



College of
Speech and Hearing
Health Professionals of BC

Regulator of Audiologists, Hearing Instrument
Practitioners and Speech-Language Pathologists

Report from the Board Chair



On behalf of the Board of the College of Speech and Hearing Health Professionals I am pleased to report on our progress. This year was marked by a new strategic planning process including a re-working of our Mission, Vision, and Values statements.

The Board Members identified three main goals to focus on for the next three years:

- To raise awareness of the College
- To collaborate with other colleges and stakeholders who share our interests
- To increase our focus of national and international professional matters

With regard to the first goal, the College staff have already developed and implemented a mandatory jurisprudence course, which must be completed by the end of December 2016 for all current registrants and within six months of initial registration for new registrants. Jurisprudence is the study of the science of law that examines the creation, application, and enforcement of laws. According to Wikipedia, the word “jurisprudence” is derived from the Latin word *juri*, which is the genitive form of *jus* meaning “law”, and *prudentia* which means “prudence” (also: discretion, foresight, forethought, circumspection; refers to the exercise of good judgment, common sense, and even caution, especially in the conduct of practical matters). I was struck by the meaning of *prudentia*, as I believe that it describes the basic tenant of the College; that

Mission Statement

Our mission is to serve the public by ensuring competent and ethical practice by our registrants. Our College is governed by the *Health Professions Act of BC*.

Vision Statement

All British Columbians receive the highest level of professional and ethical care from registered speech and hearing health professionals.

Values Statement

The College holds these three values to be fundamental:

TRANSPARENCY

We promote open communication and provide timely, clear and appropriate responses in order to encourage public understanding of our policies, procedures and decisions.

INTEGRITY

We operate at all times in a manner that engenders honesty, trust, reliability and ethical practices in order to contribute to the common good.

PROFESSIONALISM

We advocate for high standards of professional competency and strive to ensure that best practices are employed by our registrants in their delivery of care to the people of British Columbia.

is, to protect the public by ensuring that registrants always have the knowledge and competence to use good and appropriate judgment based on established standards of practice and care. Through completion of the course, our registrants will have a better understanding of how the *Health Professions Act*, the College by-laws and standards of practice affect their practice.

As an example of work on the second goal, the College continues to collaborate with other B.C. health regulators in order to educate the public about access to services and recourse available when there are concerns regarding possible unethical or incompetent practice. There are over 20 regulatory colleges governed by the *Health Professions Act* (including the College of Social Workers under the *Social Workers Act*).

Another example of our collaboration with stakeholder groups has been consultation with the School of Audiology and Speech Sciences program at UBC that has led to important revisions to course work dealing with the assessment and management of vestibular disorders. This will allow for more graduates the ability to achieve an Advanced Competency Certificate (Assessment and Management of Vestibular Disorders), thus helping to reduce the long waiting lists for services in this area.

During the year our Registrar presented a review of the College's mandate and outline ongoing initiatives to the Western Conference Symposium for Hearing Instrument Practitioners, and to the Canadian Hard of Hearing Association which again helps to achieve information sharing and collaboration with key stakeholder groups. In addition, the College has been asked to be regular contributors to two professional associations' newsletters: BC Association for Speech-Language Pathologists and Audiologists (BCASLPA) and Hearing Instrument Practitioners Society of BC (HIPSBC).

The focus for the third strategic goal area is our active involvement with the Canadian Alliance of Audiology and Speech Pathology Regulators (CAASPR). This work has included developing and harmonizing national standards, such as qualifications for internationally trained Audiology and Speech-Language Pathology applicants and a competency based entry-to-practice examination.

Our founding Registrar/CEO, Diane O'Connor has worked very competently and diligently achieving outstanding accomplishments with a small staff. At this point in our young evolution, Diane recommended to the board the recruitment of a Deputy Registrar which commenced in January of this year.

In December 2014, we said good-bye to Bill Winnett, one of the founding Public Representatives who was instrumental in securing seed funding for the College. As a former CFO for BC Hydro, Bill provided solid advice around financial matters. We are fortunate that he has offered to continue serving on two College committees.

We are also pleased to announce the appointment of Mr. Patrick Wong as a public representative on the board vacated by Bill. Patrick is a Chartered Accountant and former MLA, and so he brings a great deal of experience around finance and legislation.

