

# Peer Assisted Review (PAR) Program

## Assessor & Reviewer Training Materials



# Considerations for Assessors and Reviewers

Before conducting a Peer Assisted Review (PAR) as a College Assessor or Peer Nominated Reviewer, you must be familiar with the following:

- Legislative background
- Review philosophy
- Assessor/Reviewer qualifications
- Review confidentiality
- Objectivity
- How to prepare for and conduct a review
- Rating system, recommendations, report format
- Honorariums and College administration



# Training Objectives

After reviewing these materials, it is expected that you will:

- a) Conduct fair and impartial reviews, consistent with legislative and College requirements
- b) Provide reviews consistent in scope and detail with other reviews
- c) Ensure that the experience is collegial and of professional value for those being reviewed and yourself as a reviewer



# Legislative Requirements for a Quality Assurance Program

Under the *Regulated Health Professions Act, 1991*, all Health Regulatory Colleges must administer a Quality Assurance Program which includes the following components:

## Minimum Requirements for a Quality Assurance Program

### Section 80.1

- a) continuing education or professional development
- b) self, **peer and practice assessments**; and
- c) a mechanism for the College to monitor members' participation in, and compliance with, the quality assurance program

**Peer and practice assessments** are known colloquially as **Peer Assisted Reviews** within the College program.



# College Quality Assurance Program

The specific requirements for the College's Quality Assurance Program are set out in Ontario Regulation 194/23: General, under the *Psychology and Applied Behaviour Analysis Act, 2021*.

## Peer and Practice Assessment

### Section 4.

(1) Each year the Committee shall select members to undergo a peer and practice assessment to assess the members' knowledge, skill and judgment.

**(3) An assessor or assessors shall evaluate the member's knowledge, skill and judgment by way of a peer and practice assessment, prepare a written report that may include recommendations and provide the report to the Committee and the member, along with a notice of the member's right to make written submissions to the Committee.**



# Fundamental Review Principles

- Reviews are designed to assess the knowledge, skill and judgment of a Reviewee
- This process will help Reviewees take stock of their professional competency across various areas of their practice
- Discussing these factors and addressing any concerns through a quality improvement approach is in the interest of both the Reviewee **and** the public
- The process should facilitate a mutual exchange of information between the reviewers and the Reviewee
- The College Assessor and Peer Nominated Reviewer will provide an **opinion** on the Reviewee's practice for the Quality Assurance Committee's consideration



# Peer Assisted Review Confidentiality

Under the *Regulated Health Professions Act, 1991*, College Assessors and Peer Nominated Reviewers are required to maintain confidentiality of all information reviewed and considered throughout the PAR process.

## Confidentiality

**36 (1) Every person employed, retained or appointed for the purposes of the administration of this Act, ...shall keep confidential all information that comes to his or her knowledge in the course of his or her duties and shall not communicate any information to any other person .....**

**This requirement relates to all information about the review, including any client record information.**

Contact Quality Assurance staff or private counsel if you believe it may be necessary to disclose any information beyond making a report to the College.



# Peer Assisted Review Team

Reviews will be conducted by a team of two registered College members:

- College Assessor (Selected by the College)
- Peer Nominated Reviewer (Selected by the Reviewee)
- Both:
  - Sign an Undertaking and Agreement outlining the conditions of their participation in the review
  - Act as an agent of the College under the *Regulated Health Professions Act, 1991*
  - Are active, supportive, and constructive participants
  - Are sufficiently familiar with nature/ scope of the Reviewee's practice to understand the demands and challenges they may face





# Undertaking and Agreement

## College Assessors and Peer Nominated Reviewers must both Undertake and Agree to:

1. Participate in the College's *Peer Assisted Review Assessor and Reviewer training*\* before conducting a review, if they have not already done so within one year prior to the date of the review (\*these and any other College-provided materials)
2. Maintain confidentiality, as required under s.36 of the *Regulated Health Professions Act, 1991*
3. Familiarize themselves with Legislation, Regulations and the *Standards of Professional Conduct, 2024*, relevant to the practice they will be reviewing

## They must also attest that:

4. They have held a Certificate of Registration authorizing Autonomous Practice with the College of Psychologists and Behaviour Analysts of Ontario for at least five years
5. They are currently in active practice as a Psychologist or Psychological Associate
6. They will not act in a conflict of interest or in a situation where they hold a bias, or any reasonable appearance of either, with respect to a review
7. They will ensure that neither they, nor the individual they will be reviewing, are in a position of power with respect to the other



# Objectivity

When agreeing to participate in a review, Assessors and Nominated Reviewers must consider if there is an **Actual** or **Reasonable Perception** of a conflict of interest, bias or dual relationship.

