



COLLEGE OF  
**PSYCHOLOGISTS**  
OF ONTARIO

# MEETING OF THE COLLEGE COUNCIL

## 2021.03

**DATE: JUNE 18, 2021**

**TIME: 9:00AM - 2:00PM**

**LOCATION: TO BE HELD VIRTUALLY**

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# COUNCIL MEETING AGENDA

# 2021.03

**June 18, 2021**  
**9:00 AM to 2:00 PM**

AGENDA ITEM	TOPIC	ACTION	PAGE #	STRATEGIC DIRECTION*
.00	CALL TO ORDER			
.01	APPROVAL OF AGENDA & MINUTES			
.00A	Welcome of New and Returning Members	--	--	--
.00B	Election of Executive Committee and Officers	Decision	4	M8/M9
.01	APPROVAL OF AGENDA & MINUTES			
.01A	Review & Approval of Agenda	Decision	2	
.01B	Declarations of Conflicts of Interest	Discussion	--	
.01C	Review & Approval of Minutes - Council Meeting 2021.01 March 19, 2021	Decision	11	
.01D	Review & Approval of <b>IN CAMERA</b> <sup>1</sup> Minutes - Council Meeting 2021.01 March 19, 2021	Decision	--	
.01E	Review & Approval of <b>IN CAMERA</b> <sup>2</sup> Minutes - Council Meeting 2021.02 April 1, 2021	Decision	--	
.01F	Review of Action List	Discussion	18	
.02	CONSENT AGENDA ITEMS	Information		
.02A	Registrar & Executive Director's Report		20	
.02B	Committee Reports	--	--	--
	(1) Executive Committee Report		21	
	(2) Discipline Committee		22	
	(3) Quality Assurance Committee		23	
	(4) Client Relations Committee		26	
	(5) Fitness to Practice Committee		27	
	(6) Finance & Audit Committee Report		28	
	(7) Jurisprudence and Ethics Examination Committee		32	
.02C	Staff Presentations		34	
.03	POLICY ISSUES			
.03A	Expansion of Funding for Therapy Eligibility	Decision	35	M9
.03B	Policy II-3(i) ICRC Terms of Reference/Role	Decision	42	M9
.03C	Policy II-3(ii) Release of Member's Response to Complainant	Decision	45	M4
.03D	Policy II-3(iv) Responding to Requests for Extensions to Make Written Submissions	Decision	49	M4
.03E	ABA Regulation - Update	Information	53	M7
.03F	College Governance Reform	Discussion	90	M9

<sup>1</sup> Materials Not Included in Public Package – Personnel Matter

<sup>2</sup> Materials Not Included in Public Package – Discussion in Anticipation of Legal Advice

AGENDA ITEM	TOPIC	ACTION	PAGE #	STRATEGIC DIRECTION*
<b>.04</b>	<b>BUSINESS ISSUES</b>			
.04A	Registration Committee Quarterly Report	Information	93	M9
.04B	Inquiries, Complaints and Reports Committee Quarterly Report	Information	96	M9
.04C	Directors of Clinical Training Programs Meeting Report	Oral Report	--	--
.04D	Appointment of Signing Officers	Information	99	M9
<b>.05</b>	<b>STRATEGIC ISSUES</b>			
.05A	Strategic Direction Implementation: Chart Update	Discussion	100	All
<b>.06</b>	<b>OTHER BUSINESS</b>			
.06B	Next Council Meeting: <ul style="list-style-type: none"> <li>September 10, 2021</li> </ul>	Information	--	--
.06C	Proposed Council Meeting: <ul style="list-style-type: none"> <li>December 17, 2021</li> </ul>	Decision	--	--
<b>.07</b>	<b>ADJOURNMENT</b>			

\*In accomplishing our Mission, the College promotes excellence in the practice of psychology by:

M1 - *Enforcing standards fairly and effectively through: Developing, establishing and maintaining standards of qualifications for individuals seeking registration,*

M2 - *Enforcing standards fairly and effectively through: Developing, establishing and maintaining standards of practice and professional ethics for all members,*