I would like to thank Elizabeth Poon for so ably stepping in to replace Christina Chen, who left earlier than expected for her maternity leave. We are pleased to report that Christina had a healthy baby girl.

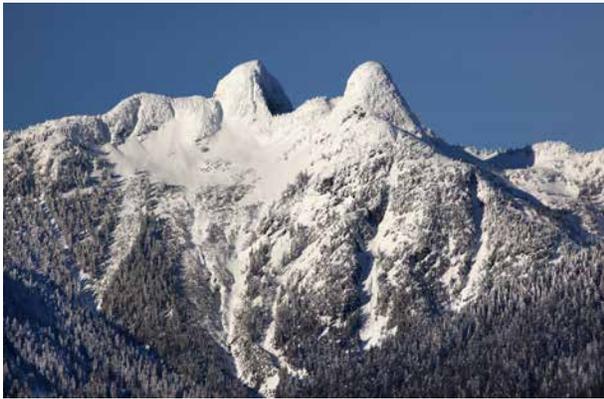
I would also like to thank Mardi Lowe-Heisted, who has taken on many initiatives this year, as is evident in the Quality Assurance Committee report.

Finally, many thanks to Diane O'Connor, who works tirelessly for the College. This past year was an extremely busy one for her, but she managed to accomplish many initiatives with acumen and aplomb. The Board looks forward to this year and accomplishing many of our new objectives.

Respectfully submitted,

Susan Batstone, Chair

Report from the Registrar



The jurisprudence course launched in January 2015 was designed by College staff to assist registrants with an understanding of their legal obligations as a regulated health professional under the *Health Professions Act of BC*. Of our 1550 registrants, approximately 200 completed the course by the end of March 31, 2015 and I am happy to report 92% of these registrants considered the course worthwhile and helpful. We are aiming at 100% satisfaction with plans for course improvements during the next year.

The remainder of my report speaks to self-regulation and its importance in our daily lives.

Why regulation is necessary

Occupational and professional regulation by government is a consequence of the dramatic growth in knowledge that followed the scientific and industrial revolutions. Those revolutions produced increasingly complex knowledge in many fields and an imbalance between what practitioners and clients knew. Knowledge complexity and imbalance increased the potential for harm. Occupational and professional regulation arises from the authority of the state to enact laws that are necessary to protect citizens from persons who are unqualified, incompetent or unfit to practice. In Canada, the provinces and territories are the bodies that enact legislation governing the regulation of an occupation or profession.

Regulatory authorities

Governments sometimes delegate their regulatory authority to the members of the occupation. This is referred to as self-regulation. The ability of an occupation to regulate itself is a distinguishing characteristic of professions as distinct from occupations that remain subject to direct government regulation.

The delegation of regulatory authority is granted conditionally. There are typically three common elements among all regulatory authorities: the obligation to issue certificates of registration to all applicants who fulfil the criteria established in that jurisdiction; the responsibility to accept and act upon complaints from the public about the conduct or competence of a registrant; and the right to prescribe a code of ethical conduct and standards of practice for all registrants. In exchange for receiving such authority, the profession agrees to regulate *in the public interest* rather than in the interests of the members of the profession by providing assurance that all members holding certificates of registration will be competent, current and ethical.

Benefits of regulation

Professional regulation establishes standards of conduct and competence to which practitioners, educational institutions, and employers may refer. The standards guide practitioners in understanding what they must know, be able to do, and what they must not do, providing a framework for self-evaluation and further professional development. The standards also provide guidance to those responsible for the preparation of professionals, such as educational facilities, enabling them to fashion their programs to ensure that standards are met. Standards also provide employers with the assurance that those whom they wish to employ possess the ethical understanding required to perform professionally. With knowledge of the standards, employers can plan the work place education that will be required to enable employees to work effectively in that particular context.

The role of standards

The articulation and enforcement of standards are the central features through which the public interest is protected. Standards addressing both competence and conduct are reference points for such matters as the accreditation of educational programs, admission to the ranks of practitioners, or demonstration of competence by means of examinations, and/or periods during which the practice of trainees is closely supervised. Standards sometimes require practitioners to maintain the currency of their specialized knowledge to assure the public that regulated professionals can employ current, best practices. Standards also affect adjudicative processes that determine whether a practitioner merits remediation, admonishment or loss of the right to practice.

