

The Continuing Competence Program for Psychologists Practicing in Nova Scotia

A Guide for Participants

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Introduction to the Continuing Competence Program

A Continuing Competence Program is designed to promote safe, ethical and competent practice by ensuring that psychologists at all stages of their careers engage in a learning process that encourages ongoing professional development both in terms of maintaining competencies and acquiring new competencies as required by the dynamic nature of the profession.

Section II.9 of the Canadian Code of Ethics for Psychologists state that:

“In adhering to the Principle of Responsible Caring, psychologists would: Keep themselves up to date with a broad range of relevant knowledge, research methods, and techniques, and their impact on persons and society, through the reading of relevant literature, peer consultation, and continuing education activities, in order that their service or research activities and conclusions will benefit and not harm others.”

At both the provincial and federal level, regulatory bodies in Canada are increasingly expected to be able to demonstrate that their registrants not only attain competence but maintain competence. The NSBEP is required to be accountable to the public and to be able to openly demonstrate that the necessary programs are in place to ensure that all psychologists can demonstrate, throughout their careers, their ability to deliver client services in a manner that is consistent with the Canadian Code of Ethics for Psychologists and the standards of the profession. In addition, the psychology regulatory bodies in Canada have identified five core competency areas that are essential to the responsible and ethical practice of psychology. Responsible practice involves the ability to integrate and apply these competencies in the designated role and setting in which the psychologist practices. Therefore, the NSBEP Continuing Competence Program is based on a framework that includes these core competencies.

The dual objectives of the Continuing Competence Program developed by NSBEP are to provide a framework to assist individual practitioners to address the ongoing challenge of maintaining competence, while also giving the Board a mechanism to support and ensure practitioners maintain competence.

The development of the Board’s Continuing Competence Program was informed by the new continuing competency program of the New Zealand Psychologists Board, consultation with the Association of Psychologists of Nova Scotia, a review of other continuing competency programs for psychologists in Canada, reference to the Report of the ASPPB Task Force on Maintenance of Competence and Licensure (October 2010) and a six month trial of the planned program. The program will continue to be refined annually based on feedback from the psychology community.

1. Standards of Practice.

Psychologists in Nova Scotia must look to the Standards of Practice for the profession in assessing competence in their designated role and setting. The Standards provide guidance to help psychologists determine acceptable practice. In addition to the Standards, the psychologist is expected to be aware of position statements and specific practice guidelines related to their designated role and practice setting. The Board has a combined document that includes the standards, reference to the code of ethics and other applicable legislation and guidelines, which is available via the following URL: http://www.nsbep.org/downloads/Binder_Standards_Legislation_Guidelines.pdf

Psychologists in Nova Scotia must be able to demonstrate that they have attained and maintain competence in the following five Core Competence Areas (see Appendix-D):

- Assessment and Evaluation
- Intervention
- Research
- Ethics and Standards
- Interpersonal Relationships

2. What is Competence?

Competence involves the complex interaction of four major components: knowledge, skills, judgment, and diligence.

Knowledge involves having absorbed and understood a body of information sufficiently well to then understand and conceptualize the range of professional issues that one can reasonably expect to encounter. Knowledge is a necessary, but not sufficient foundation for competence.

Skill is the ability to effectively apply knowledge in actual practice.

Judgment involves knowing when to apply which skills, and under what circumstances. It includes self-reflection on and awareness of one's own values, experiences, attitudes, and social context, and how these may influence actions and perceived meaning. Good judgment increases the likelihood that choices made will be beneficial for the individuals, families, groups, communities and organizations with which psychologists work.

Diligence requires the consistent application of knowledge, skills, and judgment in one's professional activities and taking care to give priority to the clients' needs. Diligence also encompasses striving to give the best service to each and every client.

3. What is Continuing Competence?

Continuing competence is a process that involves maintaining the ability to integrate and apply the knowledge, skills, judgment and diligence required to practice responsibly and ethically on an ongoing basis by linking life-long learning to the Core Competencies, Code of Ethics and the Standards of Practice for the profession.

A continuing competence program provides psychologists with a framework for maintaining and acquiring competence throughout their professional life-span. The program involves opportunities for self reflection, identification of gaps and learning opportunities, the application of learning to practice, and the evaluation of learning outcomes. It is an active and dynamic process of continual learning and review which generates ongoing professional growth.