**Conflict of Interest:** A situation in which a reviewer, or any person involved in a review on behalf of the College, is in a position of power which can positively or negatively influence review outcomes to benefit themselves, or another person or entity. Conflicts can be directly or indirectly related to monetary, professional, personal or private interests, or based on proximal relationships to a Reviewee.

**Reasonable Perception of Bias:** A situation in which an informed person, viewing the matter realistically and practically, would reasonably conclude that a reviewer was not acting fairly and impartially, or engaged in prejudicial behaviour. Bias can include holding views about an individual or group which may result in either an unfair advantage or disadvantage to the Reviewee, or a situation where a reviewer has a sufficiently close personal or professional relationship with an entity directly interested in the review outcome.

**Dual Relationships:** Reviewers must openly acknowledge and manage dual relationships to ensure public interest is paramount.

**Assessors and Nominated Reviewers must notify the College if their involvement in a review may raise any of these concerns.**



# Conflict of Interest and Reasonable Perception of Bias

Before agreeing to participate in a review, consider scenarios such as:

## **Is the Reviewee someone you were once friendly with in graduate school but haven't been in contact with for years?**

Under normal circumstances, there likely wouldn't be concern for a conflict or bias. However, if the friendship ended badly, it could be argued that you held a pre-existing bias or were settling a score through a negative review.

## **Is the Reviewee a referral source?**

Would a reasonable person wonder if the opinion you are providing to the College about the Reviewee is motivated by a desire to maintain a referral source?

## **Is the Reviewee a peer on a task force?**

This would not automatically be a conflict, but if you believe your involvement in the review might influence the Reviewee to vote a certain way (positive or negative), this could be a concern.

## **The Reviewee provides services you have strong views against, such as supportive counselling to women undergoing abortion and the right to choice.**

If you have a strong reaction to the type of work being done, or to practitioners providing such services, it may be difficult to remain objective.

**If there is not a clear answer, it may be best to pass on a particular review, as you would be expected to explain your choices if ever challenged due to concerns of a conflict or bias. For assistance with potential conflicts or perceptions of bias, please contact College staff.**



# Role Expectations: College Assessors

Assessors are matched with Reviewees by the College using practice profiles submitted by each party.

- Assessors will be responsible for leading the review process once they have received their *Letter of Appointment* from the College
- PARs are an opportunity for mutual learning; Assessors must be open to learning about the Reviewee's work
- There is a broad range of theoretical orientations and approaches across the profession; Assessors should take an "orientation neutral" approach when conducting a review
- Familiarity with and respect for other orientations is required:
  - Is the Reviewee's approach *reasonable* given their client population?
  - Is there established empirical evidence that choices made by the Reviewee are contraindicated?
  - Are competent practitioners doing such work within the profession?
- Assessors will likely have undergone a PAR themselves or participated in another registrant's review



# Role Expectations: Peer Nominated Reviewers

- Nominated Reviewers are selected by the Reviewee and may be familiar with their practice
- They should have similar practice authorizations to the Reviewee or an understanding of the scope and nature of their work; they must be able to contribute to discussions
- They can provide the Reviewee with collegial, objective support, but protecting the public interest is paramount
- They may prompt the Reviewee with facts but should **NOT** answer on their behalf or act as their advocate
- They will assist the College Assessor in preparing for and conducting the review



# Virtual vs. In-Person Reviews

As the landscape of professional service delivery has evolved, most Peer Assisted Reviews are now able to be completed virtually through secure videoconferencing.

- The College may still require an in-person review, if necessary, or the Reviewee may request an in-person review should they require accommodations.
- Visual observation for the ***Practice Setting*** domain may not be required in all institutional settings, however, “video visits” of clinical offices may provide enough information to start a conversation.
- Reviewees can securely share photos or a video tour of their practice space prior to a virtual PAR meeting to facilitate discussion of the domain prompts (see [Practice Setting](#)).



# Virtual Reviews

Virtual reviews must be conducted through secure videoconferencing platforms.

- **What platform can the PAR meeting be arranged on?**
  - Videoconferencing systems that provide the level of security necessary to privately communicate confidential information with a client or to deliver teletherapy services are considered sufficient.
  - If the Assessor or Reviewee already have access to a secure system that provides this level of security, it would be acceptable for use.
  - At a minimum, all virtual meetings should be configured to require a passcode or registration to join, to ensure confidentiality among the Assessor, Nominated Reviewer and Reviewee.
  - Please notify the College or consider arranging an in-person review if you do not have access to a secure videoconferencing platform.

Additional privacy guidelines can be found on the College website [here](#), and in the *Standards*, [17. Use of Technology](#).