Competency Profiles

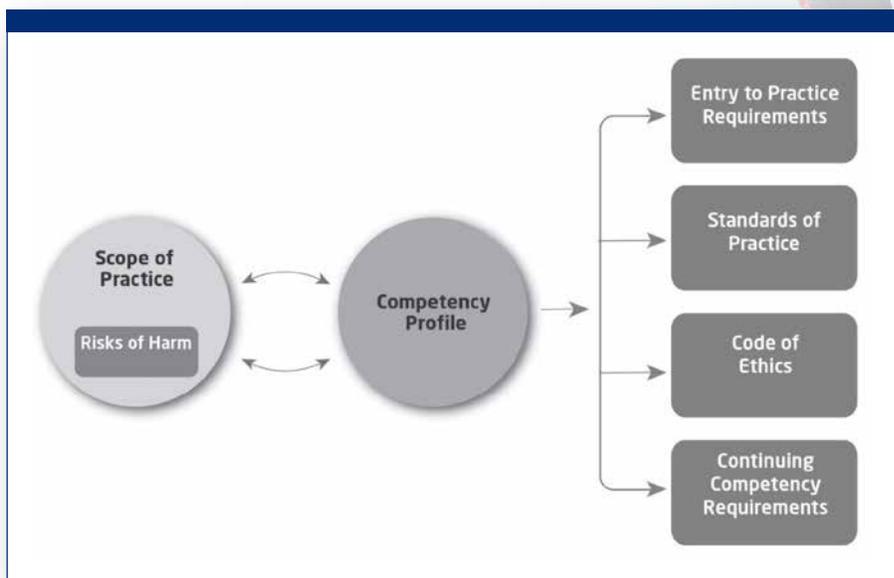
CAASPR, the national alliance of regulators for Speech-Language Pathology and Audiology developed competency profiles for these professions in 2011. In the latter part of this fiscal year CSHHPBC established a working group to develop a profile for the Hearing Instrument Dispensing profession which will be completed by the fall of 2015. The chart below depicts the importance and purpose of a competency profile which may also be used by educators in developing course curriculum.

This sixth year of operation has been another busy year and the start of a transition from a very young organization to one with articulated standards to assist registrants in delivering competent, safe and ethical care to the public we serve.

Respectfully submitted,

Diane O'Connor

Registrar and Chief Executive Officer



Report from the Circle of Chairs



The Circle of Chairs is an unofficial committee established by the Board of the College, and does not possess any independent decision-making authority. Its role is to:

- Facilitate communication between core committee members
- Provide mutual mentoring on College matters
- Develop and review draft governance documents for Board consideration
- Advise the Board on the appropriateness, fairness, and effectiveness of evaluation processes for the annual Board and Registrar-CEO evaluations
- Take a leadership role in New Board Member Orientation Programs

Committee Recognition

Susan Batstone, RSLP, Chair of the Board

Jane Baynham, Public Representative, Chair of Finance and Administration Committee

Marian Gunn, RHIP, Chair of Registration Committee

Christine Harrison, RAUD, Chair of Client Relations Committee

Joe McLaughlin, Public Representative, Chair of Inquiry Committee

Louise Parton, RHIP, Chair of Quality Assurance Committee

Diane O'Connor, Registrar/CEO, ex-officio

The Circle of Chairs met twice between 1 April, 2014 and 31 March, 2015, with focus on the following:

1. Review of the Performance Evaluation process for the CEO/Registrar
2. Establishment of guidelines for the leadership qualification and skills required for board members
3. Review of a Grievance Procedure between board members, committee members and/or staff members
4. Review of the Operational Plan that ensued from the new Strategic Plan developed in September, 2014
5. Identification of the Leadership skills important in the new Deputy Registrar position
6. Recommendations for future staff and board development initiatives.