4. Who should participate in the Continuing Competence Program?

Psychologists on the Candidate Register are considered to be engaged in developing and refining their competencies during the supervision period. They are required, in collaboration with their supervisor, to develop Goals of Supervision for all five Core Competencies. Supervisors will monitor and evaluate the Candidate's progress in acquiring competencies throughout the supervision process. A Candidate must be rated as "ready for independent practice" in all areas before an oral examination can be requested.

Psychologists (Candidate Register) will complete the Practice Profile annually as part of the renewal of registration. Once the Candidate's name has been transferred to the Register of Psychologist, he/she is obligated to participate in the Continuing Competence Program.

All psychologists on the active Register of Psychologists (Full Registration, Academic Register) must participate in the Continuing Competence Program.

5. Overview of the Continuing Competence Program.

NSBEP believes that the most effective program for continuing competence will allow the registered psychologist to develop a learning plan based on individual needs and learning style. Such a plan would be individually tailored to:

- fit the designated role and setting within which the psychologist practices
- reflect the psychologist's stage of professional development

As such the NSBEP Continuing Competence Program provides registered psychologists in Nova Scotia with a framework for meeting competency requirements without mandating for the psychologist the specific details of their self-assessment and learning plan.

This framework involves guidelines for:

- completing a Practice Profile and Self-Assessment
- developing a Learning Plan
- documenting Learning Activities and time devoted to learning
- evaluating Learning Activities

Minimum requirements are provided and it is expected that all registered psychologists in Nova Scotia will meet or exceed them.

Psychologists will be required to complete and submit their Practice Profile as part of the annual registration process. It is expected that the Practice Profile will be followed by a Self Assessment which allows the psychologist to identify their unique areas of strength and weakness relative to the five Core Competencies. Learning objectives can then be established and a Learning Plan can be developed to meet those objectives. You are to obtain feedback on the appropriateness of your Learning Plan by reviewing it with another registered psychologist. Psychologists will conduct an evaluation of the outcomes of their learning activities prior to the next registration renewal. The annual cycle then begins again.

Only the Practice Profile needs to be submitted to the Board each year. As part of the annual renewal of registration, however, all registered psychologists must attest that they are following the Continuing Competency Program and provide the name of the psychologist who reviewed their Learning Plan. Psychologists are required to document and retain their identified learning objectives, their learning plan, their learning activities and their evaluation of the learning activities for future reference.

Continuing competence activities are to be documented as evidence of the psychologist's efforts to maintain competence. Although optimally these activities will relate directly to the learning objectives identified, any activity that contributes to a psychologist's competence would merit inclusion. It is understood that there will be a balance between opportunistic and planned learning activities for most psychologists.

6. Guiding Principles.

A continuing competence program must be broad enough and flexible enough to allow psychologists to choose competency activities that directly relate to areas identified for professional development. A competency program must be mindful of the considerable diversity in the profession with respect to area of practice, population and setting and be flexible enough to allow for the development of highly individualized learning plans.

A continuing competency program must be meaningful for psychologists at every stage of their professional development from early through to late-career psychologists and must provide for relevant and accessible learning experiences regardless of area of practice or availability of learning resources in the psychologists physical location. As such, a continuing competency plan based only on continuing education credits is too restrictive.

As a health professional, a psychologist bears the ultimate responsibility both for maintaining and for demonstrating professional competence to practice, as guided by the Canadian Code of Ethics for Psychologists and the professional standards and guidelines adopted by NSBEP.

Lifelong continuous learning and improvement is essential to the professional psychologist. Self-reflection, self-assessment, and evaluation are intrinsic to the psychologist's role, both for quality assurance and for professional self-care. There is also a need to keep current with evolving fields of knowledge as the psychology discipline moves forward.

7. Goals

- To support psychologists in developing a meaningful and relevant learning plan.
- To work collaboratively with psychologists when areas for improvement to practice are identified.
- To ensure the public that all psychologists have a current plan for maintaining competence.
- To work towards developing increasingly meaningful methods of assessing competence.
- To provide a flexible program that will readily allow for changes and updates as knowledge about competence and measurement of competence changes and grows

8. Basic Elements of the Continuing Competence Program.

Kaslow et al., 2007 notes that psychology must establish a culture that values self-assessment and reflective practice. While not all practitioners have the same level of self-awareness and/or the same abilities for self-assessment and self-reflection, NSBEP supports the position that a practice review and a process of self-assessment and self-reflection are, nonetheless, essential to the development of a useful and meaningful learning plan.