# Virtual File Sharing

- If Reviewees or Assessors do not already have access to a secure file sharing platform which can grant guest access to files, quality assurance records, or other confidential review materials, please contact Quality Assurance staff. The College can provide access to a secure system to upload and share review files.
- To maintain security, reviewers should **not** download files to their devices if they can be viewed digitally through a secure online platform.
- If downloading is necessary, any confidential information related to the review must be securely deleted or destroyed after the PAR process is complete.

**Safeguard:** When electronically sharing files or discussing client information virtually, anonymize identifying details using coded language (e.g., client 1, supervision file 2, client Joe S., client J.S., etc.).

**Note:** When using the College system, Quality Assurance staff will only provide technical support. Should the Committee itself wish to review files shared with Assessors/Reviewers, the Reviewee will be asked to provide the files directly.





# Pre-Review Preparation

When preparing for a Peer Assisted Review, you must:

- **Review:**
  - The Reviewee's *Pre-Review Questionnaire* (provided by the College)
  - Relevant [Standards of Professional Conduct](#), [CPA Code of Ethics](#), [Legislation](#), [definitions of authorized areas of practice and populations](#)
- **Consider:**
  - Applying questions or prompts from the PAR Report form to your own practice
- **Reflect on:**
  - Any differences you are aware of between your own practice and the Reviewee's



# Pre-Review Preparation: Assessor and Reviewer Coordination

The College Assessor will lead the coordination of the review; however, it is important to communicate with the Nominated Reviewer before the PAR meeting.

- Understand each other's role and perspective
- Ensure tone will be collegial and objective; both must remain open-minded
- Be open about own strengths, possible challenges
- **Discuss:**
  - How to randomly select client and supervision files (see [File Selection](#))
  - How to deal with challenges, disagreements
  - Anticipated questions or discussion prompts not already listed on the PAR Report form
  - How comments or recommendations will be shared with the Reviewee



# Pre-Review Preparation: Communication with Reviewee

After receiving the *Letter of Appointment* from the College, the Assessor should plan to contact the Nominated Reviewer and Reviewee as soon as possible.

- Set the tone for collegiality with the Reviewee: opportunity for practice enhancement, not an investigation

## Confirm PAR Details:

- Where, When, How
  - Virtual vs. In-person
  - Most reviews must be completed within 8-12 weeks
  - PAR meetings typically require 3-4 hours
  - If there are concerns for scheduling the review within the standard time frame, notify the College

## Clarify:

- Your duty to maintain confidentiality of all information discussed and considered during the review



# Pre-Review Preparation: Communication with Reviewee

- Briefly discuss clinical orientations, professional interests
- Remind them that the process is objective; reviewers are not informed of a Reviewee's manner of selection
- Give the Reviewee the opportunity to offer anything relevant they would like you to review in addition to the PAR Report form domains (e.g., recent performance reviews, institutional audit results, results of efficacy measures, etc.)
- Ensure the Reviewee is aware that they may ask questions and have questions answered before and during the PAR meeting
- **Helpful:** you may remind the Reviewee that contact information for registrants that have previously participated in the Peer Assisted Review process is available on the College website, should they wish to contact them



# Pre-Review Preparation: Reviewees with Multiple Practice Settings

- The practice setting selected for review will be at the discretion of the Assessor and Nominated Reviewer
- There is no firm rule, and you do not need to observe more than one location
- Consider what information will allow you to provide the most comprehensive opinion on the Reviewee's knowledge, skill and judgment
- Consider that highly regulated settings like hospitals, schools, and correctional facilities do not always highlight a Reviewee's individual knowledge, skill and judgment, when compared to their private practice
- Consider the following to make a reasoned, rationale decision about which setting to review:
  - Professional activities and proportion of time spent practising at each location
  - Differences in institutional controls over practice/ oversight by others/ collaborative work
  - Practice risks of each setting; peer support versus isolation
  - You may still discuss how the Reviewee navigates practising in multiple settings while focusing on one primary setting



# Pre-Review Preparation: File Selection

When completing the [File Review](#) domain of the PAR Report, you must review and discuss:

- A minimum of **2 randomly selected client files**; and,
- A minimum of **2 randomly selected supervision files** (if the Reviewee also provides supervision).

The random selection method used is at the discretion of the Assessor and Nominated Reviewer.

**Note:** The College and its Assessors/Reviewers are authorized to request and access complete client records for Quality Assurance purposes under the Health Professions Procedural Code of the *Regulated Health Professions Act, 1991*. If there are substantial concerns about this, the Reviewee may anonymize identifying client details before sharing selected files, however, it is important that you are still able to review file completeness against professional standards.

