

COLLEGE CONVERSATION

REPORT FROM THE CHAIR

Denese Espeut-Post

There is rarely a day that goes by where the services provided by social workers do not leave me in absolute awe. In my practice as a lawyer with a focus in elder law, my clients frequently rely on the essential services provided by social workers and find essential support in the indispensable care compassionately provided to those in need. The important contributions of social workers to families and communities needs to be commemorated not just annually, but with each committed interaction.

I am delighted to express my gratitude for your efforts in my role as the 2021 Chair of the College. As the first public appointee non-social worker to hold this important position, I thank my colleagues who sit on the Board of Directors for their support and confidence in my skill and ability. I am optimistic and excited for the opportunities and initiatives that lie ahead of the College this year. On behalf of the Board, I thank Jim Campbell for his dedication and service in this position for the past two years as well as our two departing members, Connie Kaweesi and Jenny Morgan, for their service and committee leadership over the past two years.

Social work is essential. The theme adopted for the 2021 National Social Work Month is quite fitting, but even more so when one considers the impact of the global pandemic and the manner in which social workers have been called upon to willingly meet new challenges and put themselves at risk to assist and to protect vulnerable clients.



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For over a year, you have been working tirelessly to meet the needs of your clients, offer direction to those faced with uncertainty of a nature never before experienced and advocate for their best interests. I commend you for the essential work you have done and continue to do.

As a regulator, we recognize that the pandemic has created both professional and personal challenges for registrants. Some of you were unable to maintain your practice and some of you struggled to keep your practice in operation. Many of you experienced increased stress factors in visiting individuals and families in crisis or with complex needs remotely. Some of you have experienced increased anxiety from the ever-present risk of practicing in the shadow of COVID-19 and the potential that you and your family, your client and their family or the people you work with could be at risk of infection. Despite this, the profession has responded to these trials and continued to serve.

The College has recognized the pandemic as an occasion for change and, like many of you, has embraced technology in continuing to operate efficiently and effectively, while operating remotely. The Board's meetings have been conducted remotely over the last year and will continue to be held remotely in 2021. Meeting remotely will permit the Board to meet with increased frequency this year and, with that increase, focus more intensely on working towards our strategic objectives.

Similarly, as done in 2020, the College's 2021 Annual General Meeting will occur remotely and we look forward to increased Registrant attendance, including those in remote and rural areas.

A College priority this year is to purposefully reflect upon the opportunities that exist in our protection of the public interest mandate in establishing our short-term and long-term strategic plan. We look forward to sharing that plan with you in the coming months. As part of this process, the College continues to review its internal policies and procedures as well as its bylaws. As a registrant, you will receive notice of the College's proposed bylaw changes once in final form.

As the College works towards finalizing its strategic plan, I am pleased confirm the College's commitment to diversity, equality and inclusion. We have seen powerful protests across the world over the past 18 months that have called for everyone, including the College, to eliminate individual and systemic racism. Both the Black Lives Matter movement and Indigenous peoples assertion of their inherent and inalienable rights stress upon all of us the need to actively ensure equality and rights for all individuals and groups.



REPORT FROM THE CHAIR CONT...

The College also acknowledges the recent investigation commissioned by the BC Government, conducted by the Hon. Dr. M. E. Turpel-Lafond (Aki-Kwe) and documented in the In Plain Sight: Addressing Indigenous-Specific Racism and Discrimination in BC Health Care report. This powerful report has many calls to action and the College commits to taking steps to build safe and trusting relationships with Indigenous peoples. Please watch for the College's Anti-Racism Statement which will be posted on our website soon and take time to read and reflect upon its content. As a black woman, I am proud to be part of this College knowing its support of movements to end racism and discrimination against Black, Indigenous and People of Color.

I look forward to work of the College in 2021.

Denese Espeut-Post



REPORT FROM THE REGISTRAR



As we head into spring of 2021 and the potential that vaccines lead to a positive resolution to the COVID-19 worldwide pandemic, I am reminded how last year was so significantly impacted by COVID-19. The pandemic brought unprecedented challenges to the work of the College and professional regulation. I am grateful for the selfless dedication of the staff, Board and Committee members to ensure the work of the College continued uninterrupted.

