

The CAP Monitor

To serve the interests of the public and guide the profession of psychology.

Issue 31

Fall 2008

Help Wanted: Profession Supervisors

By Walter Goos, R. Psych, Supervision Consultant

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The culture of an organization or group is shaped by the behaviours, actions and shared beliefs of its members. As a professional group, the College of Alberta Psychologists promotes this culture in a variety of ways. Specific credentials are required before one can qualify for entrance into the profession. A Code of Ethics sets parameters with respect to beliefs, values and actions, and is accepted by fellow professionals. Standards of Practice are defined in legislation, and govern activities within the profession. We, the members, consult with one another and attend workshops and conferences to keep current, renewed and encouraged by our peers. We establish our organizational identity in myriad ways, and as practicing professionals we accept and live within this professional culture.

This acculturation is fundamental to the continuation and enhancement of practice in a complex society. As practitioners we attempt to model best practices and ethical behaviours. By speaking with each other, and by sharing experiences, successes and problems, we further develop a sense of fraternity. Collegial support is foundational in the development of our individual professional practice.

Collegial support is also necessary for those desiring to enter the profession. Have you thought about involving yourself in the professional development of someone who wishes to enter the practice of psychology? Have you given thought to how your knowledge and experience can be shared with someone who is learning about the profession? Have you considered how important you are in representing psychology in Alberta, and how

your representation may influence others considering the profession?

The College of Alberta Psychologists demands from its members the strong academic credentials, ethical character and personal values that are conducive to the development of empathetic and respectful behaviours from those wanting to practice psychology. Universities and colleges can impart much of the knowledge necessary for those wishing to enter the field. But a period of supervision is also required to complement the academic training of candidates, and to assess their practice and ethical behaviours. This is where you can help.

Currently, provisional candidates have a difficult time finding professional psychologists who will provide this supervision. Would you consider being that resource for someone? Certainly it takes time and energy from your practice and your life, but the rewards are evident and the experience is meaningful. Practitioners willing to supervise and to invest in the growth and development of others are in short supply. The College of Alberta Psychologists cannot maintain or ensure the culture of the profession in the absence of practicing professionals who model, mentor and encourage those wishing to enter the profession. Many of you have incredible skills, practices and experiences that could be shared with those who want to get into the daily life of a practitioner. If you offer your expertise to one fledgling psychologist you will be doing a great service to the profession in Alberta.

Consider the benefits of becoming a supervisor. You come into contact with the energy, enthusiasm and vibrancy of someone keenly motivated to be in the profession. You observe an intern or a registered provisional psychologist practicing his/her skill in a real life setting, and in so doing have the opportunity to reflect on your own practice. This reflection might bring enhancements to your practice. You rest in the satisfaction that you are giving back to your profession, passing on the experience and the help you received as you developed your practice. Help shape the culture of the profession through involvement with those coming into the profession who will continue the culture you model for them.

Presently there is no mandatory demand for any psychologist in Alberta to provide supervisory service for interns or provisionals. There is a need, though, for each of you to consider whether you could give supervision time to someone for a year or two in order for that person to fulfill the supervision requirements the College requires. Consider the opportunity, and if you can volunteer this service make your name available to the Psychologists' Association of Alberta. The College does not assign interns or provisionals. You decide, however, if the person is the one you wish to supervise. Together you will establish a supervision plan and implement ways of fulfilling the conditions. Support the profession, assess your skills, offer your services. Make a difference to the practice of psychology in Alberta.

Calendar of Meetings

Credentials Evaluation Sub-Committee Meetings

<i>Deadline Date</i>	<i>Meeting Date</i>
October 31, 2008	November 7, 2008
January 16, 2009	January 23, 2009 (Edmonton)
March 20, 2009	April 3, 2009 (Calgary)
May 29, 2009	June 5, 2009 (Edmonton)
September 4, 2009	September 11, 2009 (Edmonton)
October 30, 2009	November 6, 2009 (Calgary)

Registration Approvals Sub-Committee Meetings

<i>Deadline Date</i>	<i>Meeting Date</i>
October 20, 2008	October 27, 2008
December 1, 2008	December 8, 2008
January 12, 2009	January 19, 2009
February 17, 2009	February 23, 2009
April 14, 2009	April 20, 2009
May 19, 2009	May 25, 2009
June 15, 2009	June 22, 2009
August 10, 2009	August 17, 2009
September 21, 2009	September 28, 2009
October 19, 2009	October 26, 2009
November 30, 2009	December 7, 2009

Note: Dates are subject to change if scheduling conflicts occur. The most up-to-date calendar is available on the CAP website under "upcoming events."

Oral Examinations

<i>Deadline Date</i>	<i>Exam Week</i>
December 1, 2008	January 26 – 30, 2009
March 2, 2009	April 27 – May 1, 2009
April 27, 2009	June 22 – 26, 2009
August 10, 2009	October 5 – 9, 2009

Resources CAP Publications

Available on a cost-recovery basis from the College office as well as on our website:

- a) copies of CAP professional guidelines for psychologists (individually or as a package)
 - Addressing Recovered Memories
 - Advertising and Other Public Communication
 - The Use of Aversive Techniques in Behaviour Management
 - Child Custody Assessment
 - The Control and Use of Tests by Psychologists
 - Non-Discriminatory Practice
 - Release of Confidential Information: Special Issues in Client and Third Party Requests
 - Service Fees for the Provision of Copies of Client Files
 - Psychological Evaluations for Child Protection Decisions
 - Limits to Confidentiality and Consent for Services: Special Issues in Working with Minors and Dependent Adults
 - Dual Roles: Guidelines for Conducting Assessments and Providing Therapy with the Same Client
 - Supervisors and Registered Provisional Psychologists
 - Informed Consent: Ethical Guidelines, Principles and Standards **NEW**
- b) "Status of Regulatory Documents in the Regulation of the Psychology Profession in Alberta"
- c) "Receiving Services from a Registered Psychologist..." (brochure)

Review - Barnett, J., Cornish, J., Goodyear, R., Lichtenberg, J. (2007). Commentaries on the ethical and effective practice of clinical supervision.

Professional Psychology: Research and Practice, 18, 268–275. by Jean Pettifor, R. Psych

A great deal of literature exists on what makes for effective supervision even though the definition of required competencies continues to be debated. Current literature, including this article, strongly supports the position that clinical supervisors need to obtain professional training in order to supervise ethically and competently. An informal survey of North American regulatory jurisdictions (ASPPB Listserve, 2006) indicates that these authorities are increasingly interested in developing quality-based educational criteria for supervisors of potential entrants to the profession, but that to date very few have implemented such criteria.