M3 - *Enforcing standards fairly and effectively through: Developing, establishing and maintaining standards of knowledge and skill and programs to promote continuing evaluation, competence and improvement among members;*

M4 - *Communicating clearly and effectively with stakeholders, particularly applicants, members and the public;*

M5 - *Supporting and assisting members to meet high standards;*

M6 - *Responding to changing needs in new and emerging practice areas;*

M7 - *Collaborating in shaping the regulatory environment;*

M8 - *Acting in a responsibly transparent manner; and,*

M9 - *Advancing the Council's governance practices.*

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## BRIEFING NOTE

2021.03.00B

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### JUNE 2021 COUNCIL MEETING

## EXECUTIVE COMMITTEE ELECTIONS 2021/2022

### STRATEGIC DIRECTION REFLECTION

*Acting in a responsibly transparent manner; Advancing the Council's governance practices.*

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### PROCEDURE

The first order of business at the Council meeting will be the election of the Executive Committee for 2021/2022. The elections are administered by the Registrar.

As set out in *By-law 21: Committee Composition* [21.1(1)]:

The Executive Committee shall be composed of:

- (a) four members of the Council who are members of the College;
- (b) both titles shall be represented among the members in section (a); and,
- (c) two members of the Council appointed to the Council by the Lieutenant Governor in Council

Given that the Council meeting is being held by Zoom, the procedure for the Executive Elections necessarily will be conducted virtually.

The College has received nominations for all but one Executive position. In keeping with section 4.7 of *By-law 4: Election of Members of the Executive Committee* further nominations are only accepted if there is no nominee for a position. Therefore, a number of positions will be acclaimed as shown below.

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### CANDIDATES FOR POSITIONS

President:	Wanda Towers	Acclaimed
Public Member of Council:	Paul Stopciati Scott Warnock	Acclaimed Acclaimed
Vice-President:	Paula Conforti* Marjory Philips*	One to be elected
Member of the College:	Paula Conforti* <u>or</u> Marjory Phillips* Nomination from Floor	Two to be elected

\*Note that Paula Conforti and Marjory Philips have each indicated that they wish to run for the position of "Member of the College" if they are unsuccessful in the election for Vice-President.

Prior to the balloting, Council members will have the opportunity to pose questions to each candidate for a maximum of 10 minutes. The opportunity to ask questions will be available for all members seeking a position on the Executive, including those who are acclaimed.

An election will be held for the position of “Vice-President”. The unsuccessful candidate will then run for the position of “Member of the College” against other members nominated from the floor. There are two positions available. If there is only one nomination from the floor, then both will be acclaimed. If there is more than one nomination, an election will be held.

If there is position for which there are three Council members running. Two rounds of voting may be necessary unless one candidate receives a majority of the votes cast on the first ballot. If a second round is necessary, it will be between the two candidates receiving the highest number of votes.

### **Voting**

Voting will be conducted using SurveyMonkey. At the appropriate time, each Council member will be sent the SurveyMonkey link and asked to indicate their choice.

**NOTE:** *It is very important that all Council members have access to their email so they can receive the SurveyMonkey ballot and vote promptly.*

On the ballot, Council members will be asked to enter their name and indicate their choice. When the responses are in, Caitlin will review the summary page only. This page provides the number of voters and the number of votes received by each candidate. Should the number of voters be less than the number of eligible voters, Caitlin can access the names of the voters without viewing their choice. This will enable her to know whose vote has not been received and to contact them to vote. Once the voting is complete, Council will be asked for a motion to destroy the ballots which in this case will be to delete the survey and responses.

In order to optimize Council time, once the voting begins, the President will take over as Chair and begin the regular meeting with the voting results or the need for a second vote taking place between agenda items.

As required by *By-law 4: Election of Members of the Executive Committee* each candidate has provided a biographical statement and candidate statement. These are attached.