It is expected that aspects of the NSBEP Continuing Competence Program will evolve as self-assessment skills are developed and refined and as our knowledge with respect to

measuring competence increases. The program is thus designed in a manner that encourages further development of the program, within the context of the identified guiding principles.

Step 1: Practice Profile: Completing a Practice Profile is the first step in the NSBEP Continuing Competency Program. Obviously, in order to choose the most relevant and meaningful continuing competency activities, one must first have systematically reviewed his/her current practice in a self-reflective manner.

NSBEP provides a form to be used to document the Practice Profile information (see Appendix-A). Part A asks about your employment status and setting(s). Please indicate whether your employment status is full or part time. Those working part time please indicate how many hours per week. Then check the applicable practice setting (s) in which you are employed.

Part B of the Psychological Practice Profile asks you to check the areas of your psychological practice and estimate the percentage of time you spend working in each area. For instance, if you spend four days per week engaged in clinical work and one day per week doing research, you would check #1, Clinical, and #5, Research. You would then write in 80% for Clinical and 20% for Research. The total percentage of time should add up to 100%.

Part C of the Psychological Practice Profile asks you to indicate the activities and services you provide within the areas of practice indicated in Part B. For instance, if your clinical work involves Consultation, Assessment/Evaluation, and Intervention/Treatment with Adults you would enter #1 in the appropriate boxes for Adults. Likewise, if your research was with adults, you would enter #5 in the box corresponding to Research and Adults.

The Practice Profile form **must** be submitted as part of your annual renewal of registration with NSBEP.

Step 2: Self-Assessment is the second step in the NSBEP Continuing Competency Program. The purpose of the Self-Assessment is to develop a comprehensive overview of your practice by identifying areas of strength, and also areas requiring maintenance or further development. It can also serve as an opportunity to identify any areas of relative weakness and emerging practice activities.

You begin the Self-Assessment by reviewing your Practice Profile, noting in particular any new or emerging areas of activity. You should then consider each identified area of practice against the five Core Competencies of the profession (see Appendix-D), to identify your relative strengths and weaknesses. Optimally your Self-Assessment should also include consideration of the particular challenges and ethical issues associated with each of your areas of practice. You should give any new areas of practice extra scrutiny.

You may find that asking yourself questions like the following can further guide your Self-Assessment. These questions are only offered as examples and are not intended to be exhaustive.

Assessment and Evaluation:

- Am I familiar with the standardization, norms, reliability, and validity of the tests and tools I use?
- Do I understand the prescribed use and application of these tests and techniques?
- Would I benefit from reviewing the relative strengths and limitations of assessment methods?
- Is my knowledge of psychometric tests up to date?
- Are there instruments that I would like to learn more about?

Intervention:

- What intervention models, tools, techniques etc., do I currently employ?
- Are there any new evidence-based interventions that I would like to learn about?
- Do I assess treatment needs in a systematic fashion?
- Would I benefit from arranging for supervision for new intervention activities that I have identified?
- How do I assess client progress? What do I do when there is a lack of progress?

Research:

- Do I remain current with respect to research in my area of practice?
- Am I familiar with the outcome data related to the interventions I use in my practice?
- Is my practice consistent with the best evidence available?
- What areas of knowledge are particularly relevant to my work?
- Are there areas of research or theory relevant to my practice that I need to brush up on?

Ethics and Standards:

- Is my informed consent process sufficient to ensure my clients fully understand the limits of confidentiality?
- Do I have a good working knowledge of legislation, standards, codes, and guidelines relevant to my areas of practice?
- Am I sufficiently familiar with the Canadian Code of Ethics for Psychologists?
- What ethical challenges have I encountered this year? Am I satisfied with how I dealt with these challenges?
- Do my records contain all of the necessary information required in Principle 7 of the Standards of Professional Practice?