Barnett et al (2007) address the issue of defining supervisory competencies, which include knowledge, skills and attitudes, and especially diversity and self-awareness. They note that while the positive relationship between supervisor and supervisee is necessary, it is not in itself sufficient to provide an effective learning environment. The article focuses on the development and enhancement of the supervisee's knowledge and skills. In their discussion of the supervisor's gatekeeper role (which is most relevant for

the regulation of psychology), Barnett et al. include the profession, the community service agency and academic training programs as also responsible. In the introduction, Barnett raises issues and supports them with ample references to the research literature. Each of the three additional authors provides their own commentary.

Each author supports the need for psychologists to be trained in providing effective supervision. Cornish (2007) suggests there should be a separate ethics code for providing clinical supervision. Goodyear (2007) argues that clinical supervision is psychology's "signature pedagogy," that it consists of profession-specific strategies or strategies of action. Since every psychologist is likely to supervise at some time during a career, all should receive training in supervision. In terms of practical strategies, Goodyear (2007) suggests that all psychologists should be sensitized to the importance of obtaining supervisory competence, and also that all doctoral programs should include training in the provision of clinical supervision. Lichtenberg (2007) maintains that if we want to describe effective supervision, or what makes for an effective supervisor, it is

critical that we consider the client and the treatment outcomes. Research to date on this subject is limited.

I find this article an excellent overview of current thinking on effective supervision and effective supervisors. It is consistent with current emphases on competency and the means of becoming competent. As with most psychology literature on supervision, the article addresses clinical supervision but neglects supervision in teaching, research, administration and other specialty areas of psychological practice. It gives insufficient attention to the well-being of the client, or to the role of the supervisee in enhancing the learning experience. It gives minimal attention to the gatekeeper function. It neglects legal implications, including those related to the regulation of psychology. The authors recommend professional training for clinical psychologists in the provision of supervision, but are short on strategies for achieving this objective. When consensus is reached on what is an effective supervisor, and on how one becomes one, regulatory bodies will be in a better position to draft regulations, standards of practice and professional guidelines.

Council News

The College Council welcomes two new members, by acclamation: Roger Gervais and Lorraine Stewart. They have begun their terms as of September 27, 2008. Also joining the Council is Mr. Desmond Bulger, public member who is beginning a three-year term.

Profile of New Council Members

Roger Gervais is currently in private practice focusing on school psychology, counseling and rehabilitation psychology. Roger also conducts psychological assessments of workplace and personal injury and medical disability. As a long standing member of the College's Hearing Tribunal/Complaint Review Committee, Roger brings a strong background in regulation of the profession. Roger has also worked with several other boards from which he has gathered many other skills to bring to the Council.

Lorraine Stewart is currently working with Alberta Education as a Senior Education Manager with experience in the Special Programs Branch. Lorraine also is a course author and instructor at Athabasca University. Lorraine has been, for many years, a member of the College's Registration Committee which has provided her an opportunity to directly work with the College in the regulation of the profession.

Desmond Bulger has been appointed as the third public member of the Council. Desmond has 23 years experience as a police professional and has solid mediation and negotiation skills as well as experience with the Health Professions Act through his role as professional conduct investigator for another regulated health profession. We are pleased to have Desmond join the Council.

The Council, as laid out in the bylaws and policies, also elected from amongst Council a new President-Elect and Treasurer. Congratulations to Paul Jerry who was elected to the position of President-Elect and to Lorraine Stewart who was elected Treasurer.

Thank you to departing Council members Michael King and Past-President, Bonnie-Rude Weisman. Michael and Bonnie both served for many years, and made significant and valuable contributions to the College and the profession.

Examination Results

Examination for Professional Practice of Psychology

A total of 57 candidates wrote the EPPP examination between May 1, 2008 - September 30, 2008. Results were:

Pass: 74%
Fail: 26%

Oral Examinations

A total of 22 candidates undertook the oral examination between May 1, 2008 - September 30, 2008. Results were:

Pass: 100%
Fail: 0%

FEE INCREASE FOR EPPP

Provisional Psychologists should take note that the examination fee set by the Professional Examination Service for the Examination for Professional Practice of Psychology (EPPP) will be **increasing to \$450 U.S.** as of January 1, 2009

Register Updates

New Members

Congratulations and welcome to the 48 new registered psychologists who have been added to the Register between **May 1, 2008 - September 30, 2008.**

Anastasia Barbopoulos
Kelti Barsan
Shelly Boersma
Nicole Bratton
Lenora Brown
Catherine Burton
Janice Cathcart
Sheila Chauvet-Shumate
Christopher Cicchini
Katharine Collie
Angela Coulombe
Shaylyn Cunningham
Linda Dimond-Cerciello
Corinne Dinnin-Davis
Joshua Dunn
Delia Eaves
Meena Enjati
Rosalyn Fung
Jane Gallacher
Matthew Geddes
Carol Gill
Joanne Gobeil
Crystal Goertzen
Carrie Harbin
Paul Hommersen
Cecily Jennings

Joanna Krawsowska
Andrea Krygier
Peter Laycock
Christine Lee
Naomi Mackin
Jenny McAlister
Kim Miller
Tracy Mitchell
Karen Mizeri
Tatiana Muiznieks
Pamela Olfert
Catherine Paton
Sabrina Ragan
Noella Piquette-Tomei
Jacob Tremblay
Sumerlee Samuels
Julie Scoriah
Margaret Taylor
Hendrika Tennant
Kerry Urquhart
Ariana Walstra
Tricia Williams

Reinstatements

Registered Psychologists

Nina Engelhardt
Peter Kells
Timothy Landry
Claudette Leduc
Marilyn Phelan

Questions?

You may direct your queries to the College through the "Contact Us" page on the CAP website: www.cap.ab.ca

Putting your question in writing reduces the likelihood that your query will be misinterpreted and allows us to provide you with the most clear response.

News & Announcements

Committee News

Credentials Evaluation Sub-Committee

Jessica van Vliet appointed as Chair, Angela Bardick, and Lori Rossi, appointed as Panel Chairs. Walter Goos stepped down as Chair but remains on the committee as a Panel Chair. Janice Swanson reappointed as a member.

Goodbye to Sonya Flessati, Nicole Smith Bringsli, Carole Solberg, Michelle Tsutsumi, Olga Sutherland and Margaret Marean.