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### **ATTACHMENTS**

Biographical Statement and Candidate Statements (presented alphabetically)

- Paula Conforti
- Marjory Phillips
- Paul Stopciati
- Wanda Towers
- Scott Warnock

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### **CONTACT FOR QUESTIONS**

Dr. Rick Morris, Registrar & Executive Director

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## EXECUTIVE COMMITTEE STATEMENT OF INTEREST

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### **Paula Conforti, D.C.S., C. Psych. Assoc., RP, PhD (c), - Vice-President or Professional Member**

#### Expression of Interest

I would welcome your support in granting me the opportunity to serve on Executive as the Vice-President, and if unsuccessful, as the Director at Large. I recognize I am relatively new to College Council; however, I have observed College Council meetings for 3 years prior to serving on the Executive this past year. The College Council has recently taken on new initiatives and I would be pleased to assist in these endeavours. I will also strive to respectfully assist others in their advancements and will always maintain a high level of professional integrity.

#### Brief Biography

I began my career and training at the Hospital for Sick Children, moved to the Toronto District School Board while maintaining a private practice, and was the Chief Psychologist and Manager of Career, Education and Psychology at JVS Toronto. Due to my Managerial role at JVS Toronto, I became a member of the Association of Chief Psychologist for Ontario School Boards at that time. I am the past Vice-President of the OAPA. My current research interests are in early intervention/prevention, mental health literacy, suicidality across the lifespan with an emphasis on children/youth, and comprehensive school health frameworks. I am a professional and affiliated member of the Sunnybrook Research Ethics Board and a student at the University of Toronto pursuing a PhD. I have most recently been serving on the Registration, Fitness to Practice and Discipline Committees at the CPO and as an Oral Examiner.

#### Candidate's Statement

I have been fortunate to have great mentors and supervisors throughout my career who have guided and encouraged me to seek opportunities to expand my knowledge. Mentors and supervisors are often not shy to tell someone what they need to brush up on or where someone might be completely 'missing the boat' but they are often equally quick to acknowledge someone's skills. All experiences that I have had, have lent itself to shaping my approach as a member of College Council. I am not shy in suggesting where we have disagreement and have a critical eye on where we need to go without forgetting where we have been. I listen with an open mind to all sides before respectfully discussing a path.

I believe enhancing our discipline requires us to recognize the 'whole individual' that is, cognition, learning, and the body as a single system. This compels us to rethink how we might steer health care in the interest of public protection. To provide a simple explanation we might think about what we know of integrated treatment to help guide us. It has been substantiated that integrated treatment outperforms parallel or sequential treatment strategies. Knowing this, perhaps we need to mirror this integration in some form at the regulatory level. We often make note of psychotherapy or ABA being either conducted and/or supervised by members of our College. Could we have a system similar to Cancer Care Ontario/Ontario Health for mental health in Ontario? We have more associations than we have regulatory bodies, each with their own independent directions. The College is an extension of the government and assisting the government in streamlining care across the mental health landscape requires, I believe, a strong regulatory body whose College Council are comprised of members who are highly regarded in the clinician-scientist world. The differences in breadth of practice required for membership in the various Colleges almost dictates the years of training required. Our College regulates members who are in essence clinician scientists. Clinician-scientist training programs have lower enrollment and have remained a separate program within universities. Protection of the public includes bench to bedside translation, and I believe our College can be positioned in this regard to ensure the public is provided with high quality care by first understanding public need and then triaging that need to the required level of care. Is this the role of a regulator we might ask? If we distinguish ourselves from other regulatory bodies by guiding research that can enhance the way in which we work together, we are advancing mental health and the metrics that provide public protection.

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## EXECUTIVE COMMITTEE STATEMENT OF INTEREST

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### **Marjory Phillips, Ph.D., C.Psych., - Vice-President or Professional Member**

I would like to put forth my candidacy for the position of Vice-President, Council with the College of Psychologists of Ontario.

I value the role of the College in considering public interest and public protection for the profession of psychology. I have been an Academic Member on Council since 2019. I have been actively involved in many College committees, including ICRC (2009-2012), Registration (2016-2018; co-chair 2019-present), and Discipline (2019 – present). I have been an oral examiner since 2009 and have also had the privilege of serving on College subcommittees pertaining to recommendations for supervision guidelines (2014/15) and updating the Registration Supervision Resource Manual (committee chair, 2020/21). Through my work at the College, I have learned that we work best together to uphold high professional standards.