Respectfully submitted,

Susan Batstone, Chair



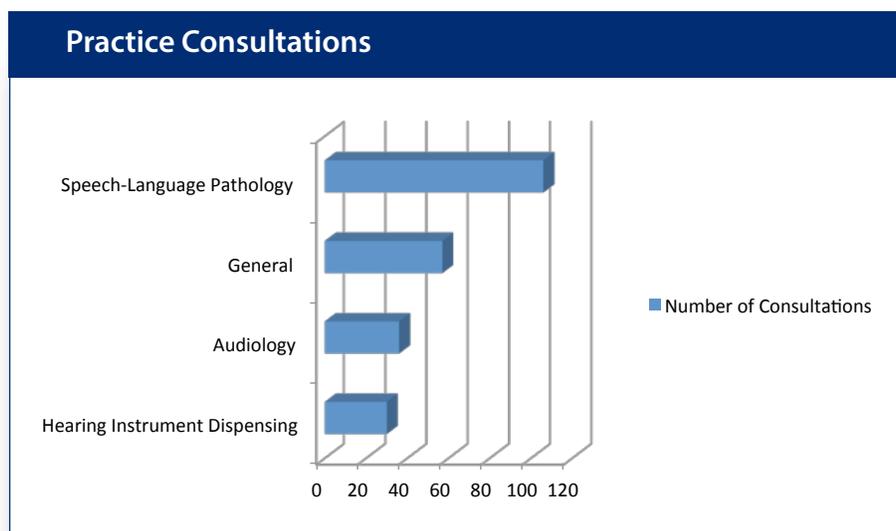
Report from the Quality Assurance Committee



Quality assurance includes a number of programs and services for registrants and the public including: continuing competency credential program, advanced practice programs (e.g. advanced certifications), practice support, and the development and review of the College's standards of practice and clinical decision support tools (e.g. clinical practice guidelines). The Quality Assurance Committee is supported by two advisory committees: the Support Personnel Liaison

Committee (SPLC) and the Advanced Competency Advisory Committee (ACAC). Their committee work is vital to the success of College work related to these areas of practice. For many Quality Assurance projects, there are working groups struck which are often composed of registrants who are clinical experts in the topic area.

Practice support is a key quality assurance focus and for 2013-14 there were 229 consultations provided to registrants that ranged from general inquiries and assistance (e.g. how to utilize documentation standards) to specific clinical issues where expert input and support were required. The chart below shows the distribution of consultations by profession as well as general ones that could apply to all professions. The benefits to registrants include: avoiding preventable errors, reducing patient/client risk, gaining clarity on clinical practice standards, improving overall skills and competence and receiving guidance on difficult clinical issues. The College gains insight into areas that require standard development and/or revision to better guide registrants in the future as well as gaining an understanding of high risk situations in clinical practice.



Advanced Practice: Advanced Competency Certifications

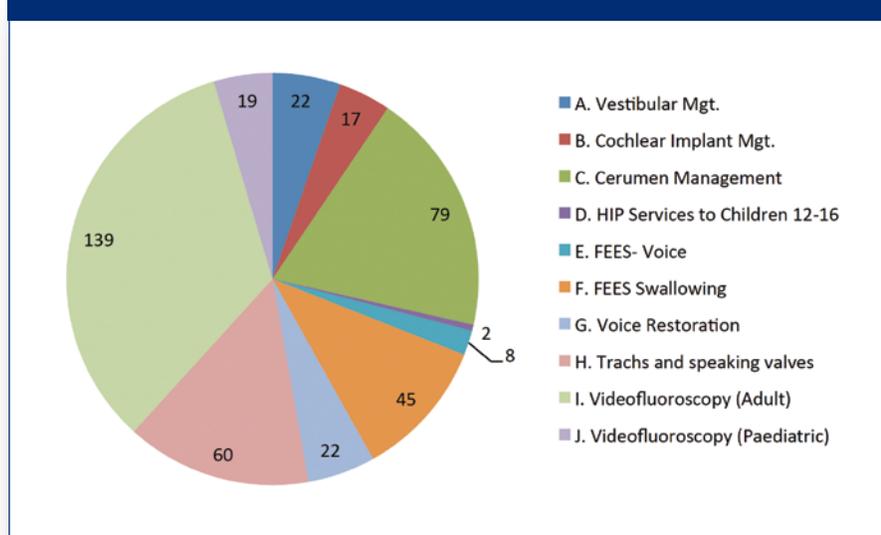
In order to be in compliance with the Ministry of Health requirements, registrants are required to hold advanced competency certifications in specific areas of practice. The following chart shows the current distribution of certificate holders for each available certificate.