Oral Examinations Committee

Nancy Fisher and Erik Wikman appointed as panel chairs. Cheryl Chase, Terence Creighton, Thomas Dalby, Peter Kosof, Gregory Pickering, and Chee-Ping Tsai reappointed as members. Lenora Brown and Ali Al-Asadi as new members.

Goodbye to Robert Frerichs, Curtis Stoelting, and Nina Wyrostok.

Registration Advisory Committee

Jim Bateman, Linda Rose and Liana Jill Turner reappointed as members.

Goodbye to Lorraine Stewart who has been elected to the College Council.

Roster of Members – Hearing Tribunals/Complaint Review Committees

Ali Al-Asadi reappointed.

Goodbye to Roger Gervais, Panel Chair who has been elected to the College Council.

Thanks!

Each of the volunteers named in this section is very much appreciated - in fact, the work of the College could not continue without their active participation.

Opportunities to Get Involved—Volunteers Needed!

The College of Alberta Psychologists relies on member volunteers to effectively fulfill its mandate as a regulatory body.

If you wish to be considered for service on a College committee, please complete and submit the Application for Committee Service, which is available on the CAP website under the “Members Only” tab. Completed applications can be directed to the Registrar at the College office.

All committee appointments will be made by Council. Members who volunteer for committee service are expected to participate in at least 50% of the meetings or panel sittings.

The following committees are looking for new members:

Credentials Evaluation Sub-Committee – Edmonton

The Committee reviews applications for the evaluation of academic credentials of psychologists and other categories of registrants. The Committee determines if the candidate’s qualifications meet the standards established in legislation, regulation and bylaws, and documents its decision.

Oral Examinations Committee

Oral examiners are needed in Calgary and Edmonton. This committee is responsible for conducting oral examinations of candidates for registration as psychologists to determine that the candidate demonstrates a minimum standard of competence for independent practice, and a minimum standard of knowledge and judgment in matters of jurisprudence and ethics. The majority of committee members do not receive an honorarium; however, oral examiners receive \$50 per exam.

Supervision of the Provisionally Registered Psychologist: Three Views of Ethics in Practice

by Robert van Mastrigt, R. Psych, Jon Amundson, R. Psych, and Candace Konnert, R. Psych

The College is responsible for overseeing the supervision of provisionally registered psychologists and relies on the practicing registered psychologists to act in this capacity. Council mandated a review of this responsibility with the view of improving the supply of available supervisors as well as the quality of the supervision experience. Although this could be accomplished by many avenues, one thought to be immediately useful is to routinely provide a series of articles that attend to practice and ethics in the supervisory relationship. The majority of supervisor–supervisee relationships are appropriate, instructive and respectful and have excellent outcomes. In this piece we ask three psychologists to weigh in on two supervision scenarios that have raised some concern in the past.

Scenario #1

A provisional psychologist takes on a child custody assessment case and asks his supervisor to supervise him. The supervisor, who has 10 years of counseling experience, agrees, as he would also like to broaden his level of experience in this kind of work.

Scenario #2

A young woman with a Master's degree in psychology is hired as a mental health therapist in a health centre. After six months on the job, she applies for and becomes a provisionally registered psychologist. She wants to proceed with supervision with the centre's other psychologist. However the centre's director will not support the time for supervision as the young woman was not hired as a psychologist. The provisional psychologist then arranges for after-hours supervision with a registered psychologist from another agency. Although she does not have to pay for the supervision time, she agrees to see clients every other Saturday at the other agency.

Dr. Robert van Mastrigt

Scenario #1: Any psychologist, let alone a supervising psychologist, is obligated under the Standards of Practice (3-1) to "limit practice and supervision to the areas of competence in which proficiency has been gained through education, training and experience." As well, they are accountable

to the Standards for Supervision of Provisional Psychologists (Form A – November 2007) (referred to as SSPP in the rest of this article), which state that supervisors must be competent in the area of practice in which they are supervising (1c). Finally, the Guidelines for Supervisor and Registered Provisional Psychologists (February 2006) (hereinafter, GSRPP) state that supervisors must be aware of their own limitations (1-8), have established their competence in the general and specialty areas of practice of the supervisee (11-2), and must familiarize themselves and supervisees with legislation and civil law as it applies to actions that may be taken against psychologists with specific reference to high-risk areas such as custody access assessment (IV-3). It seems clear that in Scenario #1 the supervisor does not have sufficient training or experience himself to manage a child custody assessment and therefore should not put his supervisee at risk or, more importantly, deprive the client of the most competent and expert service that can be provided. The appropriate action to take is first to question the preparation of the supervisee in terms of his training and, assuming that there is a sufficient skills base to take on a case of this sort, seek an experienced supervisor to oversee the custody access assessment. Supervision of provisional psychologists can be undertaken by more than one supervisor as it is expected that the primary supervisor may not have sufficient skill to supervise in every area of practice the supervisee brings to his practice (Section 3 – SSPP (Form A)).

Scenario #2: Many provisional psychologists may well have to seek supervision outside their workplace, especially if there is no registered psychologist available to supervise them. With the appropriate safeguards in place, this type of bartering arrangement could work and is not specifically prohibited provided it is neither clinically contraindicated nor exploitive in nature (Section 6 (b)). However, this scenario raises many concerns that would have to be dealt with prior to implementation. First and foremost, the administrator of the provisionally registered psychologist's agency would have to agree that the agency's clients could be discussed with an external psychologist at

another agency and that any documentation, reports or otherwise, could be co-signed by the supervising psychologist, a requirement of Section 13 of the SSPP (Form A). Obviously, clients of the agency who receive services from the provisionally registered psychologist would also have to consent to have their contacts discussed with the external psychologist (Standards of Practice, Sections 18(1) and 18(2)), (hereinafter, SP). Since the provisionally registered psychologist has sought supervision after hours, it would likely be difficult to have in situ observation on site, which is both recommended and addressed in Section 7 of the SSPP (Form A), which requires 25 per cent of supervision to take place on site.

Since the provisional psychologist has agreed to barter her psychological services in return for supervision outside of the hours of the first agency by a psychologist from the second agency, it is possible that she could receive the required supervision on only those cases. This would sidestep many of the potential pitfalls of attempting to get the first agency to agree to all the required provisions, but not all. If the client population she sees outside her home agency is substantially similar to the clients she will see after hours, she would have to be careful that she is not in violation of any conflict of interest policies established by her home agency. On the other hand, if the client population is quite different from her home agency's population, there might appropriately be some query from the College as to whether this does in fact further prepare her for the type of clients she sees in her home agency. There are other issues as well. In obtaining supervision in the external agency, she must also meet the requirements of that agency in providing services. In a time when it has been difficult for provisional psychologists to obtain approved supervision under the College rules, unique ways of meeting the requirement such as this are sought. However, it is critical to appreciate the potential difficulties, and discussion with a supervision consultant, practice advisor, the college and the employer is highly recommended.