Trained in the clinical doctoral program at the University of Waterloo, I have implemented a scientist-practitioner model throughout my professional career and have actively pursued excellence in clinical practice, supervision, teaching, research, and program evaluation. I have worked as a clinical psychologist across several settings, including hospital, children's rehabilitation, community mental health, and academia. These experiences have provided opportunities to understand the role of Psychology in relationship to other professions and to the public, across sectors. Defining the unique contributions of the profession of psychology while also respecting the contributions of other professions is of paramount importance for public interest.

I believe that I bring valuable qualifications, competencies, and experiences to this leadership position. I have held positions of senior management and leadership throughout my career, beginning with leading a psychology hospital department, then advancing to multi-disciplinary programs and then progressing to leading organizations in roles as Clinical Director, Director of Research, and Executive Director. I have learned that leadership requires the articulation of a clear vision and purpose that is developed in collaboration with key stakeholders, and the organization and planning are essential skills to implement vision directives.

This continues to be a time of notable change for our profession of Psychology. Council and Executive, along with the various College committees, have challenging tasks to implement and move ahead on directives such as registering behavior analysts, assessing competencies in the controlled act of diagnosis, and working towards legislative changes with respect to title issues. I value the hard working and knowledgeable College staff who support the work, and along with professional and public members, I pledge to contribute thoughts, ideas, and action as we advance change and improvement.

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## EXECUTIVE COMMITTEE STATEMENT OF INTEREST

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### Paul Stopciati – Public Member

#### EXPRESSION OF INTEREST

I am writing to express my interest in serving another term on the Executive Committee of the Council of the College of Psychologists of Ontario. I recognize that such a position requires strong analysis and decision-making skills, persistent high performance, management, and effective management of direct reports. These are all skills that I have demonstrated throughout my 35-year career. Based on my experience, I know I can contribute my knowledge and work as a team member for the betterment of the Council and the College of Psychologists.

#### BIOGRAPHY

Paul is an accomplished professional with over 35 years of experience managing and driving high performance across multiple industries, including diverse roles in sales and senior management with Nabob Foods, Richelieu Hardware, and Bristol Myers-Squibb. In 2003 he moved into entrepreneurship and founded PES Commercial Cleaning Ltd. to advance commercial fire safety among a broad client base. Paul was instrumental in the success of two fundraising events for local causes while serving on the Board of Directors of the Northern Cancer Research Foundation. He was a founder of the Strokes for Hope Golf Classic, a charity tournament that raised over \$300,000 for cancer research over five years under his chairmanship. He also served as chair of the NHL Oldtimers' Hockey Game for four years. He has also served with other community organizations, including the Sudbury-Manitoulin Alzheimer Society and the Sunrisers Rotary Club.

Paul has been heavily involved in public safety work; he was appointed by the provincial government to the Greater Sudbury Police Services Board for a three-year term. He is a former member of the Ontario Provincial Police's Auxiliary Unit (Auxiliary Constable) as well as founding member Rainbow District Crime Stoppers.

In 2011, Paul was appointed to the Greater Sudbury Public Library Board. As a member of the Board, he oversaw the successful construction of the new South End Branch, which opened in July 2012, and the feasibility study of a new main branch downtown.

Most recent, on April 8, 2020 Paul was appointed to The Council of The College of Psychologist and re-appointed on April 9, 2021 for a period of 3 years ending April 9, 2024. Currently serving on the Executive Committee, Finance Committee, ICRC, and Discipline committee.

On October 1, 2021 Paul was appointed by The Ministry of The Attorney General to (Tribunals Ontario) as an Adjudicator.

Paul is fluent in both English and Italian. He is currently an active member of the Marchigiana Association of Sudbury as well as a 36-year member of the Knights of Columbus.



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## EXECUTIVE COMMITTEE STATEMENT OF INTEREST

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### **Wanda Towers, Ph.D., C. Psych., - President**

#### Biography

My satisfying career as a psychologist began with undergraduate training at the University of Toronto and graduate work at the University of Waterloo. I registered with the College of Psychologists of Ontario (CPO) in 1998 and later expanded my area of competence, which now includes a clinical and rehabilitation focus with adults and seniors.