## [9. Records and Record Keeping](#)



# Pre-Review Preparation: File Selection

## Does the Reviewee need to advise a client if their file has been randomly selected during a Peer Assisted Review?

The College holds the authority to obtain a file in the absence of client consent. This is set out in legislation and is non-negotiable.

When registrants are obtaining consent to collect personal health information, which must be done before collecting the information, it is important that they avoid giving the false impression that the client has any control over whether the College exercises its legislated duty to obtain information in procedures designed to protect the public interest, in this case, to ensure that registrants are practicing competently and ethically.

If there are concerns, it may be helpful to remind the Reviewee that the College and its reviewers, staff, and Committee members have a strict duty of confidentiality. Additionally, in Quality Assurance matters, where reviewers may have access to the identity of a client through the file review process, the information reported to the Committee for its determination of a PAR outcome will not include identifying details. The review process is focused on registrant practices and not the collection of client-specific information.

More information regarding this topic is available on the College website: [Client Consent & Quality Assurance](#)



# Pre-Review Preparation: File Selection

**Virtual Reviews:** when reviews are conducted virtually, an efficient method may be for the Assessor to request an anonymized list of all active client files (and supervision files, if applicable) to make their random selections from. The Assessor and Nominated Reviewer can then discuss the algorithm they will use to make their random selections from the provided list.

**In-person Reviews:** The Assessor and Nominated Reviewer have the option of randomly selecting files from the Reviewee's physical filing cabinet, in-person, or may select from a list prior to the review date.

The Reviewee's file list may briefly indicate the record size, length of history, nature of presenting issues, or reasons for referral, to assist the reviewers in considering a range of files.

- Reviewees should be instructed to securely share the selected records as soon as possible. It is important that the Assessor and Nominated Reviewer have an opportunity to review the files prior to the PAR meeting, when possible.





# Conducting a Peer Assisted Review

To maintain objectivity during the review process, the College does not inform Assessors or Reviewers of the Reviewee's manner of selection. This information will only be considered by the Quality Assurance Committee, as reviews are not intended to be punitive or investigative.

The Reviewee's knowledge, skill and judgment will be considered across 9 possible domains:

1. Practice Setting/Office
2. Professional Conduct
3. Professional Services
4. Supervision and/or Consultation and/or Other Non-Direct Services
5. Administrative
6. Research/Teaching/Academic
7. Record Keeping
8. File Review
9. Self-Assessment Guide and Continuing Professional Development



# Facilitating Professional Reflection

**Objective:** provide an opportunity for safe discussion and reflection

Sample questions for each domain are provided in the PAR Report form to stimulate discussion. It may not be necessary or relevant to address all prompts.

- Ask “When?”, “What?”, “How?” instead of “Why?”
  - ✗ Why didn’t you involve the shared custody parent in the consent process?
  - ✓ At what stage of an assessment do you usually look at the Custody/Access agreement?
  - ✓ What do you look for in the agreement?
  - ✓ What factors do you usually consider when deciding whether to involve the other parent?
- Invite the Reviewee into the discussion of your observations and openly explore whether there are opportunities for growth or any concerns.



# 1. Practice Setting

- May be brief
- Not necessary to provide a detailed description unless anything is unusually positive or concerning
- Less detail required in accredited institutional settings e.g., hospitals
- **Address:**
  - Client comfort, safety, accessibility
  - Are conditions appropriate for the services provided?
  - Privacy and security for clients and confidential materials
  - **If conducting a virtual review via videoconferencing:**
    - Request a video “tour”
    - Were there any perceivable privacy or accessibility concerns based on photos/video shared?
    - Much can be learned by asking questions about location (private vs. shared office), client check-in processes, etc.



## 2. Professional Services

Suggested areas to explore:

- Are services provided in accordance with Reviewee's authorized areas and populations?

Be familiar with **Standard 5.1 Competence** of the [\*Standards of Professional Conduct, 2024\*](#):

**Practical Application:** ... not always clear demarcations with respect to population groups, particularly with respect to age. ... determine whether in all the circumstances, the person's status is consistent with the status of those they are authorized to work with. ...whether person's abilities, life circumstances and challenges consistent with those normally expected within the authorized population groups the member is authorized to work with.

- Even if authorized, has the Reviewee trained to provide those particular services competently? e.g., How do you train or maintain your knowledge and skills in this area?
- Respect the Reviewee's right to choose clinical orientations, tools, techniques, interventions, etc.



## 2. Professional Services

### Threshold for concern:

- Is the practice or service contradicted by a generally accepted body of evidence?
- As a professional yourself, are you able to provide cogent argument against the practice?
- Does the Reviewee make *reasonable* clinical decisions and reflect on interventions and tools used?