Dr. Jon Amundson:

Scenario #1: Two domains of competency

Supervision of the Provisionally Registered Psychologist...

define and focus supervision: foundational and functional. By “foundational” we mean generic competencies every psychologist should have. These include self-reflective capacities, scientific knowledge base /method, relationship skills, ethic/legal awareness, diversity consideration and systemic awareness. By “functional” we mean specified areas of practice. These include intervention, assessment, consultation, research, teaching/supervision and administration. Supervision should be exemplary of the first and selective in the second.

In Scenario #1 we see some peril relative to each. A supervisor should only supervise those functional domains within which they possess professional competence. While a good supervisory experience might expose a supervisee to different functional domains, it ought not be a mutual voyage of discovery. The second, less obvious, peril is role modeling associated with too easily taking on new practice areas. Few of us would admire a physician who said, “Well, I’ve never done one of these, but wouldn’t mind learning it on you,” as the blades and needles come out. For this scenario in particular it seems a supervisory contract (explicit or implicit) that says, “Whatever comes along we’ll do,” and which would so easily step into one of the most ethically perilous areas of practice, models less than ethical best practice standards.

Scenario #2: This scenario touches upon one of the least understood or appreciated foundational domains of competence: systemic awareness. Most simply say this competency relates to ecological appreciation or how to connect one thing to another. With this scenario, if you are the supervisee or supervisor you should pose for yourself a series of “ecological” questions. How will or can one agency connect to the other agency in this proposal? What administrative/ managerial issues exist in this situation that need consideration? Can the supervisor accommodate these issues, and what relationship do they need to establish with the employers? What hours of practice/delivery count? What procedural hurdles need to be overcome for these hours to be available to supervision? Who is, in fact,

accountable to whom and in what ways, and what degree of accountability ought to be negotiated?

For example, if I were the supervisor, accountable for all hours of the supervisee’s practice, I would want the blessing of management from the first agency. Then I would want to make sure supervision was acceptable within the administrative framework of my agency. Also I would want to make sure the first agency has no problem with the Saturday arrangement at the second agency, as quid pro quo for supervision, assuming axiomatically it would be also be fine with my agency. Finally I would want some accountability to the first agency relative to my role so that we are modeling to the supervisee accountability and hierarchy. Sadly, because of the role and status and the deference arising in supervision, supervisors often feel they are the most important person in the room, so to speak. Systemic awareness in professional practice and supervision warrants against such hubris.

Dr. Candace Konnert:

Scenario #1: This scenario highlights the issue of competence in the practice of supervision. The Principle of Responsible Caring of the Canadian Code of Ethics for Psychologists (2000) requires that supervisors are competent and that their work meets expected standards of performance. Campbell (2006) suggests that competence in supervision can be acquired through training, credentials and experience. With respect to the latter, supervisors are expected to be experienced in the domain of practice in which they are supervising. The onus is on the supervisor to be clear with the supervisee about the types of cases he/she is or is not competent to supervise. In this scenario, the supervisor has experience in counseling but perhaps not assessment. The supervisory relationship is not an appropriate context for acquiring additional experience.

Scenario #2: This scenario illustrates the growing demand for supervision for provisional psychologists, and the vulnerability of those seeking supervision in a climate where demand far exceeds supply. Receiving supervision from a registered psychologist from another agency could potentially violate The Principle of Integrity

in Relationships of the Canadian Code of Ethics for Psychologists (2000) in three ways. First, the supervisor is engaged in a dual relationship as both supervisor and employer (for service rather than money) that increases the potential for conflicts of interest and exploitation of supervisees. Second, while ethics or law to not prohibit bartering for supervision, it should be avoided if at all possible. As is the case with bartering for psychological services, bartering for supervision is inherently a high-risk activity that can easily violate the integrity of the supervisor/supervisee relationship. If the supervisor and supervisee do engage in bartering, the arrangement should be clearly documented in a written, contractual agreement clearly outlining the expectations of both parties. Third, clients must be informed that a registered psychologist is supervising the supervisee, and clients must have access to the supervisor if they so wish. This becomes complicated when the supervisor works in another agency.

In addition, The Principle of Responsible Caring stipulates that supervision should be conducted on site, as appropriate and possible. Obviously it is important to observe the supervisee’s abilities in the setting where she is employed. Developmental supervision requires ongoing monitoring and evaluation of supervisees, preferably with some direct observation of their clinical work. Feedback should be timely and specific. Off-site supervision poses special challenges to the need for direct, first hand exposure to the supervisee’s clinical work. Administrative supervision involves ensuring that supervisees understand and comply with the policies, procedures and standards in the employment/training setting. A supervisor from an outside agency may not be familiar with the supervisee’s employment setting and, thus, may be less able to provide adequate administrative supervision. Working in one setting while being supervised in another could easily lead to confusion, particularly if practices and policies are different in the two settings. When on-site supervision is not possible, special care needs to be taken to ensure

Professional Conduct Report

A complaint against Dr. Mark Dimirsky was received and referred for a hearing under the Psychology Professions Act. While the Health Professions Act came into effect before this matter was concluded, the case continued under the PPA as outlined in transitional clause 9 (2) contained in Schedule 22 of the HPA.

Discipline Hearing

A panel of the discipline committee of the College of Alberta Psychologists heard evidence in this matter on March 12, 13 and 14, 2007 and subsequently issued a decision. It found Dr. Dimirsky guilty on six of eight charges of conduct constituting unskilled practice of psychology, professional misconduct, or both. The panel found that he:

1. engaged in sexually seductive verbal or physical behaviour toward a client
2. failed to ensure that the client file included a record of the date and substance of each professional service
3. failed to place on file a copy of a letter provided by him to the client
4. failed to document and place on file a summary of the phone calls from the

client following termination of treatment

5. made comments in the letter provided to the client that were inappropriate in the context of the psychologist/client relationship
6. disclosed personal information to the client that was inappropriate in the context of the psychologist/client relationship

Discipline Committee Decision

The sanctions ordered by the Discipline Committee are as follows:

1. that Dr. Dimirsky be assessed by a psychiatrist chosen by the college whose expertise is in exploring boundary violations, that Dr. Dimirsky be responsible for the costs of the assessment and that he follow any and all recommendations arising from that assessment
2. that Dr. Dimirsky's practice be supervised for a period of one year and that Dr. Dimirsky is responsible for the costs associated with supervision
3. that Dr. Dimirsky's registration be suspended for one day
4. that Dr. Dimirsky's practice permit reflect his supervised status until the orders are

discharged

5. that Dr. Dimirsky pay the investigation and hearing costs, to a maximum of \$25,000.00, within one year
6. that the orders be published in the CAP "Monitor"

Appeal Decision

Dr. Dimirsky appealed the decision of the Discipline Committee regarding findings and orders to the Council of the College of Alberta Psychologists. The College cross-appealed the orders of the Discipline Committee to the Council. The Council of the College of Alberta Psychologists heard the appeal on March 15, 2008 and provided their decision, dated May 20, 2008.

