

Standard Category:	Standard Title:	Standard #:
Standard of Practice	Attaining & Maintaining Practice Competence	SOP-PROF-02
Regulation   Bylaw Reference:		HPA Reference:
Bylaws: section 78, 96, 159, 161		Section 16(2)(d)
Authorization:	Date Approved:	Date Revised:
CSHBC Board	February 24, 2017	September 23, 2020

## DEFINITIONS

In this standard:

**“Practice Competence”** means a combination of knowledge, skills, abilities, and judgments that are necessary to practice a profession, within a defined scope of practice. Practice competence is based on the core competencies of the profession and the application of the competencies is transferable across diverse practice settings and for various clinical populations (adapted from BCCNP).

Competence varies with a registrant’s level of experience as well as the complexity of the clinical work (e.g. entry level practice, and advanced practice). A registrant’s competence may be at risk in certain situations (e.g. practice transition to a new area of practice, long absences from practice). It is recognized that safe, competent, compassionate and ethical practice requires the integration and performance of many competencies at the same time.

**“Practice”** means any professional role, whether remunerated or not, in which the registrant uses their knowledge, skills and abilities as an audiologist, hearing instrument practitioner and/or speech-language pathologist. Practice includes the provision of clinical care as well as working in management, administration, education, research, advisory, regulatory and policy development roles and any other roles that impact on safe, effective delivery of services in the profession and/or use of professional skills<sup>1</sup>.

**“Practice Hours”** means the number of eligible practice hours accumulated by a registrant within the specified, most recent 3-year cycle.

## SCOPE

All Full registrants of the College of Speech and Hearing Health Professionals of British Columbia (CSHBC), including those with Certified Practice (CP) certificates.

All Non-practicing registrants of CSHBC, including those returning to Full registration status.

<sup>1</sup> Adapted from: Medical Board of Australia, Registration standard, October 2016

All applicants to CSHBC who have been practicing in another jurisdiction.

New applicants who graduated more than 3 years before their application to CSHBC.

## STANDARD

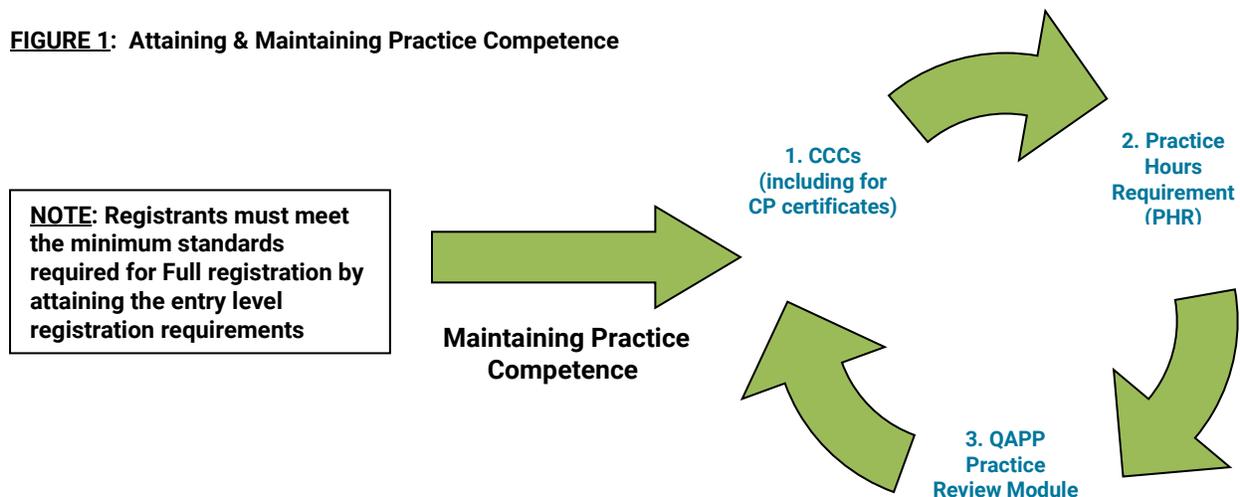
Full registrants are responsible for attaining the entry level registration requirements to be granted Full registration status in the CSHBC according to registration-related bylaws (Division B, Parts 7 ~ 9) and the registration and Quality Assurance & Professional Practice (QAPP) standards of practice and policies.