The review format leaves room for judgment. If you are unsure about an issue or concern, recommend that the Reviewee follow up with College and note this in the PAR Report.



# 3. Professional Conduct

Consider the Reviewee's ethical knowledge and conduct.

Suggested areas to explore:

- Objectivity
- Mandatory reporting
- Dual Relationships
- Billing
- Contingency plans for unexpected absence or incapacity
- Informed consent process and documentation
- Communication; maintaining privacy and security



## 4. Supervision, Consultation, Other Non-Direct Services

- High importance as the reach of the Reviewee's influence is broader than direct 1:1 client services
- Review a **minimum** of 2 randomly selected supervision files (if applicable)
- **Important to review the adequacy of any files against the *Standards*:**
  - Supervision contracts
  - Supervisee files
  - Formal consultation agreements
- Obtain an understanding of the scope of their activities in these areas
- Is the relevant level of accountability clear to the Reviewee, their supervisees, consultees, and other stakeholders, including clients?
- Are billing and advertising practices appropriate in supervision situations?
- As the supervisor, do they “own” the client record?
- Is an appropriate Alternate Supervisor prepared to assume the care of the Reviewee's supervised client services in the event of incapacity or planned leave?

### 4. Indirect Service Provision; Supervision and Consultation



# 5. Administrative

- Are the Reviewee's administrative activities consistent with the *Standards*?
- Do they make best efforts to ensure that their employment setting adheres to the *Standards* in the planning, delivery, supervision and billing practices of all services provided?
- Does their organization pose obstacles for the Reviewee's ability to comply with the *Standards*?
- How does Reviewee make best efforts to respond to challenges in their work setting?
- Is the Reviewee's treatment of colleagues, subordinates, and supervisees fair and free from abuse and harassment? Are working relationships positive?
- If their practice is influenced by the administrative demands of the organization or institution, how is this handled?

## 2.1. Organizational Constraints and Conflicts





## 6. Research/Teaching/Academic

- Adherence to ethical principles
  - In addition to College-endorsed ethical codes, what policies or codes does the Reviewee follow when conducting research, teaching or academic activities?
  - Are they familiar with the processes required by their organization for designing or conducting research studies; reporting and addressing adverse incidents?
  - Do organizational policies or requirements pose obstacles for the Reviewee when complying with the *Standards*?

### 2.1. Organizational Constraints and Conflicts



# 7. Record Keeping

- Is the Reviewee aware of, and do they adhere to, relevant Information Privacy legislation?
- Are practices appropriate for obtaining informed consent? How are the limits of confidentiality for the collection, use, access and disclosure of personal and personal health information addressed and documented?
- Are the contents of client records aligned with the *Standards*?
- Is appropriate security used when storing and transmitting information?
- Is the required record retention period observed?
- How are records securely destroyed once the required retention period ends?
- Has a designated Health Information Custodian with the ability to access and secure client records in the event of incapacity been appointed?

## [9. Records and Record Keeping](#)



## 8. File Review

- Review a **minimum** of 2 randomly selected client files
- The files should be representative of the Reviewee's current caseload
- If professional services are varied, selection should include a variety of files
- If the Reviewee uses different storage modalities (paper, electronic), at least one of each should be reviewed
- Obtain files immediately, or as soon as possible, after informing the Reviewee of selections
- Assessor and Nominated Reviewer must both review files, preferably in advance of the PAR meeting

### Remember:

- Must be a random selection of files made by the Assessor and Reviewer (see [File Selection](#))
- Method of random selection at discretion of the Assessor and Reviewer



# 8. File Review

## Contents:

Adequacy and quality of information:

- Does the file provide enough information for you to understand the services provided, client progress, plans, goals, etc.?
- Does the file tell a reasonable “story”?
- If the file were reviewed by another practitioner, would the information support the continuity of client care?
- Are notes, assessments, reports, etc., organized, legible and clear?

## Case Discussion:

Opportunity to explore:

- Quality of service provision
- Clinical decision-making process
- Quality of relationships and interactions with clients
  - Awareness of transference/countertransference issues, professional boundaries
  - Engagement in self-reflection, how does the Reviewee learn from positive/negative experiences?

## [9. Records and Record Keeping](#)



# 9. Self-Assessment Guide and Continuing Professional Development

The Reviewee's most recently completed *Self-Assessment Guide and Continuing Professional Development Plan (SAG)*, and **Continuing Professional Development (CPD) participation records** for their current two-year cycle **must** be reviewed. If the Reviewee is unable to provide these materials, query this and note in the PAR Report

## *SAG Professional Development Plan:*

- How does the Reviewee reflect on their current level of professional knowledge, skill and judgment?
- Do they have a self-awareness of their strengths/challenges or knowledge gaps?
- Are their professional goals related to addressing identified challenges or pursuing areas of interest relevant to their existing practice authorizations?
- Are their goals specific, measurable, attainable, relevant, and time-based?
- Have they planned to achieve their goals through specific CPD activities?
- Are they monitoring goal progress as they complete related CPD activities?