The Council upheld the findings and orders of the Discipline Committee, apart from the order related to suspension. Given that Dr. Dimirsky was found guilty on six of eight charges, the College Council decided that the one-day suspension needed to be increased to a six month suspension.

On-Line Resources

The College's website at www.cap.ab.ca serves two purposes: communication with the public and communication with College members. The website is updated regularly and is a good source of information for everyone.

Other useful websites for CAP members:

- *Health Professions Act*, www.gov.ab.ca/qp
- Psychologists' Association of Alberta, www.psychologistsassociation.ab.ca
- Canadian Psychological Association, www.cpa.ca
- Association of State and Provincial Psychology Boards, www.asppb.org
- Office of the Information and Privacy Commissioner. www.oipc.ab.ca

Feedback from Oral Examiners

by Richard Spelliscy, R. Psych

The College of Alberta Psychologists frequently receives inquiries from both supervisors and provisional psychologists about how to best prepare for the oral exam. From time to time, inquiries focus on the chief concerns of examiners. The College recently conducted an informal survey of oral examiners to identify the keys to a successful oral examination experience.

The majority of examiners who responded, identified the role of supervisor as being central to a successful oral examination experience. It was suggested that supervisors should receive increased support and encouragement to emphasize ethical decision making, legislation, practice standards, professional guidelines and relevant jurisprudence.

Transferring and applying what has been learned into everyday practice was viewed as a critical obstacle for unsuccessful examinees. Many unsuccessful candidates, while able to recite ethical codes and practice standards, struggled with their application, particularly when competing ethical principles existed. Resolving complex ethical dilemmas was particularly challenging for these candidates. It was suggested that ethical and professional decision making should receive a higher priority, and should be a major component of the supervision experience.

Several examiners questioned the utility of having the College provide examinees both materials and questions in advance of the exam. The view was that this practice diminished

the importance of the exam in the eyes of the applicant, led to a narrow focus on memorization versus application and did not enhance the applicants' appreciation or understanding of broader ethical issues. It was suggested that applicants should, as an alternative, be provided with a reading list as well as various ethical scenarios.

Specific areas of concern included the awareness of the difference between professional and personal limitations, understanding consent and confidentiality issues and being able to articulate one's theoretical and empirical orientation. Several unsuccessful applicants were perceived to have overestimated the number of areas in which they were competent for independent practice. Some struggled with nervousness and their anxiety made it difficult for them to convey their knowledge. Others were perceived to have been overly confident or too casual, and did not give the questions adequate consideration. Some had difficulty in understanding alternative approaches to the ethical dilemmas and in considering the "Alberta experience."

Overall, the advice from examiners can be summarized as follows:

Perspective: The oral examination is an important component of the registration process and a critical step in the determination of the ability to engage in independent practice. A successful oral examination is a prerequisite to full

registration. It is no less important than the written examination or supervision experience.

Preparation: Candidates should be conversant in the recommended background materials. Adequate preparation is critical to reducing test anxiety and to providing full and complete answers. Candidates may wish to supplement their recommended reading materials.

Practical Application: Candidates must be able to apply the legislation, practice standards, ethical codes and guidelines to everyday scenarios. This requires an understanding of ethical decision-making models and competing principals. It also requires an ability to examine ethical dilemmas from alternative perspectives.

Personal & Professional Limitations: Candidates must be aware of personal or professional limitations that may impact their decision making capabilities. This includes their areas of competence. It also includes a willingness to seek advice from other psychologists or professionals when required.

Questions or concerns related to the oral examination can be directed to the Credentials Evaluation and Examinations Coordinator, Shenade Finnstad at s.finnstad@cap.ab.ca.

Frequently Asked Question in Registration

Question:

What is service delivery?

Answer:

Some think it is only the direct face to face hours spent with clients. Although this is part of service delivery, it is more than that. Service delivery would be any client activity and related documentation including report writing.

All hours spent with and for your client constitute service delivery. The policy states that 800 to 1200 hours must be spent in service delivery. The remaining 400 - 800 hours can be spent in non service delivery activities, which would include supervision hours, professional development, continuing education, organizational tasks such as preparing monthly billings, staff meetings, statistics, etc.

Psychologists' Responsibility to Obtain Informed Consent: An Active, Dynamic Process

by John W. Pearce, R. Psych

Introduction

Obtaining informed consent from clients is a cornerstone of psychology's ethical standards. Embedded in this fundamental standard is respect for individual autonomy, freedom and dignity, as reflected in Principle I, Respect for the Dignity of Persons, of the Canadian Code of Ethics for Psychologists (2000) (referred to as the Code in the remainder of the article). Principle I is bound inextricably with the concept of moral rights and is to be given the highest weight when resolving ethical dilemmas, except in circumstances in which there is a clear and imminent danger to the physical safety of any person. Moral rights may not be fully articulated or protected by specific rules, laws or statutes; rather, they are fundamental and inalienable and include self-determination and personal liberty. Consistent with this higher principle, in order for clients to become true, collaborative partners in decisions that accord with their own needs and values, "psychologists must, therefore, do whatever is reasonably possible under the circumstances to provide clients or potential clients with adequate and sufficient information so as to allow them to exercise their right" (Truscott & Crook, 2004, p. 56). Two other conditions need to be fulfilled. The client understands the information and expresses a voluntary choice (College of Alberta Psychologists Standards of Practice, 2005) (referred to hereinafter as the Standards).

After briefly reviewing the central concepts and premises underlying the notion of informed consent and the relevant ethical standards, I will discuss their implications for practice, especially when other professionals who are non-psychologists are involved with our clients. My central thesis is that psychologists must accept responsibility for actively obtaining informed consent from clients for psychological services and cannot delegate or abrogate this responsibility to non-psychologists. But I will also offer a warning: psychologists must be scrupulous in ensuring they do not convey opinions to clients about the non-psychological (e.g., legal) ramifications of psychological services when obtaining informed consent. They should not assume a role for which they are not competent.