It is incumbent on Full registrants to ensure that they continue to be competent in their practice over time and during times of risk such as during practice transition (e.g. changing from one practice environment to another).

There are several requirements which pertain to maintaining practice competence over time. These include:

- Completion and submission of acceptable Continuing Competency Credits (CCCs) for a 3-year cycle and participation in the random CCC audit as required in Appendix A and *Failure to Maintain Practice Competency Requirements* (POL-R-07);
- Completion and submission of CCCs, for a 3-year cycle, pertaining to any CP certificate a registrant may hold and signing declarations related to competence at the time of certificate renewal (*Certified Practice & Above Entry Level Practice* (SOP-PROF-06): Appendix A);
- Completion of the Practice Hours Requirement (PHR) required in a 3-year cycle (Appendix B);
- Participation in the QAPP Practice Review module.

**FIGURE 1: Attaining & Maintaining Practice Competence**



## 1. Continuing Competency Credit (CCC) Requirement

### Base Level Requirement for CCCs

Demonstration of continued competency is mandatory for registrants of CSHBC. Registrants are required to collect and report CCCs for each registration that they hold. A minimum of 45 hours of continuing competency credits within a 3-year cycle is required for the first registration held. Forty-five CCCs are required for both full and part-time professionals, as registrants cannot be registered in a part-time capacity. For additional registrations refer to part B below.

Of the total CCCs that are collected over a 3-year period, a maximum of 15 may be in related topics related to audiology, hearing instrument dispensing, or speech-language pathology. Registrants may collect all 45 CCCs in their profession, (i.e. all credits may be in topics specific to audiology, hearing instrument dispensing, or speech-language pathology).

The 3-year cycle begins on January 1<sup>st</sup> and ends on December 31<sup>st</sup>, 3 years later. All CCCs must be reported through the registrant portal on or before December 31<sup>st</sup> of the third year. Credits cannot be carried over to another reporting cycle.

Eligible credit categories can be found through the Registrant Portal or in Appendix A.

### CCCs for Registrants who are Registered in 2 or 3 Professions

There are 45 credits required for the first professional registration. For each subsequent registration, there must be an additional 15 credits reported that are directly related to the second registration for a total of 60 credits. In an instance where a registrant holds 3 registrations and has 3 reserved titles, then the total credits required is 75 over 3 years. The credits which are directly related to a profession are those that can be collected in categories A-J in Appendix A. For example, supervising of an audiology graduate student practicum would count for audiology credits, where supervision of a hearing instrument dispensing practicum would count for hearing instrument dispensing.

### CCCs for Certified Practice Certificate Holders

Registrants holding Certified Practice certificates are required to obtain 4 CCCs for each certificate that they hold. The 4 credits for each certificate may be part of the total credits required. Registrants must enter these credits as applying to the applicable certificate in the registrant portal.

### Audits

Audits may be conducted, without notice to a registrant, to ensure the accuracy and truthfulness of the reported CCCs. If during an audit, the Quality Assurance & Professional Practice (QAPP) Committee finds an inaccuracy or false reporting 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 the Bylaws.

### ***Proof of CCCs***

Registrants are required to keep proof of activities one-year post completion of the 3-year cycle. All credits can be entered online through the Registrant Portal of the CSHBC website.

### ***Failure to Meet the CCC Requirement***

Registrants who are unable to meet the CCC requirement within the 3-year cycle should consult *Failure to Maintain Practice Competency Requirements* (POL-R-07).