In 2020 staff, Board members and Committee members collaborated on many important projects. The 2020 work and collaboration included navigating the immediate need to implement COVID-19 social distancing protocols leading to a transition of meeting by videoconference. Some of the 2020 projects included: the Quality Assurance Committee initiated a project to include anti-Indigenous racism and anti-racist learning as a required ongoing component of the Continuous Professional Development program.

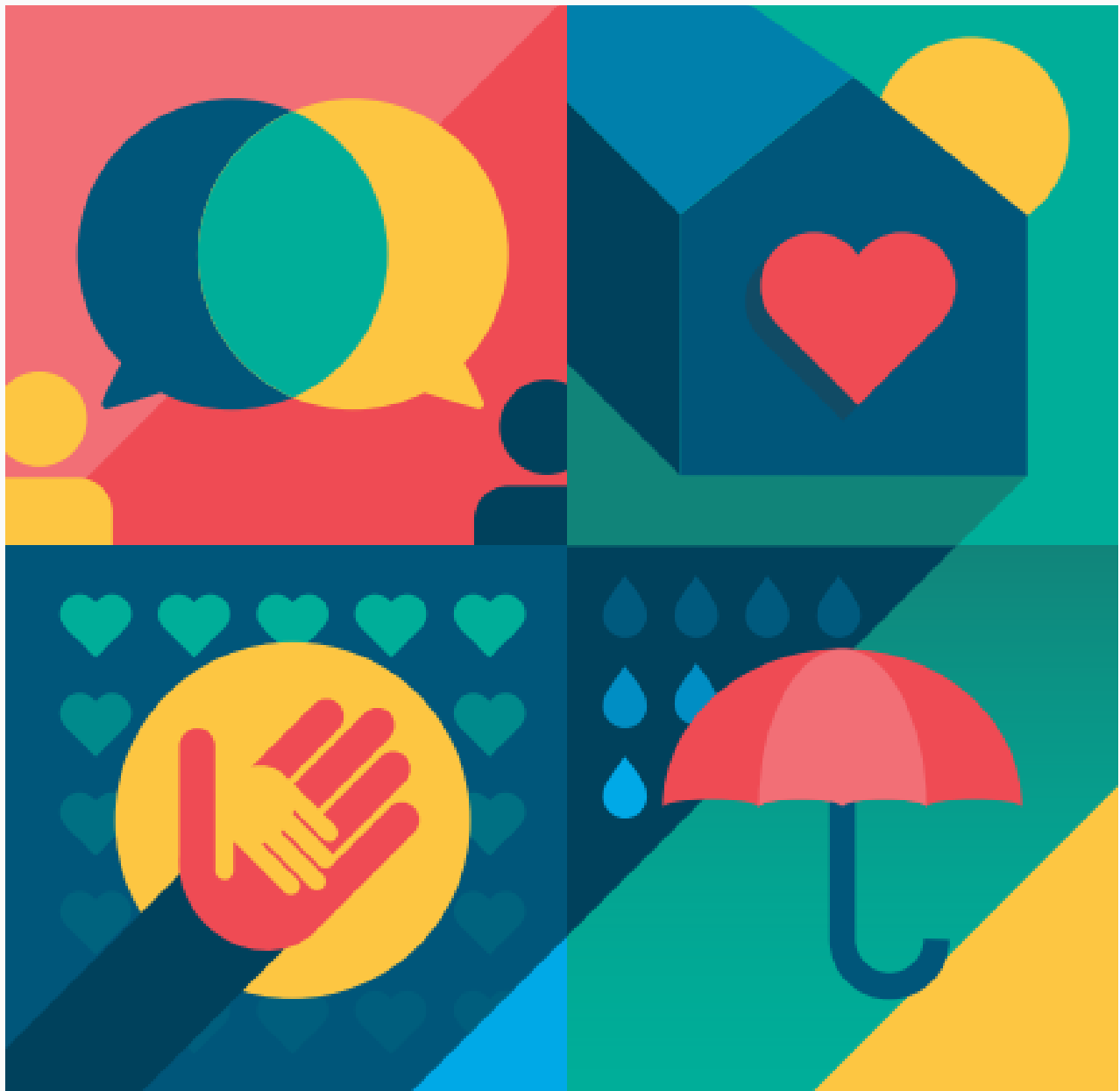
"2021 area of focus includes learning about racism and best practices to decolonize and dismantle systemic racism"

A process to audit Continuing Professional Development submissions was developed and implemented. An audit of the 2019 Continuing Professional Development submissions showed that registrants are committed to self-evaluation, practice improvement and are engaging in quality continuing professional development activities.