Accomplishments

In addition to practice support the QA committee in collaboration with the SPLC and the ACAC, managed a variety of activities including:

- Development of a standard and clinical practice guideline for Inter-professional Collaborative Practice (ICP)
- Presentations across the province and at BCASLPA on ICP and adoption of the UBC "On the Run" series as a continuing education activity for credit
- Development of frequently asked question documents on registrant topics such as supervision and advanced practice
- Development of a new policy and an adopted guideline pertaining to hearing assessment and hearing instrument fitting and dispensing
- Development of three hearing related protocols on real ear measurement, masking and medical referral criteria (red flags)
- Finalization of a documentation and record management clinical practice guideline
- Standard of practice and clinical practice guideline for the use of support personnel

Number of Advanced Certificates



- Establish a process for reviewing all advanced competency certification applications to ensure consistency and fairness of application reviews
- Review and updating of several programs of study for advanced certification including Certificate A: Vestibular Management and Certificate H: Tracheostomy tubes/speaking valves

Committee Recognition:

Quality Assurance Committee

Louise Parton, RHIP, Chair
 Amanda Lenk, RSLP, Vice-chair
 Jane Baynham, Public Representative
 Karen Bernauer, Public Representative
 Marian Gunn, RHIP
 Suzanne Kornhass, RAUD, RHIP
 Lesley Lee, RAUD, RHIP
 Dinusha Peiris, RSLP
 Bill Winnett, Public Representative
 Susan Batstone, RSLP, ex-officio
 Diane O'Connor, Registrar/CEO, ex-officio
 Mardi Lowe-Heistad, Director of Quality Assurance Committee, ex-officio

Support Personnel Liaison Committee

Louise Parton, RHIP, Chair
Lynda McLean, Hearing Assistant
Bonny Wood, RAUD, RHIP
Dreena Davies, RAUD
Sandy Collins, RSLP
Maryam Merali, RHIP
Martin Sattler, RHIP
Karin Spirig, Speech Assistant
Alyse McNair, Speech Assistant
Amanda Lenk, RSLP
Ashley McNolty, Hearing Assistant

Advanced Competency Advisory Committee

Louise Parton, RHIP, Chair
Pat Buen, RSLP
Caroline Chow, RSLP
Martin Sattler, RHIP
Dr. Eytan David, RMD, RCPSC
Maryam Merali, RHIP
Kathy Pereira, RAUD, RHIP
Barbara Williams, RAUD, RHIP

Respectfully submitted,

Louise Parton, RHIP, Chair



Report from the Registration Committee



The Registration Committee is responsible for accepting applications for the three professions governed by this College: Speech-Language Pathology, Audiology and Hearing Instrument Dispensing. The committee reviews applications based on substantial equivalency to the requirements set out in the College bylaws and policies. Applications that meet all requirements set out in the bylaws are approved by the Registrar.

We support the Registrar in all matters related to registration and recognize the staff in the office for all their hard work in the renewal of registrations this year.

We continue to participate in discussions and decision making with CAASPR (Canadian Alliance of Audiology and Speech- Language Pathology Regulators) for a new competency framework for internationally trained applicants. We are working with CAASPR on establishing an entry to practice examination for all applicants, exploring the development of a supervised practice period, working toward a national centralization review and assessment process for international applicants and endorsing various project activities.

Accomplishments and On-Going Duties

We have been very busy this year reviewing and amending existing registration policies; such as: Policy R-08 Language Proficiency and Policy R-03 Student Application: Coursework for Hearing Instrument Practitioners.

The Registration Committee granted, including those applications approved by the Registrar, over 100 Certificates of Registration from the period April 1, 2014 to the end of March 2015.

Committee Recognition

Marian Gunn, RHIP, Chair
Kathy Pereira, RAUD, RHIP, Vice Chair
Amanda Lenk, RSLP
Linda Rammage, RSLP
Joe McLaughlin, Public Representative
Susan Batstone, RSLP, ex-officio
Diane O'Connor, Registrar/CEO, ex-officio

Recognition of HIP Examination/Education Committee

Suzanne Kornhass, RAUD, RHIP, Chair
Joan Richardson, RAUD, RHIP
Rahim Ghanbari, RAUD, RHIP
Maryam Merali, RHIP
Martin Sattler, RHIP
Mark Hansen, RAUD, RHIP
Georgia Pinkett, RAUD, RHIP

Over the last year the HIP Examination/Education Committee has reviewed and updated the Guidelines and Policies for Hearing Instrument Practitioners and is in the process of updating the Practical Exam to keep it current and relevant.