## **2. Practice Hours Requirement (PHR)**

### ***Base level requirement for PHRs***

The standard for practice hours is 750 hours over a prescribed 3-year cycle for Full registration. Registrants with 2 registrations must complete an additional 250 hours in 3 years for their second registration for a total of 1,000 hours. Registrants with 3 registrations must complete an additional 250 hours in 3 years for their second and third registrations for a total of 1,250 hours.

Registrants are ethically responsible to ensure that they attain the minimum number of practice hours required in a defined 3-year cycle. The cycle for practice hours is aligned with the continuing competence credit three-year reporting cycle and the registration renewal timelines. All Full registrants must keep documentation of their eligible, paid and unpaid practice hours.

Registrants who transferred to BC are responsible for providing documentation of their practice hours which were accumulated in another jurisdiction for any portion of the 3-year cycle when they practiced elsewhere.

Non-practicing registrants who have been non-practicing for part of the 3-year cycle must meet the practice hours requirement prior to the end of the cycle. If they have been Non-practising for all 3 years in the cycle, they must complete a QAPP Practice Review before resuming to practice.

Applicants who graduated more than 3 years before the start of the current 3-year cycle must provide documentation of practice hours or complete the section in this policy on failure to meet the practice hours requirement.

At the end of the prescribed 3-year cycle, registrants are responsible for having a record of their practice hours. Registrants with more than one Full registration (RAUD, RHIP, RSLP) must document the required number of hours for each of their registrations. There may be practice hours which qualify in more than one profession. If a registrant is uncertain as to how they should record their hours they should contact CSHBC.

Seven hundred and fifty hours over 3 years equates to 250 hours/year. Any combination of hours across the 3 years is acceptable.

For illustrative purposes, the following chart shows a distribution of practice hours. The totals exceed the minimum hours requirement for a registrant with one Full registration:

8-hour days worked per week (48-week year)	Total hours (1 year)	Total hours (3 years)
1 day/week =	384	1,152
2 days/week =	768	2,304
3 days/week =	1,152	3,456
4 days/week =	1,536	4,608
5 days/week =	1,920	5,760

#### **Registrant with More than One Full Registration**

Registrants with more than 1 Full registration (RAUD, RHIP, RSLP) must document the required number of hours for each of their registrations. Registrants may choose which profession they are collecting the 750 hours for. For each subsequent registration, 250 practice hours are required which must be unique and specific to that professional registration.

First Registration	Second Registration	Third Registration
750 practice hours in 3 years	An additional 250 hours in 3 years	An additional 250 hours in 3 years
Of these, a minimum of 250 hours must be uniquely applied to this professional registration	These 250 hours must be unique to this second registration	These 250 hours must be unique to this third registration

In the example below, the registrant has chosen to show hearing instrument dispensing as the primary hours (first registration) as that is where they spend most of their time.

***First registration: Hearing Instrument Dispensing:***

- 750 hours in prescribing, fitting and verifying hearing instruments.

***Second registration: Audiology:***

- An additional 250 hours in clinical audiology such as assessments that result in an audiology diagnosis.

***Third Registration: Speech-Language Pathology:***

- An additional 250 hours in speech-language pathology such as assessing communication skills other than hearing.

Eligible categories for practice hours are shown in Appendix B. If a registrant is uncertain as to how they should record their hours they should contact CSHBC.

***Audits***

Audits may be conducted, without notice to a registrant, to ensure the accuracy and truthfulness of the reported PHR. Proof of practice hours can be recorded on Form A-30 *Confirmation of Practice Hours* or a Record of Employment. If during an audit, the QAPP Committee finds an inaccuracy or false reporting 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 the Bylaws.

***Proof of Practice Hours***

Registrants are required to keep proof of activities one-year post completion of the 3-year cycle. All hours can be entered online through the Registrant Portal of the CSHBC website.

The practice hours requirement is on a 3-year cycle beginning January 1<sup>st</sup> and ending December 31<sup>st</sup> 3 years later. All practice hours must be reported by registrants in the registrant portal of the CSHBC website before the December 31<sup>st</sup> deadline of the 3<sup>rd</sup> year in a cycle. Hours cannot be carried over from one reporting cycle to the next.