That psychologists are compelled to actively initiate the process to obtain informed consent is expressed in both broad and more specific standards. This general notion is reflected in the Standards 2(1): "Psychologists shall obtain the informed consent of all persons who are competent to give such consent for psychological services provided to them except in circumstance of urgent need." The Code articulates a similar sentiment in 1.16: "Seek as full and active participation as possible from others in decisions that affect them, respecting and integrating as much as possible their opinions and wishes." Standard 1.17 underscores the active nature of obtaining informed consent, describing it as a dynamic process: "Recognize that informed consent is the result of a process of reaching an agreement to work collaboratively, rather than of simply having a consent form signed."

Both the Code and the Standards speak to three specific criteria that constitute informed consent. Our obligations to adequately disclose information to enable individuals to make an informed decision and to ensure that clients understand this information are transparently clear in 2(3) of the Standards: "Psychologists shall provide, in obtaining informed consent, such information as a reasonable person would want to know to make a decision to consent to the service. The psychologist must relay this information in language that the persons understand (including providing translation into another language, if necessary) and will take whatever reasonable steps are needed to ensure that the information is understood." Standard 1.23 of the Code is almost an exact reiteration of point 2(3) and is followed by 1.24 that identifies the minimal content that individuals must understand to give informed consent: "Ensure, in the process of obtaining informed consent, that at least the following points are understood: purpose and nature of the activity; mutual responsibilities; confidentiality protections and limitations; likely benefits and risks; alternatives; the likely consequences of non-action; the option to refuse or withdraw at any time, without prejudice; over what period of time the consent applies; and, how to rescind consent if desired."

The concept of informed consent as an

ongoing process, including the provision of information to clients, is exemplified in ethical standards that oblige us to ensure that informed consent continues throughout the professional relationship with clients: it does not end when the client signs a consent form just prior to the initiation of psychological services. This is consistent with the Code's Respect for Dignity of Persons, which affirms an individual's fundamental rights of self-determination and autonomy throughout all aspects of their involvement with a psychologist. Point 2(4) of the Standards addresses this notion: "Psychologists shall provide new information in a timely manner, whenever such information becomes available and is significant enough that it reasonably could be seen as relevant to the original or ongoing informed consent."

Point 2(6) of the Standards addresses the third condition, freedom to consent: "Psychologists shall take all reasonable steps to obtain consent that is not given under conditions of coercion or undue pressure", and is similar to Standard 1.27 of the Code: "Take all reasonable steps to ensure that consent is not given under conditions of coercion, undue pressure, or undue reward." Standard 1.29 expands this notion and amplifies the obligation of psychologists to assume an active role in this process: "Take all reasonable steps to confirm or re-establish freedom of consent, if consent for service is given under conditions of duress or conditions of extreme need."

I will discuss two overarching themes that emerge from the preceding review of the Standards and Code. First, obtaining informed consent is the responsibility of the psychologist. Neither the Standards nor the Code provides any allowance whatsoever for a non-psychologist to secure informed consent on the behalf of a psychologist for psychological services. Second, although the Code identifies specific information that psychologists need to convey to clients, informed consent is so much more than just asking a client to read a form and sign it. It is an active, dynamic process, initiated and maintained by the psychologist, which continues throughout the life of the professional relationship. The psychologist must allow, and indeed encourage, the client to ask questions and then address any concerns, and inquire and evaluate whether the client understands the information and is freely giving consent.

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Supervision of the Provisionally Registered Psychologist conclusion

that the quality of supervision is maintained. In particular, good supervision requires clarity and transparency with respect to expectations, evaluation, appeals and due process.

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Continuing Competence Program Update by Richard Spelliscy

Under the provisions of the Health Professions Act, R.S.A. 2000, c.H-7, section 50(1), the College of Alberta Psychologists must have a continuing competence program in place by January 2011. College Council, through the Practice Advisory Committee (PAC), established an ad hoc committee directly tasked to meeting this statutory requirement. Jana Hyer-Davies chairs this committee.

The Continuing Competence Program Ad Hoc Committee has made significant progress. A detailed program description has been completed. This includes both a self-assessment guide and a professional development plan template. Each regulated member will be responsible and accountable for completing the self-assessment guide and professional development plan on an annual basis. A critical program component is peer review by one other regulated member of their choice.

Regulated members will be required to sign a declaration that the requirements of the continuing competence program, including the peer review, have been completed. This declaration will be submitted as part of the annual practice permit renewal process. Participation in the Continuing Competence Program is a mandatory requirement for practice permit renewal. A proportion of regulated members will have their professional development plans reviewed annually to ensure compliance.

The College recently developed supporting statutory regulations for the Continuing Competence Program. These have been reviewed by both members and legal counsel and have been forwarded by College council to the Alberta government for approval. The College, subject to council approval and the development of supporting bylaws, is planning to pilot the continuing competence program during the 2009–2010 annual registration process. This is to ensure the program is fully operational prior to our 2011 statutory deadline.

Changing Your Address?

Please notify the College promptly in writing of changes in your address, phone/fax numbers or e-mail address. A change of address form is provided on the College website.

Please note that the business address, phone number, fax and email information collected from members are available to the public and reported as required to Alberta Health and Wellness. **If you are providing a RESIDENCE address to the College, clearly indicate so on the Change of Address form so that this information is not provided.**

Psychologists' Responsibility to Obtain Informed Consent: An Active, Dynamic Process cont'd

Implications for Practice

Consider the following hypothetical situation. A registered psychologist has accepted a referral from a lawyer who is representing the father of a 4 year-old girl. The local child welfare authority has raised concerns that the man is a risk for physically abusing his daughter, and his lawyer has requested a psychological evaluation of the father to counter child welfare's concerns. The psychologist has known the lawyer for years, collaborated with her on many similar cases and has the utmost confidence in her familiarity with psychological assessments. He sends a retainer agreement to the lawyer that describes in detail the components of the proposed assessment, consistent with 1.23 of the Code: purpose and nature of the activity (e.g., proposed methodology, including interviews, psychological tests, and observations of parent-child interaction); likely benefits and risks; the likely consequences of non-action; the option to refuse or withdraw at any time, without prejudice; over what period of time the consent applies; how to rescind consent; fees; issues around confidentiality; and release of the report. In the accompanying letter, the psychologist asks the lawyer to thoroughly review the retainer agreement with the father and indicates that he should sign the agreement if he agrees with the terms. Two weeks later the psychologist receives the agreement signed by the father. The psychologist assumes it represents his informed consent to participate in the parenting evaluation. In the first session with the father, the psychologist asks him if he agrees to participate in the assessment but he does not engage him in a discussion of the terms of the retainer agreement as the client has told him that he and his lawyer had talked at length about the agreement, and that he understands the term and agrees to participate. The psychologist believes that the client's affirmation is sufficient and then begins the assessment.