*SAG Self-Care Plan Attestation:* Is it marked complete? (Review of the Self-Care Plan itself is **not** required)



# 9. Self-Assessment Guide and Continuing Professional Development

## CPD Participation:

- Does the Reviewee recognize the importance of continuing education and professional development?
- If they are near the end of their two-year CPD cycle, has a *reasonable* number of hours and mix of activity types been completed?
- Are they recording their completed activities using a tracking sheet and retaining supporting documentation?
- If they have concerns about completing their CPD cycle requirements, do they know they must inform the College?

**Note:** Assessors and Nominated Reviewers are not expected to complete a comprehensive CPD/SAG Audit, which is a separate process conducted by the College. The objective of this PAR domain is to stimulate discussion about the Reviewee's understanding of the requirements, their professional goals for improving their practice and competency, and ongoing participation efforts.



# Assessor Recommendations

## Peer and Practice Assessments

**(3)** An assessor or assessors shall evaluate the member's knowledge, skill and judgment by way of a peer and practice assessment, prepare a written report that **may include recommendations and provide the report to the Committee and the member, along with a notice of the member's right to make written submissions to the Committee.**

**(5)** If, after considering the report and the member's submissions, if any, and giving the member an opportunity to confer with the Committee, the Committee may,

- a) direct that no further action be taken;
- b) take any action listed in subsection 80.2 (1) of the Health Professions Procedural Code if the Committee is of the opinion that the member's knowledge, skill or judgment is unsatisfactory;
- c) grant the member a specified period of time to address the recommendations in the report; or
- d) direct that the member undergo a second peer and practice assessment.



# PAR Report

- Only **one** PAR Report form will be created; the Assessor typically leads the formulation of the report but is expected to collaborate with the Nominated Reviewer
- **The report will be drafted from the perspective of “peers” and not “experts”**
  - Explain any concerns, validate what is done well, identify any areas for growth, and make suggestions or recommendations
  - Describe the Reviewee’s receptivity to any suggestions or recommendations made
  - Describe if you believe the Reviewee has demonstrated good professional knowledge, skill and judgment
  - Provide a reasoned and reasonable explanation for any concerns identified with the Reviewee’s practice based on the information discussed or considered.

**Note:** All concerns that will be reported must be discussed with the Reviewee; do not provide any information to the Committee that the Reviewee has not been made aware of.





# PAR Report

- Ideally, areas of disagreement between any of the participants should be resolved through group discussion
- Legitimate debate can lead to professional growth
- If conflicting opinions remain, this should be clearly noted
- Reviewers may describe what they gained or learned from the other participants through the experience
- Both the Assessor and Nominated Reviewer must sign the final report to attest to its content and completion
- The Committee may request additional information or clarification from the reviewers following its consideration of the final report
- A [Completed Report Sample](#) is available on College website



# Domain Rating Scale

Use the rating scale at the beginning of each domain in the PAR Report form. Do not impose a subjective “Best Practice” or create a new standard when giving feedback.

## Meets standards without any qualification

- No concerns or areas for improvement identified

## Would meet standards with minor modifications

- Minor concerns which may be rectified through adoption of suggested recommendations in a specified time frame

## Significantly below standards

- Major areas of concern identified to be addressed through adoption of recommendations, or other actions ordered directly by the Committee

**Note:** “standards” refers to the minimum that would be reasonably expected of competent, ethical, autonomous practitioner

Summary Ratings				
	Meets standards without any qualification	Would meet standards with minor modifications	Significantly below standards	Not Applicable
Practice Setting/Office	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Professional Services	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Professional Conduct	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Supervision and/or Consultation and/or Other Non-Direct Services	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Administrative	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Research/Teaching/Academic	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Record Keeping	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
File Review	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-Assessment and Continuing Professional Development	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



# When Concerns Are Apparent

- **Remember:** the objective of the review is to identify if any practices across the review domains may benefit from further learning development or improvement; not to censure
- **Consider:** Is the Reviewee amenable to discussion about potential concerns or the suggestions you have made for growth?
- **Suggestions** may be appropriate if you are of the opinion that professional standards have been met, but believe it may be helpful for the Reviewee to consider making a change; not *necessary* to implement
- **Recommendations** should be made if you are of the opinion that the Reviewee is not meeting the minimum standard reasonably expected for competent, ethical practice, and requires additional support or direction. The Committee will decide if it endorses recommendations made, or wishes to issue its own, based upon the report.