***Failure to Meet the Practice Hours Requirement***

At the end of the 3-year cycle, CSHBC will contact any registrants whose practice hours are deficient. Registrants that do not meet the practice hour requirement have 2 options:

- **OPTION 1:** Submit a plan to correct the deficiency in hours within 3 months; or
- **OPTION 2:** Practice under the general supervision of another Full registrant for a period set by the QAPP Committee.

Registrants unable to meet the practice hours requirement by completing either Option 1 or Option 2 must undergo a QAPP practice review, including remediating any resulting recommendations and, if necessary, fulfilling the terms of a remedial plan – all remedial actions must be completed within the timelines specified in the plan. Failure to meet any of the acceptable remedial actions will result in a

referral to the Inquiry Committee. A random audit of registrants will be conducted at the conclusion of each 3-year cycle.

### **QAPP Practice Review Requirement**

The QAPP Practice Review module is a requirement of CSHBC to ensure ongoing practice competence, adherence to CSHBC standards, and to demonstrate performance as required. Screening tools and onsite assessor reviews are based on the 'must do' elements of the CSHBC standards. Remediation plans for any deficiencies are set by the assessor and registrant or in the case of extensive remediations, by the profession-specific practice review panel appointed by the QAPP Committee.

QAPP practice reviews will be conducted for each registration class. This process will include all Full registrants and will involve a screening and review process initially. Onsite practice reviews will also be conducted with all new registrants within their first two years of practice in BC. Practice reviews may also be conducted by:

- random audit;
- after a long absence from practice;
- registrant self-request;
- referrals due to incomplete practice hours.

Registrant are required to participate in the Practice Review and to remediate any recommendations and/or major concerns identified during the process.

## **CSHBC RELATED DOCUMENTS**

*Certified Practice & Above Entry Level Practice (SOP-PROF-06)*

*Confirmation of Practice Hours (Form AF-30)*

*Failure to Maintain Practice Competency Requirements (POL-R-07)*

## **REFERENCES**

Professional Standards: BC College of Nursing Professionals: [BCCNP Professional Standards](#).  
Recency of Practice, October 2016: [Medical Board of Australia](#)

## APPENDIX A: CONTINUING COMPETENCY CREDIT (CCC) CATEGORIES

Continuing Competency Credit (CCC) Category Description	Allowable Credits per Year
<b>ACTIVITIES <u>DIRECTLY RELATED TO: ALL PROFESSIONS</u></b>	
<p><b>A1. Conferences, conventions, presentations, workshops, lectures, rounds, seminars, online courses, teleconferences/tele-rounds (all professions)</b></p> <p>Each hour of attendance for education content (e.g. not a business meeting) will equal 1 CCC. Teleconferences, tele-rounds and on-line courses, must be arranged by a professional association, health or education agency, society, college or university. Also applies to general manufacturer sponsored seminars/workshops on general topics.</p>	No maximum
<p><b>A2. Manufacturers' product training workshops (all professions)</b></p> <p>Each hours of attendance for product or equipment training will be counted as 1 CCC.</p>	Maximum 5
<p><b>A3. CSHBC developed online learning modules: each CSHBC course will count for 3 CCCs.</b></p>	No maximum
<p><b>A4. Conferences, conventions, presentations, workshops, lectures, rounds, seminars, online courses, teleconferences/tele-rounds that pertain to one or more of CSHBC standards of practice Each hour of participation will count as 1 CCC.</b></p> <p>For example, on topics such as records management, supervisory skills, and inter-professional practice.</p> <p><b><u>NOTE:</u> Virtual learning modules which pertain to a CSHBC standard count in A4 not A3.</b></p>	No maximum
<p><b>B. University/college course (all professions)</b></p> <p>Each course given or taken for audit or credit, will count for 15 CCCs.</p>	No maximum
<p><b>C. Study/interest group (all professions)</b></p> <p>A study/interest group has an educational component, meets regularly, and its goal is better service for the client. Meeting dates must be maintained as part of the record. One meeting of a study/interest group or one hour electronic-interest group equals 1 CCC.</p>	Maximum 5