The central problem in this case is that the psychologist has defaulted on his obligation to actively engage the client in a dialogue about the proposed assessment; rather, the psychologist has delegated this responsibility to an individual who is

not a psychologist. As I have emphasized, obtaining informed consent is not simply a matter of a client reading and then signing a form, such as a retainer agreement. Although this lawyer may be thoroughly familiar with forensic psychological evaluations in cases of suspected child abuse, she is not a psychologist and therefore we cannot assume that she will be able to accurately explain the nature of the services or the specialized psychological information that is being presented, or able to answer the client's questions.

Foote and Shuman (2006) identify a number of areas psychologists need to address with clients in forensic evaluations, many of which are consistent with the ethical standards already reviewed. These include clarifying the role of the examiner. In forensic cases the psychologist is not acting as a therapist and the service being proposed is not therapeutic; rather, it is designed to provide information to the court. As Shuman (1993) points out, undue trust in the examiner as a result of a misunderstanding of the psychologist's role may result in the client disclosing more information than would otherwise be disclosed in the evaluation.

Foote and Shuman (2006) discuss another topic that must be covered in a discussion of informed consent in a case like this: the potential psychological harm that might be engendered from participating in the evaluation. A central line of inquiry on psychological/parenting evaluations is gathering history about a parent's childhood, including experiences of physical or sexual abuse, neglect or exposure to domestic violence, and their impact upon current functioning, including parenting (Pezzot-Pearce & Pearce, 2004). Such an inquiry can be an upsetting experience for those clients who have not positively addressed their own unfortunate histories or whose ability to effectively regulate strong emotions is impaired. This is just one example of psychologists' specialized and unique knowledge and information, and of the way in which they must actively initiate discussions with clients about these and other issues rather than abrogating their responsibility.

As well as concerns about non-psychologists' abilities to convey accurate psychological knowledge and information, can we

confidently assume that they would be able to accurately assess whether the client understands the information, especially when meeting with individuals who may be suspected of having cognitive delays that could significantly interfere with their ability to comprehend the information about the proposed psychological services?

Similarly, psychologists must assiduously evaluate language, cultural or social variables, especially with vulnerable individuals, that may prove to be real barriers to clients' ability to understand the information or to express a voluntary choice. Returning to our example of the father who has been referred for a parenting evaluation, the psychologist learns early in the first interview that his client had immigrated to Canada four years ago from a country infamous for its suppression of human rights. Citizens in his country-of-origin are expected to acquiesce quickly with the demands and instructions of authority figures, including police, civil servants or medical and mental health professionals; failure to do so can result in egregious consequences, such as detention. The psychologist starts to offer the father information about the assessment consistent with the Code and Standards in order to secure informed consent, but the client quickly states that all this information is superfluous and that he just wants to sign the consent form and "get on with" the evaluation. He appears extremely anxious and agitated and continues to adamantly insist that he should sign the form. The psychologist must ascertain the basis of this reaction, clearly explain the differences between the roles of mental health professionals in Canada and in his client's homeland, and thoroughly review content relevant to the assessment. To expediently agree with the client's wish to sign the consent without such an active exploration and discussion subverts the letter and spirit of the Code and Standards, and as such constitutes a major ethical violation.

The ethical standards conceptualize informed consent as an ongoing process that compels us to remain sensitive throughout our involvement with a client to situations when we must re-initiate a conversation about informed consent. Situations which merit this attention include significant shifts or changes in the professional service, such as the client's request to address a different problem, or confirming or re-establishing freedom of consent, if consent for services was initially given under conditions of duress. Can we reasonably expect a non-

Psychologists' Responsibility to Obtain Informed Consent... conclusion

psychologist who may have, at best, sporadic contact with a client, to be able to regularly monitor these changes in therapeutic focus and service and quickly attend to such issues?

Although I have emphasized psychologists' primary responsibility to obtain informed consent, they must be equally prudent about the information they offer to clients about non-psychological matters. This is particularly relevant to forensic referrals. Returning to our hypothetical case, the psychologist who has accepted the referral may consider himself well informed about legal matters, especially regarding family law. After all, he has been qualified as an expert in forensic psychology in both provincial and federal courts on numerous occasions, has published articles about the interface between psychology and law and has lectured on the use of psychological tests in parenting evaluations at the local law school. But just as we would seriously question the competence of the lawyer to comment about the proposed psychological services, we would conclude that the psychologist lacks the necessary legal training and credentials to fully inform his client about the legal ramifications of participating, or not participating, in the psychological assessment. When confronted with clients' legal questions that arise in the context of a discussion about proposed psychological services, psychologists must refrain from offering an opinion and instead encourage them to consult with a lawyer. According to Foote and Shuman (2006), "Consent for a psychological evaluation demands expertise from two professional realms. However well intentioned the psychologist or lawyer may be, there are limits on the ability of either to address all of the issues relevant to the litigant's knowledgeable choices in relation to the evaluation. Although psychologists are assumed to be competent to convey information about the psychological aspects of the evaluation process in which they participate ... psychologists cannot be expected to be competent to communicate a complete constellation of legal information relevant to the evaluation" (p. 439).

Foote and Shuman (2006) describe a formalized conjoint model in which the lawyer and the psychologist share responsibility to inform the client who has been referred for a forensic psychological evaluation. As well as

following ethically sanctioned processes for obtaining informed consent for psychological services, the psychologist sends a letter to the client's lawyer that includes a detailed, informed consent form that describes these processes and content. The letter requests that the lawyer inform the client about the legal purpose of the evaluation and the associated legal risks and alternatives. This collaborative model respects the skills and knowledge of both professionals and offers a comprehensive process to ensure that clients have every opportunity to provide informed consent.