Interesting Statistics as at March 31, 2015

Number of Registrants:	1600
Number of Active Registrants:	1553
Number of Conditional Active:	14
Number of Inactive Registrants:	31
Number of Retired Registrants:	2
Number of Student HIPs:	23

Respectfully submitted,

Marian Gunn, RHIP, Chair

Report from the Inquiry Committee



The Inquiry Committee (“the IC”) investigates written complaints concerning the competency or unethical practice of a registrant. The IC may also investigate on its own motion when it becomes aware of a matter that is in the interests of protecting the public. The IC is comprised of representatives from all three professions and one third of the committee are public representatives.

Accomplishments during the period of April 1, 2014 through March 31, 2015

In order to expedite matters in a timely and efficient manner, the IC established three profession specific panels representing each of the professions. Each panel must have at least two health professionals of the same profession as the registrant in question and one public representative appointed by the IC. The panels may exercise the same power, duty and function of the Inquiry Committee.

Each year the IC attends an education day. This fiscal in June 2014 the College’s legal counsel presented an overview of: Extraordinary action, discipline process, 33(6)(b) and 33(6)(e), and the formation of citations as per the *Health Professions Act*.

The Inquiry Committee met 3 times in-person and 3 teleconference meetings during the fiscal year and the panels met a total of 11 times. Here is the breakdown of the panel meetings:

Panels	Number of meetings
AUDs	4
HIPs	6
SLPs	1

The Inquiry committee reviewed 9 new cases and here is the breakdown:

Year: 2014	
# Complaints	9
From Registrants	4
From Public	3
Own Motion	2
#AUDs	1
#HIPs	7
#SLPs	1

Complaints concerned matters dealing with advertising, unethical practice, competency, professional conduct, and unauthorized practice.

The Inquiry committee reviewed and closed 9 files and here is the breakdown:

Year: 2014/2015	
From Registrants	5
From Public	2
Own Motion	2
#AUDs	1
#HIPs	8
#SLPs	0

There was one decision of the IC that was appealed by the complainant to the Health Professions Review Board (HPRB), however, the complainant withdrew their appeal following the adjudication process. This was the first appeal to the HPRB since the inception of the Inquiry Committee.

I would like to acknowledge the contribution of departing IC members: Louise Parton, RHIP, who joined the IC from our inception to December 2014, and to Brent McNeill, RAUD, RHIP and Bill Winnett, Public Representative who also contributed years to the work of the Inquiry Committee.

I would like to take this opportunity to thank all the members of this committee for their dedication and time commitment. Numerous hours were spent researching background information and preparing responses to ensure best practices are adopted and embraced when investigating a complaint.