Continuing Competency Credit (CCC) Category Description	Allowable Credits/Year
<b>ACTIVITIES DIRECTLY RELATED TO: ALL PROFESSIONS</b>	
<p><b>D. Self-study: all professions</b></p> <p>Self-study is a self-initiated program of education that may be multi-media and is not designated for course work. The list of articles or books studied, tapes viewed/audited, or site/peer/manufacturers' visits should be maintained. One hour of study equals 1 CCC.</p>	<b>Maximum 5</b>
<p><b>E1. Supervision of practicum students and Communication Health Assistants (CHAs)</b></p> <p>University, college or practicum student supervision in AUD, HID, SLP including professional and CHA student practicum placements. One hour of supervision equals 1 CCC to a maximum of 8 per year for one student and an additional 4 CCCs per year for a second or more students in the same year.</p>	<b>Maximum 12</b>
<p><b>E2. Supervision of Communication Health Assistant(s)</b></p> <p>Supervision of employed CHAs accountable to the registrant claiming the credits. Supervision for 1 year equals 6 CCCs and pro-rated for ½ year. The number of CHAs does not increase the credit limit.</p>	<b>Maximum 6</b>
<p><b>E3. Supervision of Conditional registrant(s)</b></p> <p>Supervision/mentoring of Conditional registrant(s) with a formal learning plan or registration conditions for a period of not less than 3 months. Supervision of 3 -month period is equal to two CCCs for a total of no more than 8 credits in one year.</p>	<b>Maximum 8</b>
<p><b>E4. Supervision of a registrant's Certified Practice (CP) certification program &amp; application</b></p> <p>Supervision of 1 month equals one CCC to a total of no more than 6 credits in one year. This may be for one or more CP areas and may apply to the supervision of more than one CP applicant.</p>	<b>Maximum 6</b>
<p><b>E5. Formal mentorship or practice supervisor arrangement to support a new or returning registrant, or a registrant in need of remedial support</b></p> <p>Mentorship for a 3-month period is equal to 2 CCCs.</p>	<b>Maximum 6</b>



Continuing Competency Credit (CCC) Category Description	Allowable Credits per Year
<b>ACTIVITIES DIRECTLY RELATED TO: <u>ALL PROFESSIONS</u></b>	
<b>F1. Professional publications (peer reviewed)</b>  CCCs are available for all authors in the initial publication of an AUD, HID, SLP article in a professional, peer reviewed publication. This does not include newsletters. Registrants who are peer editing and/or reviewing professional publications may also claim credits. One published article or one review equals 8 CCCs.	<b>Maximum 16</b>
<b>F2. Publications (non-peer reviewed)</b>  CCCs are available for all authors in the initial, non-peer reviewed publications. This does not include newsletters or comment/editorial letters. One published article equals 5 CCCs.	<b>Maximum 10</b>
<b>G. Presentations</b>  Presentation related to AUD, HID, SLP given at a conference, convention, workshop, seminar, or lecture, for the first time only; up to ½ day presentation equals 4 CCCs and full day presentation equals 8 CCCs. Presentation of the same or similar material for a second time equals 2 CCCs for ½ day and 4 CCCs for full day.	<b>Maximum 12</b>
<b>H. Special projects</b>  Special projects (e.g., research, writing a book, program/course) related to AUD, HID, SLP must have proof of completion and expand knowledge relevant to clinical practice. Each project will receive 10 CCCs in the year in which it was completed.	<b>Maximum 10 (in year completed)</b>
<b>I. Committee work</b>  Participation on College, provincial, or national boards, committees, or projects related to AUD, HID, SLP. These must be non-social in nature, require active participation, and have a direct, major impact on one or more of the professions (i.e., the purpose of improving the quality of audiology, hearing instrument dispensing, or speech-language pathology. 10 hours equals one CCC.	<b>Maximum 10</b>

**J. Peer review/Study of Patient/Client cases:**

Two or more professionals may review and study specific cases for the purposes of ensuring consistent outcomes and to assist all participants in their provision of clinical care. This review may be in person or by electronic means (e.g., video conferencing or review of digital images) and must be agreed to by all parties, stating the proposed objectives and outcomes of the reviews. One hour equals one CCC to a maximum of 5 CCCs/year.