Interpersonal Relationships:

- Can I improve my ways of contributing to the multidisciplinary team?
- Do I work with any diverse groups? Do I need to strengthen my cultural competence?
- Am I able to establish and maintain constructive working relationships with my colleagues?
- Am I satisfied with my communication skills?
- Would I benefit from learning more about the factors that influence the professional relationship (e.g. boundary issues)?

Step 3: Set Learning Objectives Based on the outcome of your Self-Assessment, identify and record one or more objectives for development. It may be appropriate to group them according to whether they are a short or long term objectives.

Optimally, your objectives should be specific and attainable. You may, however, have some that are less specific and that are stated in higher level or abstract terms. It is essential that your learning objectives are meaningful to you.

Record your objectives for future reference and for audit purposes (see Appendix-C for example recording forms).

It is possible that additional objectives are identified as professional challenges arise during the year. These can be added to your learning plan (see Step 4), but it should be transparent that these are late additions to make explicit that your efforts to progress with them may have been time-limited.

Step 4: Develop a Learning Plan Once your learning objectives are formulated, you should develop a learning plan which will enable you to meet them. You are free to choose from among different continuing learning activities. These activities may include a range of professional activities, academic activities, continuing education activities, or the work involved in seeking board certification (e.g. American Board of Professional Psychology). The majority of the activities chosen must be logically related to the learning objectives that you have identified. See Appendix B for a list of learning activities, the value of the credits assigned to each activity, and the maximum number of credits allowed for each activity in a given year.

Formulate a plan considering your desired outcomes and the availability of resources, along with the variety of ways that your objectives may be achieved. Your learning objectives and learning plan must be reviewed with another registered psychologist in order to obtain feedback on the appropriateness of the plan. That psychologist must sign your learning plan.

Your learning plan is prospective. That is, it sets out your intended way forward as you begin a new Continuing Competence Program year. It is recognized that you may not be able to enact all of your intended professional development activities. It is also acknowledged that changes in your circumstances may result in alterations to you plan.

The table in Appendix B indicates the maximum number of credits that are allowed for each learning activity in a given year. You must achieve a **minimum of 20 continuing competence credits each year.**

Document your plan both for your own purposes and for possible audit (see Appendix-C for example recording forms).

Step 5: Record activities undertaken towards your Learning Objectives Record any learning activities undertaken toward your learning objectives and hours spent. Where appropriate, you should retain documentary evidence of completion.

Step 6: Evaluate the outcomes of your Learning Plan The Continuing Competence Program year ends with an evaluation to assess what progress has been made towards achieving each of your identified learning objectives.

Your review of the results of the year's learning program should be an active process of critically appraising the gains that have been made. Relevant questions include:

- Have you achieved what you intended to?
- What gains in knowledge have you realized?
- Have there been changes in your professional practice?
- Are there barriers to enacting gains in knowledge that need to be addressed?
- Have there been impacts for your clients, colleagues or your organization?

Your end of year review should include consideration of whether each of your objectives has been achieved, whether residual objectives remain or if they have been overtaken by other objectives.

The end of year evaluation naturally leads into your Practice Profile and Self-Assessment to start a new year, making your Continuing Competence Program a cyclical process.

Declaration of Competence

You are required to participate in the NSBEP Continuing Competence Program as part of your ongoing efforts to maintain your competence to practice. As part of your annual renewal of registration, you will be required to declare that in the past year you have met the requirements of the Continuing Competence Program. Your statutory declaration includes statement that:

- You have / have not met the requirements of the Board's prescribed Continuing Competence Program during the previous year, and

- You believe to the best of your knowledge that you are competent to practice in accordance with your scope(s) of practice.

Retention of Records for the Continuing Competence Program

You should record brief notes on all Continuing Competence Program activities undertaken. A balance should be sought between administratively burdensome record-keeping versus sufficient detail to allow a clear record for audit or any other professional development purpose. Recording forms (see Appendix-C) are offered as an example of streamlined ways of keeping your Continuing Competence Program records.

Records should be retained for a minimum of five years for audit purposes. Psychologists audited in future years may be requested to supply retrospective records as well as those pertaining to the current year.