The Indigenous Committee debuted their video highlighting Indigenous Social Work and Indigenous Registered Social Workers and in collaboration with the Registration Committee developed and implemented a process to voluntarily self-identify as Indigenous on the College's registration portal.

Looking forward to 2021, my focus and leadership direction will continue to be on protecting the public of British Columbia through the implementation of professional social worker regulation outlined in the Social Workers Act. Priority areas of focus will include increasing the operational capacity of the College, learning about racism and best practices to decolonize and dismantle systemic racism and enhancing public protection through bvlaw modernization.





Social Work is Essential

The essential work provided by qualified, compassionate, and committed social workers benefits all people in Canada. Each March, we celebrate the important contributions social work professionals make to our families and communities.

**Celebrate Social Work Month
March 2021**

Get involved!

casw-acts.ca

[#NationalSocialWorkMonth](https://twitter.com/NationalSocialWorkMonth)



"CLINICAL" CONFUSION

By Madelaine Kirk J.D., Investigative Counsel

What is an RCSW?

The BC College of Social Workers (the "College") offers two main classes of registration full and clinical. Full registration entitles a registrant to use the titles "social worker", "registered social worker", and "RSW". Clinical registration entitles a registrant to use the titles "social worker", "registered clinical social worker", and "RCSW".

"CLINICAL REGISTRATION ENTITLES A REGISTRANT TO USE THE TITLES "SOCIAL WORKER", "REGISTERED CLINICAL SOCIAL WORKER", AND "RCSW"

The difference between the two categories lies in the qualifications required to register and the scope of practice allowed. The requirements for registration in each class are set out in section 41(1) and 42(2) of the bylaws[1]. The scope of practice is addressed in sections 41(4) and 42(1). Both classes may practice social work as defined by section 1 the *Social Workers Act (SWA)*[2], but only RCSWs may practice "clinical social work".

Bylaw 42(1) defines "clinical social work" as "the application of social work knowledge and theories and the independent use of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association, in the assessment, diagnosis, treatment and prevention of mental, emotional and behavioral disorders and conditions, for the sole purpose of providing psychosocial intervention to enhance personal, interpersonal, and social functioning".

What about other meanings of the word "clinical"?

While "clinical social work" is well-defined and turns on use of the DSM, the word "clinical" also has broader use in social work practice and regulation in the province. The social work dictionary[1] defines "clinical practice" as "the professional application of social work theory and methods of treatment and prevention of psychosocial dysfunction, disability, or impairment, including but not limited to emotional and mental disorders." This definition makes no mention of diagnosis or the DSM.

BC College of Social Workers, Bylaws, Vancouver: BC College of Social Workers, 2013, p.6

[1] Social Workers Act, SBC 2008, c.31

[1] Social Work Dictionary, 4th edition by Robert L. Barker, NASW Press

[1] BC College of Social Workers, BCCSW Code of Ethics and Standards of Practice, Vancouver: BC College of Social Workers, 2009 [Standards]

[1] Ibid at p.10

[1] Ibid at p.11

[1] Ibid

[1] Ibid

"CLINICAL" CONFUSION CONT...

The College's Standards of Practice[1] (the "Standards") cite the above definition. The Standards also provide examples of clinical (counselling, information, and referral) and non-clinical (administration of a human service program, providing supports to a social recreational group) practice, which are unrelated to the definition of "clinical social work" in the bylaws. Further the terms "clinical judgment"[2], "clinical sessions"[3], "clinical tools"[4], "clinical experience"[5], are all used throughout the Standards in a manner more aligned with the dictionary definition of "clinical practice" than the bylaw definition of "clinical social work".