**Maximum 5**

**Continuing Competency Credit (CCC) Category Description**

**Allowable Credits  
per Year**

**ACTIVITIES INDIRECTLY RELATED TO: ALL PROFESSIONS**

**K. Conferences, conventions, seminars, lectures, rounds, workshops, teleconferences or online courses on a topic with an indirect relationship to AUD, HID, SLP**

Each hour of attendance for education content (e.g., not a business meeting) will equal 1 CCC. Teleconferences must be arranged by a professional association, agency or university. Examples of related topics include but are not limited to: Psychology, Education, Neurology, Stress management, Counselling, Linguistics, Computers, Child Development

**Maximum 15  
(for a 3-year cycle  
- all in one year or  
across the 3 years)**

**L. University/College courses given or taken on a topic with an indirect relationship to AUD, HID, SLP**

A single course, taken for audit or credit, will count for 15 CCCs in the year in which it is completed. This would fulfil the maximum number of CCCs in a related area for the 3-year period. (for example: Psychology, Geriatrics, Neurology, Oncology etc.)

**Maximum 15  
(in year  
completed)**

**M. Presentations given in topics with an indirect relationship to AUD, HID, SLP**

A presentation given on an indirect topic at a conference, convention, workshop, seminar or lecture, for the first time, equals 4 CCCs.

**Maximum 8  
(in 3-year cycle)**

**N. Special projects in an area with an indirect relationship to AUD, HID, SLP**

Special projects (e.g., research, writing a book, program/course) must have proof of completion and demonstrate relevance to clinical practice. Each project will receive 10 CCCs in the year in which it was completed.

**Maximum 10  
(in year  
completed)**

**O. Professional publications in topics indirectly related to AUD, HID, SLP**

**Maximum 8  
(per year, per 3-  
year cycle)**



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CCCs for authors in the initial, peer reviewed publication of an article, on a topic indirectly related to SLP, AUD and/or HID. This does not include newsletters or comment/editorial letters. One published article equals 4 CCCs.

## APPENDIX B: ELIGIBLE PRACTICE HOURS (EXAMPLES)

“Practice hours”, as defined on page 1, are not limited to client contact hours. The following categories may be used for the purpose of practice hours reporting. There are no maximum or minimum hours allowed except for the assignment of hours required for each registration held.

### Practice Hours Descriptions

**Practice hours must be reported for each registration that a registrant holds. It is advisable to record practice hours information for each registration separately. There are no maximum allowable hours however there are requirements about the number of hours that must be directly related to the registration class.**

#### A. Client services provided in person or virtually

Each hour of service may be counted including time spent with clients as well as hours in related services such as documentation, report writing, or making referrals.

**B.** Providing in person or virtual education and training to other registrants, communication health assistants (CHAs), students, and other health professionals.

**C.** Supervising or managing registrants, CHAs, or students in the applicable profession(s). This may include hours as a QAPP Practice Review Assessor or Supervisor.

**D.** Providing profession-specific consulting, advisory, educational, or profession-specific counseling services to clients, families, caregivers.

**E.** Managing or administering profession-specific programs or services.

**F.** Leading or participating in profession-specific research or academic writing.

**G.** Leading or participating in professional activities that impact the practice of the profession (e.g. committee work).

**H.** Performing regulatory, professional association, or policy development work (this is intended for practice or clinically related work – not clerical or administrative work).

**I.** Teaching profession-specific courses.

**J.** Other professional activities that impact the practice of the profession.