9. Continuing Competency Committee

The Continuing Competency Committee is responsible for overseeing the NSBEP Continuing Competency Program. This involves the following:

- randomly selecting psychologists to have their participation in the Continuing Competence Program audited
- auditing the Continuing Competence Program records submitted by the psychologists
- eliciting feedback from psychologists about the program
- modifying the program to reflect feedback and advancing knowledge with respect to the assessment of competencies
- working with psychologists when necessary to develop plans for remediation
- other duties as identified by the committee and approved by NSBEP

This committee meets quarterly and is composed of three psychologists from the community of psychologists, one of whom is appointed by APNS, and one public (lay) member. One Board member serves as the NSBEP liaison to the Committee.

10. Audit of Participation

Each year approximately 5 to 10% of registered psychologists will be randomly selected to be audited.

The audit process

1. If you are selected for an audit, you will be required to submit your Continuing Competence Program records within 20 working days of receiving the request.
2. One extension of up to five working days to submit the required information may be granted (where reasonably justified).

3. If the Continuing Competence Committee has concerns regarding the adequacy of the Continuing Competence Program evidence submitted, they may request additional information.
4. You will normally be notified (in writing) of the outcome of the audit within 15 working days of its completion.
5. If you have only partially met the requirements of the Continuing Competency Program, the Committee will provide feedback and guidance, may ask for further submissions, and may recommend to the Board that a Condition be placed on your registration until you have demonstrated that you are on track for the following year. The committee may decide to audit you again in the following year.
6. In the unlikely event that a psychologist is unable or unwilling to provide the required documentation or otherwise declines to cooperate with the Continuing Competency Program audit, the Committee may recommend to the Board that the psychologist be suspended.

Exemptions from participation

You may apply at any time for exemption from participation in the Continuing Competence Program for a period of one year by writing to the Board, if you do not practice for more than 6 (continuous) months during that year. Exemptions may also be granted on compassionate grounds, such as (but not limited to) long-term incapacitating illness, serious illness of a close family member, study leave or parental leave. If an exemption is not granted, you may request a review of the decision by the Committee.

What is expected in the audit?

The Board's aim is that all active psychologists engage in a meaningful process of self-reflective review and an ongoing self-directed learning program. The audit will check for evidence of engagement in this process. The Board has intentionally avoided prescribing the specific content of each practitioner's professional development plan. The audit will primarily focus on your completion of the required steps and the achievement of the minimum number of learning credits.

What you can expect from the audit

Your records will be returned to you promptly after the audit with feedback indicating whether or not your Continuing Competence Program records met requirements. The Continuing Competence Committee may offer feedback and suggestions intended to enhance your future participation in the Continuing Competence Program. Audit results will be reported as 'requirements met', 'requirements partially met', or 'requirements not met'. The Committee will also provide details of what further steps need to be taken, if required, to ensure the psychologist gets back on track with his /her participation in the Continuing Competence Program.

Each psychologist who is audited is also given the opportunity to provide the Board with feedback about the Continuing Competence Program and the audit process.

11. Independence from the discipline process

The responsible psychologist makes the commitment to remain current in knowledge and skills. NSBEP is mindful of the complex and dynamic nature of the profession. The psychological knowledge base is constantly evolving and in this regard being absolutely current can be considered an ideal or goal. In following a competency program and striving towards this ideal, the psychologist is acting in an ethical and responsible manner. As such NSBEP takes the position that documentation reviewed or submitted to NSBEP in compliance with the NSBEP Continuing Competence Program should be kept separate from information related to the discipline process. For this purpose, a Continuing Competence Committee is an important part of the NSBEP Continuing Competence Program. It is the Continuing Competence Committee that is mandated to review continuing competence documentation.

While a psychologist may be subject to discipline for failing to comply with the mandated requirements of the Continuing Competence Program, a psychologist will not be referred to discipline as a result of documentation submitted as part of the competence program. Rather, if a review of documentation indicates an area of weakness, the psychologist will be provided with feedback and suggestions for improvement. Should a competence problem persist, the psychologist will be encouraged to work collaboratively with the Continuing Competence Committee of NSBEP towards a resolution of concerns.

Please note: Electronic copies of all Continuing Competence forms can be downloaded from the Board's website. Cells can then be expanded as necessary to accommodate your information. To download the forms please visit the following URL.
<http://www.nsbep.org/pages/information.html>

APPENDIX-A

The Practice Profile form

Psychological Practice Profile

Part A asks about your employment status, practice setting(s), and language(s)*. Please indicate whether your employment status is full or part time. (Those working part time please indicate how many hours per week.) Then check the applicable practice setting (s) in which you are employed and identify the applicable languages in which you are comfortable providing services. Information about language(s) of service is helpful for the public, e.g. NSBEP Directory of Psychologists (listing by language), Directory of French Speaking Health Care Providers.