As can be seen from these different uses even within the College's published materials, the word "clinical" can have different connotations or meaning dependent on the context in which it is used.

Is it ever appropriate for an RSW to use the word "clinical" to describe their practice?

This answer to this question lies in a social worker's duty not to mislead the public. The Standards note social workers have a duty not to misrepresent their professional qualifications, education, experience, or affiliation.[1] They must describe themselves and their services in an honest and accurate manner and must not make statements which are false or misleading[2].

The responsibility for ensuring that a statement is not misleading lies with the social worker. A registrant should ask whether there is a possibility that a person may be left with the erroneous belief that the RSW is an RCSW? If so, the registrant should alter their language or provide clear explanations of how and why they are using the term and in what context.

To assess the possibility for confusion, registrants must consider the experience of the person with whom they are communicating and the manner of the communication.

Use of the phrase "clinical judgment" in a discussion with colleagues who are familiar with your education and practice cannot mislead the public, and so it is acceptable.

An invoice for a longstanding client which bills for both clinical time and administrative time is unlikely to cause confusion, especially where the invoice identifies the registrant as an RSW. To further avoid any possibility of confusion, the registrant could consider providing an explanation of the term in their fee agreement or billing practices.



"CLINICAL" CONFUSION CONT...

A listing on a public counsellor directory which states Clinical Social Work/RSW with no further explanation may mislead, as the intended audience for this type of directory is usually the public who will have varying, if any, understanding of registration or regulation.

Where there is a reasonable possibility for confusion, it is the responsibility of the RSW to mitigate that possibility. RSWs using the word "clinical" to describe their practice with clients may want to consider including an explanation of the different types of registration, clarifying their scope of practice and education, and providing an explanation of how they are using the word and what it means and does not mean in the context of their practice. The easiest way to avoid any possibility of confusion is not to use the word "clinical" at all when describing their practice with clients.

Ibid standard 2.12 at p. 10

Ibid standard 7.1 at p. 27 and standard 7.3 at p. 28



What's the takeaway?

1. The terms Registered Clinical Social Worker, and Clinical Social Work are protected titles that may only be used by those who have applied for and been granted registration as an RCSW
2. Only an RCSW may practice Clinical Social Work as defined in the bylaw 42(1)
3. RSWs must exercise their judgment regarding the use of the word "clinical". It is the responsibility of RSWs to represent their qualifications accurately and not to mislead the public

OBTAINING CLINICAL SUPERVISION REFERENCES

By Sheila Begg RSW, Practice Consultant

Social workers holding a masters or doctoral degree in social work who wish to apply for clinical registration must submit evidence of at least 3000 hours of post degree supervised clinical social work experience. Evidence acceptable to the College of the supervision hours usually involves a combination of clinical reference content and the applicant's curriculum vitae providing details of the dates, type, and location of past work.



"The social worker will have to do some research to locate an eligible referee willing and able to provide clinical supervision and become familiar enough with the social worker's practice"

Registrants interested in applying for clinical registration who do not work under the supervision of an eligible referee will have to be proactive in establishing a supervisory relationship with an eligible professional. Bylaw 24 (2)(d) specifies who is eligible to be a clinical referee:

(d) references from two individuals satisfactory to the board

(i) each of whom is a registered social worker, a psychiatrist or other physician, or a registered psychologist;

(ii) each of whom has knowledge of the applicant's clinical practice; and

(iii) one of whom has directly supervised the applicant's clinical practice, if available; ...

As is the case in many settings, a social worker may work alone or in a small department and/or whose clinical supervisor is regulated in another health care discipline that is not eligible to provide a clinical reference. Or the social worker may be in private practice alone or associated with a group of other independent practitioners. In all such cases, the social worker will have to do some research to locate an eligible referee willing and able to provide clinical supervision and become familiar enough with the social worker's practice to be able to complete the reference form.



OBTAINING CLINICAL SUPERVISION REFERENCES CONT...