Committee Recognition

Joe McLaughlin, Ed.D., Public Representative, Chair

Christine Harrison, RAUD, Vice-Chair

J. Alexander Dutton, Public Representative

Susan Edwards, RSLP

Charles Fontaine, RAUD, RHIP

Lesley Lee, RAUD, RHIP

Richard Walker, Public Representative

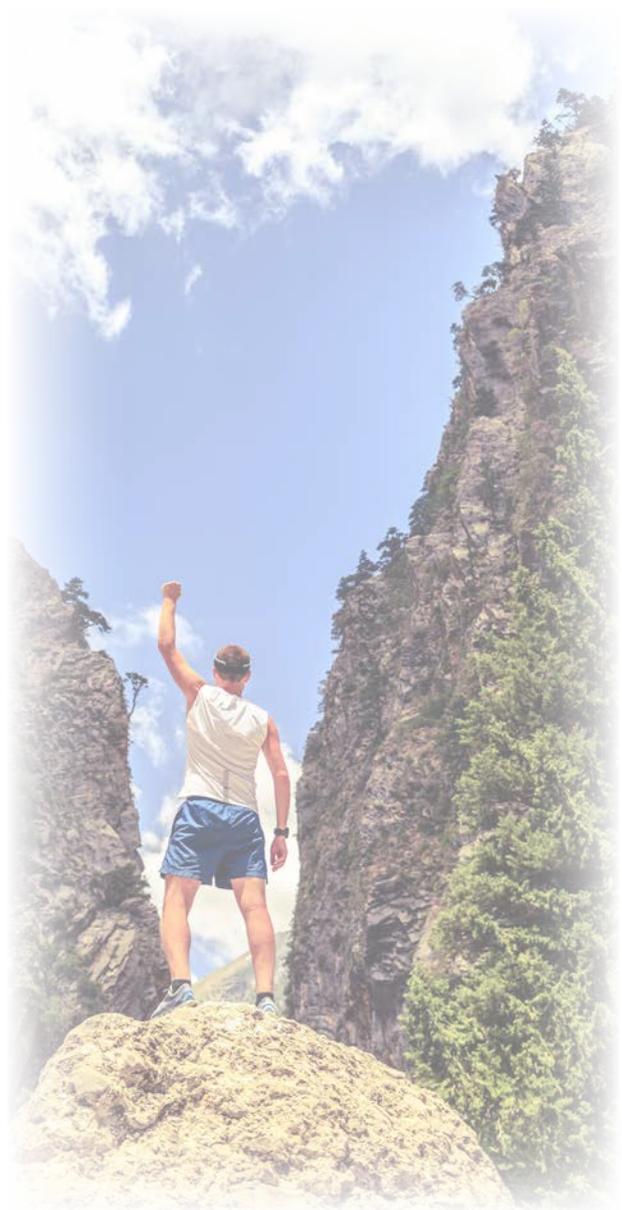
Erin Wright, RAUD, RHIP

Sherri Zelazny, RSLP

Diane O'Connor, Registrar/CEO, ex-officio

Respectfully submitted,

Joe McLaughlin, Ed.D., Chair



Report from the Client Relations Committee



The Client Relations Committee (CRC) develops, oversees, and directs a client relations program to prevent professional misconduct of a sexual nature. Changes to the *Criminal Records Review Act* expanded the scope to include specific offenses and add a definition for vulnerable adults. Relevant offences are listed in Schedule 1 of the Act, most of which pertain to offenses of a sexual nature. Schedule 3 of the Act, pertains to a variety of specified offenses such as theft, forgery and fraud.

The CRC is waiting for the outcome of the development of a framework from the Health Professions Regulators of BC (HPRBC). The CRC then will apply the framework to a comprehensive client relations program.

The CRC is comprised of representatives from all three professions and one third of the committee are public representatives.

Committee Recognition

Christine Harrison, RAUD, Chair

Joe McLaughlin, Ed.D., Public Representative, Vice-Chair

Dinusha Peiris, RSLP

Lesley Lee, RAUD, RHIP

Louise Parton, RHIP

Diane O'Connor, Registrar/CEO, ex-officio

Respectfully submitted,

Christine Harrison, RAUD, Chair



Report from the Finance and Administration Committee



Purpose

The primary objective of the Finance and Administration Committee is to develop and oversee systems for the management of the financial administration of the College in keeping with the *Health Professions Act*.

Accomplishments

The committee met 5 times during the fiscal year. It reviewed compensation for Board members and recommended amending the budget to include the hiring of a Deputy Registrar. It also recommended that a sufficient contingency fund be set up (approximately three times the annual budget) to cover unexpected obligations such as legal fees, building acquisition or strata property ownership, technological imperatives, public liability and property damage claims incurred that are not covered by insurance. At each meeting, the committee reviewed the year-to-date financial statements, comparing actual to budget for the fiscal year ending Mar. 31, 2015. We also reviewed our 3 year fiscal plan. The College is pleased to report that we exceeded revenue projections and met expense projections.

The committee approved the annual financial statements as at Mar. 31, 2015, reviewed and prepared by KPMG. An overview of these statements form part of my report. For a complete set of the statements, please use the following link:

http://www.cshhpb.org/docs/2014_cshhpb_financial_statements.pdf?LanguageID=EN-US

Committee Recognition

Jane Baynham, Public Representative, Chair
Bill Winnett, Public Representative, Vice Chair
(retired Dec 2014)
Mark Hansen, RAUD, RHIP
Suzanne Kornhass, RAUD, RHIP
Louise Parton, RHIP
Sherri Zelazny, RSLP
Susan Batstone, RSLP, ex-officio
Diane O'Connor, Registrar/CEO, ex-officio