Part B of the Psychological Practice Profile asks you to check the areas of your psychological practice and estimate the percentage of time you spend working in each area. For instance, if you spend four days per week engaged in clinical work and one day per week doing research, you would check #1, Clinical, and #5, Research. You would then write in 80% for Clinical and 20% for Research. The total percentage of time should add up to 100%. If you hold competency in an area but are not currently practicing in this area, you can identify this by placing a check mark and zero in this box.

Part C of the Psychological Practice Profile asks you to indicate the activities and services you provide within the areas of practice indicated in Part B. For instance, if your clinical work involves Consultation, Assessment/Evaluation, and Intervention/Treatment with Adults you would enter #1 in the appropriate boxes for Adults. Likewise, if your research was with adults, you would enter #5 in the box corresponding to Research and Adults. Information about practice areas and populations can be very helpful for the public and mental health professionals when making referrals (e.g. Directory of Psychologists).

Some Clarifications

Should clarification be desired regarding *psychological practice definitions*, it can be obtained from the Board's website via the following link:

http://www.nsbep.org/downloads/Appropriate_Practice_Areas.pdf

Within the category of *Administration*, NSBEP is asking about the time spent by psychologists who hold a position in which they manage a psychological service unit (versus general clerical work such as paperwork, etc.). Time spent on clerical work should be captured but assigned to the corresponding activity category. For instance, if you are completing paperwork in relation to some assessments you have completed, this should be entered in the *Assessment* category.

Within the category of *Consultation*, NSBEP is interested in the time spent completing any work done on behalf or at the request of another health professional. For instance, a GP might be concerned that one of his patients is depressed, and asks for your opinion. The time spent talking to the GP to clarify the concerns and time providing feedback after seeing the patient would be entered under *Consultation*.

With the category of *Assessment*, NSBEP is interested in the time you spend completing both psychometric assessment and non-psychometric assessment function, i.e. in order to provide an understanding which informs a practical plan of action.

Within the category of *Formal Research*, NSBEP is interested in capturing the time you spend completing formal research work (versus the time spent developing and maintaining competence). Time spent developing and maintaining competence, etc. should be captured but assigned to the corresponding activity category. For example, time spent reviewing literature on interventions would be entered in the *Intervention/Treatment* category.

The categories of *Formal Research & Academic (teaching psychology)* are included in Section C of the Psychological Practice Profile so that the corresponding populations can be tracked.

PSYCHOLOGICAL PRACTICE PROFILE

A. Please affirm your overall employment status, all practice setting, and language(s).

Overall I am employed: Full-time Part-time Not currently working

If employed part-time, how many hours per week do you average?: _____

In the area below, please check the applicable practice setting(s) in which you are employed.

Private Practice	Community Agency	Hospital	School
Counselling Centre	University/College	Government	Other

You are comfortable to provide services in: English ____, French ____, other language(s)_____

B. In the area below, check the applicable area(s) of your psychological practice¹ and indicate the percentage of your time spent working in the area(s).

1. Clinical Psychology		6. Academic (teaching psychology)	
2. Counselling Psychology		7. Industrial/ Organizational Psychology	
3. School Psychology		8. Clinical Neuropsychology	
4. Forensic/ Correctional Psychology		9. Administration	
5. Formal Research			

C. Once you have indicated your area(s) of practice, use the corresponding numbers to identify in the below table the activities and services you provide and the clients to whom you provide these services.

Clients	Administration	Consultation	Assessment/ Evaluation	Intervention/ Treatment	Formal Research	Academic
Infants						
Children						
Adolescents						
Adults						
Elderly						
Families						
Couples						
Organizations						

Print Name

Date

Registrant's Signature

¹ The Board recognizes that subspecialty areas of practice are evolving (e.g. Health Psychology, etc.) but such areas should correspond with the broader practice areas (e.g. Clinical Psychology).