**When a concern is identified that places the public interest at risk, you must inform the College. Please seek additional guidance from Quality Assurance staff.**



# PAR Report Submission

- The final report must be submitted to both the Reviewee and the College on the same day.
- When submitting a copy of the report to the Reviewee: **Assessors must inform the Reviewee of their right to make a written submission to the Committee responding to the report within 14 days of receipt.**
- The final report may be submitted to the Reviewee and the College through a secure file sharing platform, e-mail, mail or fax. No identifying client information should be recorded in the PAR Report; however, you may wish to password protect the report file. Please notify all recipients of the password, if one is applied.



### Professional Conduct – Sample Questions to Consider:

- Has the member had any experience with dual relationships? How did they handle them?
- In describing their own example of a case that posed an ethical dilemma or a problem of an ethical nature, how did the member address the issues?
- Has the member encountered a 'duty to warn' type of situation? What were the circumstances? What did they have to consider? Did they act appropriately?
- Does the member understand mandatory reporting obligations? Have they encountered such a situation and if so, did they act appropriately?
- Does the member provide telepsychology services? If so, do they do so in accordance with the Standards of Professional Conduct?
- Does the member bill clients? If so, do billing and receipt documents conform with the requirements set out in the Standards?
- How does the member manage collection of overdue accounts?
- How does the member manage collection of accounts from clients who have lost their jobs or are otherwise unable to pay for services?
- What arrangements have been made in the event of vacation leaves, or sudden illness or incapacity?
- How does the member obtain consent and explain the limits of confidentiality?
- How does the member explain client access to notes or records?

### Overall Rating:

Meets standards without any qualification	<input type="radio"/>
Would meet standards with minor modifications	<input type="radio"/>
Significantly below standards	<input checked="" type="radio"/>
Not Applicable	<input type="radio"/>

### Other issues Discussed:

Member discussed case in which he treats both mother and 18-year-old daughter as separate clients in psychotherapy, treatment is mainly CBT, although some supportive work with mother. Each is working on overcoming her own independent traumatic experiences. Mother has expressed worries in her own therapy about the daughter's high-risk behaviour, including substance misuse and staying out all night with "undesirable" boyfriend. She has prohibited him from telling daughter what she has told him. He has decided to "park" daughter's focus on traumatic experiences and is redirecting focus to exploration and psycho-education re: risk taking and safety. We raised issues of consent from daughter to collect information, daughter's consent to change treatment focus and damage to therapeutic alliance if daughter found out about information he was acting on. We also discussed whether becoming mother's agent in protection of daughter was consistent with mother's treatment goals. Although feeling some discomfort about his position in all of this, he still believes that taking this direction is in daughter's best interests. We suggested that there may be some problems with respect to confidentiality, informed consent, dual relationships, self determination of capable individuals and whether this approach is in best interests of mother-daughter relationship. We suggested that treating two members of the same family in individual therapy is not advisable, particularly where there are no shortages of therapists in the area. We also discussed ways in which safety could be addressed in ways which do not compromise ethical principles. He said that he would give all of this further thought.

### Areas of Strength / Areas Requiring Ongoing Learning:

In combination with door lock concern noted above, recommend that member review CPA Code of Ethics and take an ethics course or courses which focus on ethical thinking and decision making. He would also benefit from an opportunity to discuss such complex cases with experienced colleagues.

## Considerations

- The Reviewee appears to be providing simultaneous services to both a mother and daughter
- Loss of boundaries between individual work with each client and using information gained from one to inform services for the other; collection and use of information without consent
- Risking treatment relationship with daughter, violating trust, moving outside agreed upon objectives
- Unclear if any agreement about this was made



**Clinical Supervision and/or Consultation and/or Other Non-Direct Services (if Applicable) – Sample Questions to Consider:**

- Is the member providing clinical supervision and/or non-supervisory consultation and/or other non-direct services? If so, to how many individuals and to whom (i.e. supervised members, non-regulated individuals, regulated members of another college)?
- Is the member providing supervision and/or non-supervisory consultation and/or other non-direct services within the boundaries of their authorized areas of practice and/or populations?
- Is there a supervision and/or non-supervisory consultation agreement signed by the member and the supervisee/consultee for each supervision and/or non-supervisory consultation relationship?
- If the member is providing non-supervisory consultation, do they have a clear written agreement signed by all parties that ensures the understanding that they are not taking on responsibility for client care?
- Are supervision records being maintained in accordance with the Standards of Professional Conduct?
- How is the member monitoring services provided under their supervision? How frequently are they with supervisee(s)?
- Are clients being informed of the supervisory relationship, limits to confidentiality, and how to contact the member (supervisor)?
- Are any non-regulated supervisees providing clinical supervision and/or non-supervisory consultation to others?
- What system is in place to ensure proper clinical supervision and/or non-supervisory consultation and/or oversight of other non-direct psychological services?
- Do any supervisees work offsite? If yes, does the member have access to the client records?