The Reference Form can be the focus for a discussion with an eligible referee:

[Reference-Clinical fillable 20170606.pdf \(bccsw.ca\)](#)

Questions on the form indicate what the referee needs to know about the applicant's clinical practice. They also provide a background to lead to the kind of interaction necessary between the registrant and referee.

When approaching a potential clinical referee, applicants should be aware that the College has no role in this process. Should the referee wish to establish a 'fee for supervision' arrangement that will be entirely between the registrant and the referee. Registrants must also ensure that standards regarding client confidentiality are strictly maintained. The service agreement signed by the client must include that the treatment record may be shared with another professional for a supervisory/professional development purposes.


For further information, contact Alana Prashad at alana.prashad@bccsw.ca



"When approaching a potential clinical referee, applicants should be aware that the College has no role in this process"

BCASW AND BCCSW SUMMARY OF DIFFERENCES

A Summary of the Differences Between Membership with the BCASW and Registration with the BCCSW

	BC Association of Social Workers (BCASW)  The Member Services Association	BC College of Social Workers (BCCSW)  The Regulatory Body
Mandate	To support members, strengthen the profession, and advocate for social justice.	Protect the public interest by establishing and supporting high standards for RSWs.
Activities	Communications with governments, media and members; advocacy for social justice; promotion of the profession; research; professional development activities; the provision of member benefits, publications, promotional resources; peer support	Establishes, monitors, and supports standards of practice and a code of ethics. Superintends the practice of social work through Entry to Practice Standards and an Exam, Regulation, a Continuing Professional Development Program and processing complaints against RSWs.
Governance	Board executive and three members at large are elected by members. Branches appoint representatives from nine BC regions. The Board appoints a representative to the CASW and a student representative. The Executive Director is employed by the BCASW.	Governed by a twelve-member board, composed of eight social work members elected by registrants and four appointed by the provincial government to represent the public interest. The College's Registrar directs day-to-day operations.
Why Belong?	Membership is voluntary. Membership strengthens the voice of social work in BC and Canada. The benefits of joining include professional development opportunities, networking, communications and news highlighting social work, access to professional liability insurance, job postings, research databases, and mentorship.	The College controls the title, <i>Registered Social Worker</i> , and <i>Registered Clinical Social Worker</i> . Persons describing themselves as social workers generally must register with the College, unless exempt from registration through the BC Social Workers Regulation. Social workers who register with the College benefit from professional accountability, work within specific legislation, and can receive practice consultations to guide professional practice.
Eligibility and Application	A social work degree recognized by the BCCSW or enrollment as a student in a recognized social work degree program is required. Individuals not eligible for professional membership can choose to affiliate with the BCASW. Applications and fees can be submitted online and memberships are renewed annually.	Applicants must submit an application package. Following approval of the application, applicants are authorized to write the ASWB Entry to Practice exam. After successful completion of the exam, applicants are awarded the title of Registered Social Worker (RSW). Registered Social Workers holding a master's degree in social work, and meeting the clinical application requirements, may apply through the College for Registered Clinical Social Worker (RCSW) designation.
Further Info	http://www.bcasw.org 604 730 9111 bcasw@bcasw.org	http://www.bccollegeofsocialworkers.ca 604 737 4916 info@bccsw.ca

Farewell from Sheila Begg

To all the registrants, staff, board and committee members that I have come to know over the years. I bid you a final farewell from my position at the British Columbia College of Social Workers (the College).

Since my retirement in 2012, I have been honoured to be invited back from time to time to help during periods of change and staff shortage.

When I started at the Board of Registration in 2004, I felt I had come full circle back to the foundation of my original training. The work of ensuring that only qualified individuals become and remain registered, managing complaint scenarios, and providing practice consultation to social workers deep in therapeutic relationships with clients, was a privilege and made me appreciate once again how difficult and how rewarding social work can be.

This past year, I have heard firsthand about some of the challenge's social workers face,

especially now due to the COVID-19 pandemic having to quickly shift to virtual practice or deck themselves in PPE to the point that they feel less than human. On top of these physical practice changes, they are dealing with clients who are living through painful circumstances that were unthinkable pre-COVID-19, less than one year ago. Social workers are to be commended for their courage, perseverance, adaptability, and strength to continue their work of helping others in such unprecedented times.