APPENDIX-B

Continuing Competence Activities and Credit Values

Nova Scotia Board of Examiners in Psychology
Continuing Competence Activities and Credit Values
Minimum 20 credits required each year to maintain registration status

Continuing Competency Activity	% Allowed toward Renewal Requirements of 20 Credits	Maximum # of Credits Allowed each Renewal Period	Value of Credits by Activity
Professional			
1. Peer Consultation (case consultation groups, journal clubs, regional research groups, mentoring, shadowing a colleague)	50	10	1 hour = 1 credit
2. Practice Outcome Monitoring (assessing patient/client outcomes via questionnaire)	50	10	1 patient/client = 1 credit
3. Professional Activities (serving on psychological association boards or committees or board member of regulatory body)	25	5	1 year = 5 credits
4. Sitting on a Board as a representative of Psychology (positions that: a. require a psychologist or b. psychologists sit on in order to bring their related expertise)	25	5	1 year = 5 credits
5. Supervision of NSBEP Candidates	30	6	1 Candidate = 2 credits
6. Supervision of psychology graduate students (e.g. thesis, comprehensive students); psychology interns and practicum students; post doctoral fellows; medical residents	30	6	1 Intern, Student or Resident = 2 credits
7. Conferences/Conventions (attendance time)	10	2	1 conference day = 1 credit
Academic			
8. Academic Courses (Graduate-level course from			

a recognized institution related to psychologist's discipline)	50	10	1 course = 10 credits
9. Instruction (teaching a course in a recognized institution, full day workshop presentation) – only counts first time teaching or presenting)	50	10	1 course/1 full day workshop = 10 credits [partial credit for individual lectures, seminars, and public presentations – 1 credit per lecture, etc.]
10. Publications (writing for peer-reviewed publications, book chapter, must be 1 st , 2 nd or 3 rd author, or editor or coeditor of publication)	50	10	1 publication = 5 credits
Continuing Education			
11. Workshops (typically linked to one's learning plan and must require participation.)	50	10	1 hour = 1 credit
12. Self-directed learning (reading, videos, unsponsored activities)	30	6	1 hour = 1 credit
Board Certification			
13. Board Certification (e.g. American Board of Professional Psychology - can count for 100% of required Continuing Competency requirements in the year)	100	20	Certification awarded = 20 credits

Minimum 20 credits required each year to maintain registration status

Appendix B Revisions:
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APPENDIX-C

Example continuing competence recording forms: Table 1 & Table 2

Nova Scotia Board of Examiners in Psychology

Continuing Competence

Table 1: Self Assessment and Learning Objectives

Name: _____ Registration Number: _____ Reporting Year: _____

Core Competencies

Specific areas in which psychologists must maintain professional competency.

My Self-Assessment

My strengths, weaknesses and other areas of interest.

My Learning Objectives

1. Assessment and Evaluation	Strengths: Weaknesses: Interests:	I'll aim to achieve this:
2. Intervention	Strengths: Weaknesses: Interests:	I'll aim to achieve this:
3. Research	Strengths: Weaknesses: Interests:	I'll aim to achieve this:
4. Ethics and Standards	Strengths: Weaknesses: Interests:	I'll aim to achieve this:
5. Interpersonal Relationships	Strengths: Weaknesses: Interests:	I'll aim to achieve this:

Nova Scotia Board of Examiners in Psychology

Continuing Competence

Table 2: My Learning Plan and Progress Review

Name: _____ Registration Number: _____ Reporting Year: _____

Core Competencies	My Learning Plan for the Year Actual Learning Activities	My Year-end Review of Learning Objectives	Hours Must total a minimum of 20 credits
1. Assessment and Evaluation	I'll do this:	How well have I achieved my Learning Objectives?:	
2. Intervention	I'll do this:	How well have I achieved my Learning Objectives?:	
3. Research	I'll do this:	How well have I achieved my Learning Objectives?:	
4. Ethics and Standards	I'll do this:	How well have I achieved my Learning Objectives?:	
5. Interpersonal Relationships	I'll do this:	How well have I achieved my Learning Objectives?:	

Minimum 20 credits required each year to maintain registration status

I have reviewed the Learning Plan and Learning Objectives for the psychologist.