**Overall Rating:**

Meets standards without any qualification	<input checked="" type="radio"/>
Would meet standards with minor modifications	<input type="radio"/>
Significantly below standards	<input type="radio"/>
Not Applicable	<input type="radio"/>

**Areas of Strength / Areas Requiring Ongoing Learning:**

Supervises psychometrist at Vital. Will only allow him to administer new tests if he has observed skillful administration. He provided copy of agreement and supervision record for review. Agreement contains all items required that are not already in the person's employment contact. Detailed documentation of regular supervision meetings showing that he is helping this individual develop as psychometrist. Has recently begun to allow psychometrist to analyze results and prepare first draft of report but reviews all scores and tabulations and develops own independent formulation before reviewing draft.

## Considerations

- Good supervisory practices observed
- Appropriate review of supervisee's work
- Attention to training
- Conducts independent reviews of data



**Areas of Strength/Areas Requiring Ongoing Learning not Included Above:**

A highly personable, non-defensive professional is open to constructive feedback.

We were impressed with how simply he had adapted the new requirement for a supervision agreement to his ongoing practice- his building upon the institutional contract with the psychometrist really simplified the process for constructing a supervision agreement and Serge will be adopting a similar practice.

**Recommendations:**

As discussed we believe Dr. Earnestley would benefit from refreshing his knowledge re: ethical thinking and decision making by reviewing the CPA Code of ethics and taking a course, or courses, that include information about professional boundaries, dual relationships, informed consent and confidentiality. It is likely that this could be done on-line via the CPA or APA. We also recommend that he establish a peer mentorship relationship with an experienced colleague to regularly discuss therapy cases, particularly those in which complex clinical and ethical issues, like those outlined above, can arise.

**Additional Comments:**

It was a pleasure to review this member's practice. He appears genuinely concerned about the welfare of his clients. The good quality of most of his work far outweighs the difficulties noted and it appears that he is receptive to our recommendations. We thanked him for his candour and for giving us good ideas with respect to implementing the new supervision requirements.

\_\_\_\_\_  
College Appointed Assessor's  
Signature

\_\_\_\_\_  
Member Nominated Reviewer's  
Signature

## Considerations

- Any additional areas believed to be relevant that were not covered by the previous domains may be discussed on the final page of the report.
- Suggestions or recommendations made to the Reviewee must be discussed and recorded in a constructive and collegial manner.
- Reviewees may agree to undertake suggestions or recommendations, but only the Committee holds the authority to require implementation.
- If the Committee agrees with recommendations made by reviewers, or decides to issue its own, the Reviewee will be informed directly following its consideration of the report.



# PAR Outcomes

The Committee will review the final PAR Report and any submissions made by the Reviewee to determine an outcome.





# Honorariums

- Assessors and Nominated Reviewers are not expected to participate in Peer Assisted Reviews for financial purposes. However, in recognition of their time and contributions to the profession, they will each receive a token one-day honorarium of \$325 upon completion of a review.
- Private practitioners acting as an Assessor or Nominated Reviewer who derive more than half of their income from self-employment may submit a claim for partial overhead allowance following a review.
- Should it be necessary to travel out of town to conduct a review, any travel expenses must be pre-approved by the College.
- Reimbursement of reasonable expenses necessary to complete a review will require documentation and/or receipts.
- Honorariums and expense reimbursement are subject to approval under College policy.



# Participation Value

- Opportunity for professional knowledge sharing
- Strengthen your peer network and benefit from an enriched local community of professionals
- Continuing Professional Development (CPD) hours: **Up to 10 hours from a completed Peer Assisted Review process may be applied under *CPD Section A: Professional Interaction and Interdisciplinary Activities*.**



# Questions and Support

If you have any questions or concerns when preparing to conduct a review, please do not hesitate to contact College staff for assistance.

E-mail: [qualityassurance@cpbao.ca](mailto:qualityassurance@cpbao.ca)

Telephone: 416-961-8817/ 1-800-489-8388 ext. 272

The Quality Assurance Committee thanks you for your participation.



COLLEGE OF  
PSYCHOLOGISTS AND  
BEHAVIOUR ANALYSTS  
OF ONTARIO