Please also accept my sincere best wishes for a safe, healthy, and rewarding career in social work, no matter which sector or venue in which you practice.



"Social workers are to be commended for their courage, perseverance, adaptability, and strength to continue their work of helping others in such unprecedented times"



In closing, I can say with confidence that over the past year, the College's teams - both staff and board have continued to develop into a progressive, forward thinking organization ready for the tremendous challenges to come. Most likely, the challenges will include modernization of professional regulation and the eventual elimination of all social work regulation exemptions.



Professional practice considerations when changing registration classes from RSW to RCSW

REGISTRATION CLASSES

**BY ALANA PRASHAD RSW,
DIRECTOR OF PROFESSIONAL
PRACTICE**

This article is inspired from a number of inquiries to the College from December 2020 to March 2021. The College gratefully acknowledges recently retired Professional Practice Consultant, Sheila Begg RSW, for her mentorship and leadership on this topic.

When assessing the professional practice elements of a clinical application, the College must make decisions that are transparent, fair, reasonable, and as consistent as possible. This is balanced with the uniqueness of each application. A fulsome assessment of each application takes time, as each professional practice element is considered within the application as a whole.

The College's statutory duty to protect the public when assessing the professional practice aspects of a clinical application is delineated in Bylaw 42, Clinical Registration. This article will review Bylaws 42(1) and 42(2)(b).

Assessment



"A fulsome
assessment
of each
application
takes time"

Professional practice considerations when changing registration classes from RSW to RCSW Cont...

Bylaw 42(1): Independent use of the DSM.

42. (1) A registered clinical social worker may practice social work as defined in the Act, and may undertake "clinical social work" which means the application of (a) social work knowledge and theories; and (b) the independent use of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association, in the assessment, diagnosis, treatment and prevention of mental, emotional and behavioural disorders and conditions, for the sole purpose of providing psychosocial intervention to enhance personal, interpersonal and social functioning.

Registered Social Workers (RSWs) pursuing clinical registration are already permitted to practice social work which includes Bylaw 42(1)(a) the application of social work knowledge and theories. Under the Social Workers Act, s.18, RSWs may also use the title "social worker" or "registered social worker". Exemptions to s.18 are set out in the statute's regulations. The exemptions include individuals employed by the Ministry of Children and Family Development, the federal government, and First Nations Communities. Individuals not registered with the College at the time of their clinical application must satisfy both full (RSW) and clinical (Registered Clinical Social Worker or RCSW) qualifications.

The important distinction of clinical registration is the independent use of the DSM to assess, diagnose, treat and prevent mental, emotional and behavioural disorders and conditions. The intervention must be psychosocial in nature to enhance functioning. In other words, the RCSW cannot use other means of intervention (e.g. medications) to enhance other forms of the client's functioning (e.g. brain chemistry). This section of the Bylaws informs how the rest of the clinical application will be adjudicated.

The independent use of the DSM requires additional qualifications given the vulnerability of clients. Making a diagnosis is complex in nature. It requires the registrant to critically think and then make a professional judgment. The consequences of making an incorrect diagnosis may include having an impact on the client accessing medical coverage, employment benefits, the client's self-image,



Professional practice considerations when changing registration classes from RSW to RCSW Cont...

and family dynamics to name a few. It is important applicants provide third party evidence they have the knowledge, skills, and abilities to conduct clinical social work. In other words, given the advanced skills for this class of registration and the statutory duty to protect the public, the College is unable to accept an applicant's assertion that they are qualified or that they have completed a particular academic component.

The Association of Social Work Boards' clinical exam is a key part of the application process. Applicants have the option to write the practice exam once they receive authorization from the College. To gain an understanding of the content, knowledge, skills and abilities that will be tested, applicants may consult ASWB's 2018 [Content Outlines And KSAs: Clinical Social Work Licensing Examination](#).

ASWB's [Content Outline](#) section of their website provides the following example question.