Name: _____ Signature: _____ Date: _____

APPENDIX-D

Definitions of the Five Core Competency Areas

Definitions of the Five Core Competency Areas

Assessment and Evaluation

Definition: A competent professional psychologist draws on diverse methods of evaluation, determining which methods are best suited to the task at hand, rather than relying solely or primarily on formalized testing as an automatic response to situations requiring assessment. The appropriate subject of evaluation may either be an individual person, or a couple, family, organization or system. The skills required for assessment can and should be applied to many situations beyond that of initial evaluation, including, for example, treatment outcome, program evaluation, and problems occurring in a broad spectrum of non-clinical settings. The primary purpose of psychological assessment is to provide an understanding that informs a practical plan of action. It may result in a diagnostic classification or in the identification of strengths or competencies.

Knowledge should include: Knowledge of assessment methods, populations served, human development, diagnosis.

Skills should include: Formulation of referral question(s), selection of methods, collection and processing of information, utilization of psychometric methods, formulation of hypotheses, diagnoses, and action plans, and report writing.

Interventions

Definition: The intervention competency is conceptualized as activities that promote, restore, sustain, and/or enhance positive functioning and a sense of well-being in clients through preventative, developmental and/or remedial services. A broad, comprehensive vision of the intervention competency should include theory as well as the application of knowledge and skills.

Knowledge should include: Knowledge of varied interventions with individuals and systems (e.g., families, organizations); of the relative efficacy of interventions to promote health and wellness; of the positive aspects of all major approaches, reflecting openness to varied viewpoints and methods; of when to make appropriate referrals and when to consult; and of cultural context and diversity, and implications for intervention.

Skills should include: The selection of appropriate intervention methods; analysis of information, development of a conceptual framework, and communication of this to the client, as appropriate; gathering information about the nature and severity of problems and forming hypotheses about factors contributing to the problem through qualitative and quantitative means; establishment and maintenance of professional relationships with clients in all populations served; establishment and maintenance of appropriate interdisciplinary relationships with colleagues; the application of appropriate knowledge to provide effective intervention that addresses the needs of clients

Research

Definition: Professional psychologists should have research training such that they develop a basic understanding of and respect for the scientific underpinnings of the discipline, knowledge of methods to be good consumers of the products of scientific knowledge, and sufficient skills in the conduct of research to be able to develop and carry out projects in a professional or academic context.

Knowledge should include: Knowledge of research methods and of the applications of scientific research; applied statistics and measurement theory; the logic of different models of scientific research (from laboratory experimentation to quasi-experimental and field research); and quantitative and qualitative research methods (including observation and interviewing), with respect to the nature of reliability and validity in the gathering and interpretation of data.

Skills should include: Critical reasoning skills in interpreting and evaluating research procedures and findings; appropriate applications of various research approaches; and ability to write professional and empirically based reports.

Ethics and Standards

Definition: Psychologists conduct themselves in an ethical manner consistent with the Canadian Code of Ethics for Psychologists. They conduct professional relationships within the context of the Code and Standards for the Profession.

Knowledge should include: Knowledge of the ethical principles of the Canadian Code of Ethics and the ethical decision making process promoted with the Code, the Standards of Professional Conduct, the Standards for Providers of Psychological Services, and, as appropriate, other standards such as Standards for Psychological Tests and Measurements, Standards for Conducting Psychological Research, as well as relevant jurisprudence.

Skills should include: Application of the ethical decision making process, pro-active identification of potential ethical dilemmas and application of the process for resolution of ethical dilemmas.

Interpersonal Relationships

Definition: This basic competency forms part of all the other competencies. Psychologists normally do their work in the context of interpersonal relationships (parent-child, spouses, boss-employee, etc.). They must therefore be able to establish and maintain constructive working alliances with their clients and possess adequate sensitivity to cultural issues.

Knowledge should include: Knowledge of theories and empirical data on the professional relationship, such as interpersonal, power relationships, therapeutic alliance, interface with social psychology, and fluctuations of the therapeutic/professional relationship as a function of the intervention setting; knowledge of self, such as motivation, resources, values, personal biases and factors that may influence the professional relationship (e.g., boundary issues); and knowledge of others, such as macro-environment in which the person functions (e.g., work, national norms) and micro-environment (e.g., personal differences, family, gender differences)

Skills should include: Evidence of effective communication, and evidence of establishment and maintenance of rapport, and of trust and respect in professional relationships.