

Professional Accountability and Responsibility

DEFINITIONS

Practice role:

A practice role is a set of professional activities performed by registrants. Registrants may have different practice roles depending on their practice settings and given different clinical populations. A practice role may be in direct clinical care of clients or in other roles including but not limited to: managing, counselling, administering, teaching, guiding, directing or developing clinically related services. All roles are intended to be within the scope of practice of a given health profession and may be integral to an inter-professional care team.

SCOPE

All Active, Temporary and Conditional Active Registrants of the College of Speech and Hearing Health Professionals of BC

STANDARD

All active, temporary and conditional active registrants of CSHHPBC must practice according to the CSHHPBC code of ethics. Registrants must always conduct themselves in a professional manner, regardless of their practice role and in accordance with the following professional principles and requirements.

Registrant accountability and responsibility extends to all services that they provide and in all professional contexts. This includes a mandate to ensure client safety at all times.

Registrant Responsibilities:

Registrants are responsible for:

1. Care provided by those under their supervision including: Communication Health Assistants, students, trainees, Conditional Active Registrants
2. Being familiar with and adhering to all CSHHPBC standards of practice (SOP Framework CORE-01) and related clinical decision support tools and the code of ethics (CORE-05)
3. Reporting registrants who are not practicing ethically, competently or who are unfit to practice (Duty to Report, SOP-PROF-04)
4. Knowing who needs to be on a client's care team and for knowing who on the team is responsible for what or if the responsibility is shared (Inter-professional Collaborative Practice Standard of Practice) (SOP-PROF-01)
5. Knowing the risks and benefits of services to a client; predictability of outcomes and methods to measure outcomes (both intended and unintended)

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6. Managing caseloads within existing resources which may involve the need for client prioritization

7. Informing clients when there is a discrepancy between recommended and available services including but not limited to: informing them of alternate treatment options; funding opportunities; discrepancies between recommended and actual treatment availability; any risks or implications of delayed treatment or treatment that is below the recommended levels

Registrant Accountabilities:

In addition, Registrants are accountable for and required to:

1. Be competent in all areas of their practice, commensurate with their individual expertise regardless of the circumstances or who asks for the care to be provided (Attaining and Maintaining Practice Competency Standard of Practice)

2. Accept sole accountability for determining that the client's condition warrants performance of an activity.

3. Involve and inform the client (or substitute decision maker) regarding all clinical decision making according to the CSHHPBC code of ethics and the principles of client centered care and

4. Obtain and document client consent according to the CSHHPBC standard, policy and guideline for Documentation and Record Management

5. Practice within the scope of practice for each profession that they are registered in.

6. Practice within any limits or conditions set by CSHHPBC or in the Speech & Hearing Health Professionals regulation

7. Understand and comply with the national competency profiles for all professions they are registered in

8. Have client-based rationale when deviating from accepted or best practices

9. Understand and utilize the CSHHPBC guidelines on conflict of interest and professional boundaries (Where's the line? Professional Boundaries in the Therapeutic Relationship CPG-05)

10. Know and adhere to any CSHHPBC documents pertaining to any concurrent or alternate service delivery methods

11. Maintain their professional information on record with CSHHPBC and to be current in their CSHHPBC obligations including but not limited to: registration and payment of fees, continuing

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competency credit requirements, advanced certification requirements, practice hours requirements and quality assurance practice review obligations

11. Participate fully in all required CSHHPBC quality assurance programs

COMPLIANCE:

Registrants are required to abide by the professional responsibilities and accountabilities. In any instances where registrants do not comply and where certain conduct occurs, including a registrant's refusal to fully participate in required CSHHPBC quality assurance programs, then under section 26.2(3) of the Health Professions Act (HPA), the Quality Assurance Committee must refer the matter to the College's Inquiry Committee which must treat the matter as if it were a complaint.

RELATED CSHHPBC DOCUMENTS

- Advanced Practice (SOP-PROF-06)
- Attaining and Maintaining Practice Competence (SOP-PROF-02)
- Code of Ethics (CORE-05)
- Conflict of Interest (CPG-11)
- Continuing Competency Credit Program Requirements (POL-QA-02)
- Duty to Report (SOP-PROF-04)
- Infection Prevention and Control Guidelines for Audiologists (CPG (A)-08)
- Inter-professional Collaborative Practice (SOP-PROF-01)
- Professional Accountability and Responsibility (SOP-PROF-05)
- Unique and Shared Scope of Practice (SOP-PROF-03)
- Use of Communication Health Assistants (SOP-PROF-03)
- Where's the line? (Professional Boundaries in the Therapeutic Relationship) (CPG-05)

REFERENCES

Professional Standards, CRNBC, retrieved from: crnbc.ca/Standards