Summary

Informed consent is a complex matter. Obtaining informed consent involves a dynamic and ongoing dialogue between the psychologist and client and addresses overarching moral principles, such as individual autonomy and self-determination, as well as conforming to specific professional standards—it transcends the simple signing of a consent form. As psychologists, we must be prepared to assume primary responsibility for an active role in this process, to ensure our clients are able to provide informed and voluntary consent to psychological services. However, we must be careful to stay within our limits of competence and respect the knowledge and expertise of allied professionals who also play a significant role in helping clients make the best decision on their behalf.

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Reciprocal Registration in British Columbia

The Registration Committee of the College of Psychologists of British Columbia invites individuals fully licensed as registrants of a Canadian psychology regulatory body, but whose main residence appears to be in British Columbia, to apply for registration in BC as reciprocal applicants. This policy is to ensure that individuals who would have been eligible for reciprocal application but were not aware of the requirement to be actively practicing in their home jurisdiction prior to applying for registration in BC are given the opportunity to make an application.

This policy will apply to Reciprocal applications received at the College of Psychologists of British Columbia by December 31, 2008.

Supervision of Provisional Psychologists - Data Capture

The College of Alberta Psychologists (CAP) has recently gathered comprehensive data regarding provisional psychologists and supervisors. The purpose of the data capture was to gain a better understanding of the current supervision experience. It was also to identify any significant trends or challenges facing supervisees and supervisors.

Two types of data were reviewed. The College also maintains an online survey for supervisors and provisional psychologists and a specific data capture was completed by the Supervision Ad Hoc Committee through a comprehensive file review of provisional psychologist registration files. A total of 295 files were reviewed.

The vast majority of supervisees were practising within a single branch of psychology. The majority of these identified clinical or counselling psychology as their chief professional activity. This was followed by consulting and assessment activities (25%).

Schools continue to employ the highest number of provisional psychologists. Fewer than 10% of provisionals were employed in hospital settings. A slightly larger number of psychologists were employed in publicly

operated community mental health programs.

The majority of supervisors identify their education as a Master's degree. Most are senior psychologists with 20 years or more experience. The vast majority have more than 10 years experience.

Three-quarters of supervision was done on-site. Face to face contact was the most common form of supervision. This was followed by case consultation and live observation.

On March 9, 2002 CAP established two voluntary "Supervision Consultant" positions, one each in Calgary and Edmonton. The role of the supervision consultant is to provide consultation to supervisors and provisional psychologists and to assist with conflict resolution when invited by both parties. Provisional psychologists and supervisors can access the consultants directly or by referral from the Registration Committee.

An analysis of issues brought to the attention of supervision consultants was also recently undertaken. Many provisional psychologists indicated that it was difficult to obtain a supervision placement. The majority of supervisees were aware that the supervision consultants were available as a resource.

A majority of respondents felt that the consultants provided a valuable and essential service. Supervisee concerns centered chiefly on supervisors' availability and the nature of their advice. Often supervisee concerns centered on the perceived power imbalance in the supervisee-supervisor relationship. Some provisional psychologists reported feeling vulnerable.

Overall, supervision continues to be a salient professional activity. A quality supervision experience is increasingly perceived to be essential in the complex and changing field of psychology. CAP is committed to enhancing the supervision experience for both supervisees and supervisors. As a result, College council identified supervision as a priority in the February 3, 2007 Strategic Plan. An ad hoc supervision committee was established under the Registration Advisory Committee to identify critical issues in supervision and to ensure that these are addressed in a proactive and timely manner.

Communications Survey

The College Council identified *communicating with members* as a key priority area in its Strategic Plan, February, 2007. The College has formulated a survey to gather your feedback on existing and future College communications. Although the College makes every effort to communicate in a timely and effective manner, there is always room for improvement!

Your input as a member is important.

Please take a few minutes to complete the survey and provide us with your opinion.

The survey is available on the CAP website at www.cap.ab.ca under the "Members Only" tab. Paper copies can also be obtained by calling the College office: 1-800-659-0857 or 780-424-5070.

**Let your opinions be known!
Complete CAP's Communication Survey
today!**

Did you Know?

Personal Directives Act Amended

On June 30, 2008, the Personal Directives Amendment Act was proclaimed. The Office of the Public Guardian has developed materials to help psychologists stay informed and to provide accurate and up to date information on personal directives to clients. Key changes to the Personal Directives Act include:

- a new voluntary standardized personal directives form;
- parents of minor children are now able to specify an agent to make decisions about the care and education of their children until a guardian is appointed
- the Public Guardian can be named as sole agent as a last resort
- a free, online, voluntary, personal directives registry allowing approved health care providers to contact the agents quickly
- a maker, agent or service provider, including a physician, can request a reassessment when mental capacity appears to have been regained; and
- the Public Guardian is now authorized to investigate complaints about agents who fail to act in accordance with the legislation or the personal directive.

Copies of the forms and information are available online at www.seniors.alberta.ca/opg/order.

Survey of Provisional Psychologists and Supervisors

The Registration Advisory Committee invites all provisional psychologists and supervisors to complete an online survey regarding your experience with supervision.

This survey is available on the CAP website at www.cap.ab.ca

Your feedback is greatly valued!

PRACTICE PERMIT RENEWAL FOR 2009/10 FISCAL YEAR!

Members should watch for their application to renew their Practice Permit for the upcoming 2009/10 fiscal year in early February. The Health Professions Act requires the College to issue practice permits for members. Without a valid practice permit, members cannot engage in the practice of the profession. If you have not received your application by the end of February, contact the college office immediately! To ensure your application for renewal is processed in a timely and efficient manner, please note the following:

- a **completed** Application for Renewal of Practice Permit **must be completed and received** at the College office **by March 31st**.
- Members will be asked to complete a declaration regarding criminal record on the application.
- Members must also provide evidence that they maintain professional liability insurance in an amount of at least \$1,000,000. We do not require a copy of your insurance documents; rather, members must fill out a portion of the renewal application regarding their insurance. *Members may have adequate coverage from an agency or institution that they work for. However, members who also engage in private practice must maintain liability insurance for work engaged in outside of the agency or institutional setting.*
- A **late fee** of \$100 will be assessed to all renewal applications received after March 31, 2008. The College office mails the renewal application forms no later than the 1st of week of February each year. If you have not received your notice by the end of February, you should call the office to follow-up. If you have a change of address, please make sure it is received in time to be processed at the college office prior to the time of this mail-out.

A pilot of the Continuing Competence Program declaration will be included in the 2009/10 Application for Renewal of Practice Permit.



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Supervision Consultants

Jon Amundson and Walter Goos, Supervision Consultants for the College, provide consultation to provisional psychologists and supervisors, and assist in the resolution of conflicts between provisional psychologists and supervisors.

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