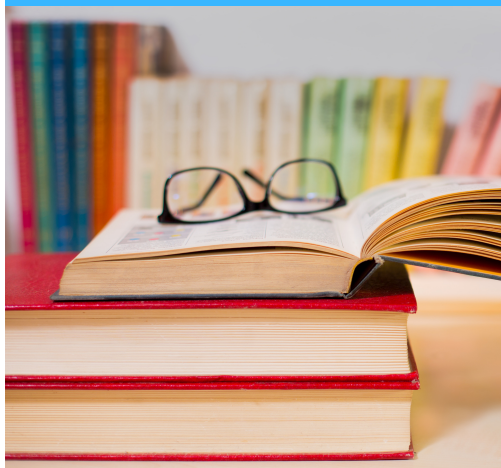
A six-year-old child lives with a foster family. One biological parent is in prison, and the other is in residential treatment for alcohol dependence. The child is small for his age, often has temper outbursts, and has difficulty completing schoolwork. The social worker notes that his speech is immature. What should the social worker do FIRST?

- A) Work with the foster parents on a behavior modification plan
- B) Suggest that the child's teacher refer him for special education placement
- C) Refer the child for assessment for fetal alcohol syndrome
- D) Work with the child's biological parents toward reunification

Answer is C

The Content Outline section details that this question covers:

- Exam.** Clinical examination
- Content area.** Human Development, Diversity, and Behavior in the Environment
- Competency.** Human Behavior in the Social Environment
- Knowledge, Skills, Abilities.** The effects of addiction and substance abuse on individuals, families, groups, organizations, and communities



Professional practice considerations when changing registration classes from RSW to RCSW Cont...

Bylaw 42(2)(b): Clinical course of study.

42. (2) For the purposes of section 9(1)(h) of the Act, the requirements for clinical registration are ...
(b) a course of study in each of the following clinical content areas: (i) human development and behaviour from a biopsychosocial perspective; (ii) assessment and diagnosis based on the understanding and use of diagnostic criteria and evidence-based screening and assessment tools that are standardized and validated; and (iii) psychotherapy and clinical practice including evidence-based approaches....

At this time, Bylaw 42(2)(b) is silent on what constitutes a “course of study” in each of the clinical content areas listed. The Clinical Course of Study Form states “Please...provide a transcript if the course was taken at a University/College or a certificate of attendance if course was taken as continuing education. Also, provide course descriptions for all courses listed.”

As the College accepts both University/College courses and Certificates of Attendance, the application must also include course descriptions so that content, objectives, assignments, and reading lists may be reviewed. The College is unable to recommend where courses may be taken or which courses to take. The College also is unable to assess the clinical elements of the application form until the entire submission has been received and vetted by Registration Services.

Recency of courses taken is also considered, as clinical practice changes over time. For example, a certificate of completion of a DSMIV course would not be considered recent. Generally, MSW and doctoral social work programs offer courses that cover the topics in Bylaw 42(2)(b). Clinical registration is an advanced level of registration. The courses provided as evidence must reflect this. For example, a single course that covers a variety of psychotherapy modalities with no applied role playing will not be considered adequate to satisfy Bylaw 42(2)(b)(iii) psychotherapy and clinical practice including evidence-based approaches.

Have you recently achieved clinical registration at the College? Please share any wisdom gained and we may include it in the next College Conversation

Professional practice considerations when changing registration classes from RSW to RCSW Cont...

This course may satisfy Bylaw 42(2)(b)(iii) if accompanied with complementary University/College courses that build upon this introductory course and/or a significant continuing education roster of courses completed successfully. This is where the uniqueness of each applicant's experience and whole application is considered.

Changing registration classes from RSW to RCSW requires the applicant to demonstrate an advanced level of experience both academically and in clinical practice. All elements of the application must be verifiable by a third party (e.g. transcripts and course descriptions). The College's statutory duty to protect the public, including the most vulnerable needing clinical social work services, directly informs the adjudication of the professional practice elements of the application process.

[BCCSW's landing page](#) contains information for clinical applicants.

Have you recently achieved clinical registration at the College? Please share any wisdom gained and we may include it in the next College Conversation.

Alana Prashad RSW, Director, Professional Practice welcomes your questions and comments at alana.prashad@bccsw.ca.



Registration

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