FITNESS TO PRACTICE ISSUES PROTOCOL

(As per CDSS Regulatory Bylaw 4(3)(b)(iv)(vi) and CDSS Code of Ethics A3)

Status: Approved
Approved by Council: September 2016
Amended: November 2024
To be Reviewed: September 2025



PATHWAYS

1. Self-Recognition of issues

Member recognizes and addresses an issue followed by their voluntary reporting to CDSS regarding personal issues that could affect fitness to practice (pursuant to responsibility to report). This is funded by the CDSS Team Assistance Program (TAP).

2. Concerns reported by colleagues, family or friends (before harm)

- a. Members attends PAR Consulting for assessment and directs PAR to report assessment, treatment and follow up to CDSS.
- b. Member signs a 'CDSS Consent to Receiving Intervention' from PAR Consulting according to the CDSS/PAR MOU.
 - i. Signed agreement and cover letter
 - ii. MOU Referral Protocol for the Provision of EFAP
 - iii. Release of Required Confidential Information Release (A) (B) and (C)
 - iv. As may be required/recommended by PAR Change of Order Notification Non-practicing until further notice

3. Patient complaint of harm

Complaint/Concerns address by the CDSS Professional Conduct Committee Complaint Resolution Process. Possible outcomes are the following:

Possible outcomes:

- a. No further action
- b. Consent to Conditions agreement may include referral for assessment and treatment (documents)
- c. Referral to Discipline Committee