make informed decisions based on their personal values and beliefs

Fairness: Treat all individuals, clients, colleagues and third parties without prejudice or discrimination, in a just and equitable manner

Integrity: Be truthful; behave with honour and decency while upholding the CSHHPBC professional and practice standards

PRINCIPLES

Registrants must:

- A. Provide appropriate, safe and timely care that is provided with respect and without discrimination.
- B. Ensure that the health and well being of the client is their primary concern.
- C. Maintain the confidentiality and privacy of client information and records as required by applicable legislation and the CSHHPBC standards of practice for all services provided.
- D. Provide clients with accurate information about the nature and management of their communication and related disorders.

- E. Recognize and accept their accountabilities and responsibilities to the public.
- F. Avoid activities that constitute a conflict of interest and seek to resolve any conflict(s) promptly and permanently.
- G. Adhere to the CSHHPBC quality assurance programs, standards of practice and related clinical decision support tools (e.g. Clinical policies, guidelines, protocols).
- H. Maintain current knowledge and demonstrate ongoing competency throughout their career.
- I. Maintain a safe and healthy practice environment for the provision of client care and services.
- J. Maintain appropriate and respectful boundaries in relationships with clients.
- K. Respect the client's right to be cared for by their choice of care provider, where possible, including care provided by communication health assistants and students.
- L. Respect previous and concurrent services provided by other registrants or other health care providers.
- M. Recognize professional and clinical limitations and refer clients to other registrants and health care providers as appropriate.
- N. Conduct any teaching or research activities in keeping with the CSHHPBC standards of practice and fully inform the client about the nature and possible effects of all activities.
- O. Never overstate or embellish their abilities or qualifications nor engage in any activity, including marketing, that could mislead a reasonable person.
- P. Not exploit any clinical relationship with a client or others to further their own physical, emotional, financial, political or business interests at the expense of the best interest of the client.
- Q. Not secure or accept referrals, by providing (directly or indirectly) any incentives (financial or otherwise) to colleagues or other professionals.