Respectfully submitted,

Jane Baynham, Chair

Statement of Financial Position

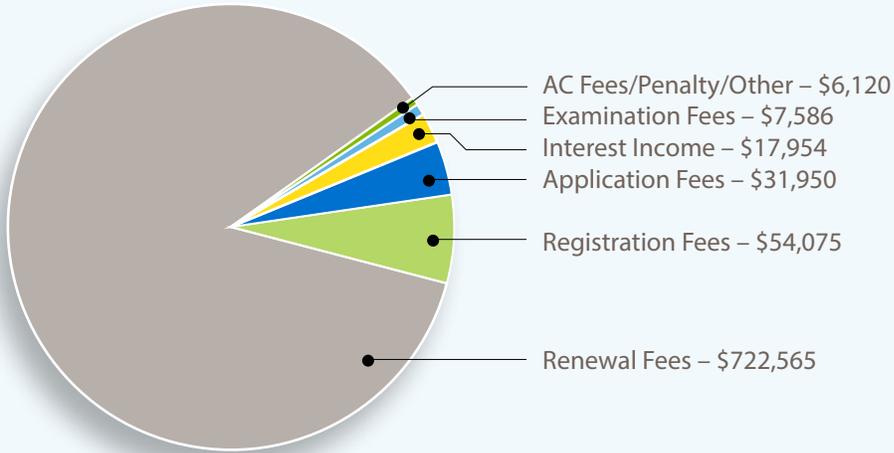
March 31, 2015, with comparative information for 2014 (Unaudited)

	2015	2014
Assets		
Current assets:		
Cash	\$ 636,069	\$ 626,273
Interest receivable	15,668	14,280
Short-term investment (note 2)	440,000	290,000
Prepaid expenses	8,844	4,124
	1,100,581	934,677
Long-term Investments (note 2)	695,000	695,000
Equipment (note 3)	19,490	29,148
	\$ 1,815,071	\$ 1,658,825
Liabilities and Net Assets		
Current liabilities:		
Accounts payable and accrued liabilities	\$ 19,253	\$ 55,437
Deferred revenue	743,650	697,570
	762,903	753,007
Net assets	1,052,168	905,818
Commitments (note 5)	\$ 1,815,071	\$ 1,658,825

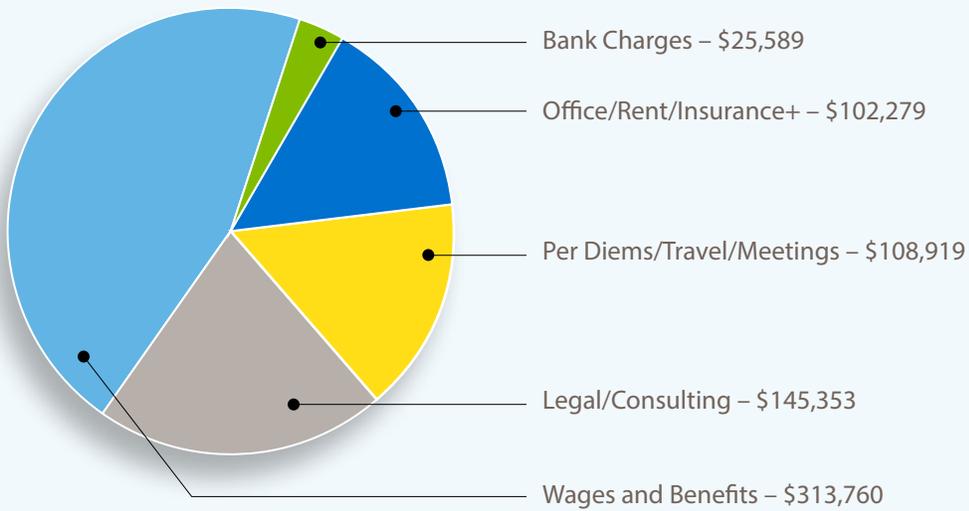
See full set of financial statements

http://www.cshhpbcc.org/docs/2014_cshhpbcc_financial_statements.pdf?LanguageID=EN-US

Total Revenue \$840,250



Total Expenses \$693,900



Board of Directors and Staff



Front Row l-r: Dinusha Peiris, Amanda Lenk, Susan Batstone, Jane Baynham, Christine Harrison

Back Row l-r: Diane O'Connor (Registrar/CEO), Marian Gunn, Joe McLaughlin, Louise Parton, Suzanne Kornhass, Alex Dutton, Sherri Zelazny, Bill Winnett, Mardi Lowe-Heistad (Director QA), Christina Chen (Office Administrator)

Contact Information

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Elizabeth Poon, Interim Office Administrator

info@cshhpbcc.org

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