I began work at Baycrest Centre for Geriatric Care during my doctoral training and remained for a decade. I gained experience not only in assessment and intervention, but also in consultation, supervision of interns, speaking at rounds, conferences or workshops, and authoring materials for various program areas. After two years working with adults with serious burns and amputations at St. John's Rehabilitation Hospital, private practice opportunities drew me north to Barrie. I have worked on my own and with colleagues in group practices since 2006. I value the opportunities to consult and connect with colleagues that group practice offers.

I enjoy teaching, supervision and board/committee work as an extension to my clinical practice. I am an Adjunct Faculty Supervisor at University of Waterloo, providing supervision for clinical psychology graduate students. In the past, I've taught undergraduate psychology courses at Tyndale University; participated as a public member on the Placement Coordination Services of York Region Board; and represented my profession on the Senior Support Program Advisory Board and the Planning Committee for the Apotex Centre, Baycrest.

My involvement in the CPO's regulatory process began when I became an Oral Examiner for the College and a Peer Reviewer for the College's Quality Assurance Program in 2013. These experiences were positive ones and led me to seek Registration Committee engagement and ultimately election as a Professional Member of Council. I am beginning my third year as an elected member of Council. Last year, I was privileged to work as Co-Chair of the Registration Committee and an elected Professional Member of the Executive Committee.

#### Candidate Statement

The College is always responding and adapting to change as Council and staff work to fulfill their public protection mandate. The next year is shaping up as one where change will define us. The College of Psychologists will expand to include Applied Behaviour Analysts, while efforts to discontinue registration of Psychological Associates while granting the title Psychologist to those registered at that time continue. Goals to respond to the changing face of a pandemic and more effectively implement decisions with equity, diversity and inclusion in mind are priorities. At such a time of change, I believe that my willingness to communicate in a transparent manner, while asking questions to clarify issues will facilitate goal setting and attainment. Working collaboratively with members of Council, Committees, the Registrar, Deputy Registrar and staff members as an integral team to move forward in this change focused year will help to ensure our success. I will bring an informed, knowledgeable and respectful voice to deliberations at all levels. I am committed to lead through this time of change, persisting with appropriate flexibility to meet the demands of the role of president. Thank you.

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## EXECUTIVE COMMITTEE STATEMENT OF INTEREST

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### **Scott Warnock - Public Member**

#### Expression of Interest

I am writing to express my interest on serving on the Executive Committee of the College of Psychologists of Ontario. I recognize that this position requires a certain skill set. Having been involved in municipal politics for 21 years and over 12 years on the Board of Health at the Simcoe Muskoka District Health Unit I have developed the skills to make strong decisions analytically, balance a busy schedule, maintain a high level of professionalism and accountability and an effective management style. Based on my past experience and my work with the college committees that I currently serve on (Discipline and ICRC) and the Behaviour Analyst Working Group, I feel that I have a great deal to contribute to the Executive Committee for the betterment of the Council and the College of Psychologists.

#### Biography

During his almost 50 years in various professional roles Scott has proven to be a strong communicator, a pragmatic thinker and a strong advocate for Health Care in Ontario. His broadcasting career was spent in Central Ontario and during this time he developed a strong sense of community and the role that the individual can play in it.

In 1997 Scott left Broadcasting to pursue a career in municipal politics. During the next 21 years Scott served on Tay Township Council. Scott was elected to six terms in office, the final three as Mayor. He also served as a member of Simcoe County Council for 15 years and 12 years as a member of the Board of Health of the Simcoe Muskoka District Health Unit, including two as Chair.

Scott played an important part in the amalgamation of Newmarket Hydro and Tay Hydro. His role as shareholder on the Board of Directors meant that Scott was responsible for protecting the Township's financial interest while at the same time developing a growth strategy for the utility. In 2018 Newmarket Tay Power purchased the Midland PUC just before Scott retired from politics.

Scott currently is the Executive Director of the Huronia Community Foundation. The organization has provided over 3.5 million dollars to local charities and non-profit organizations over the last 20 years. Over his 40 years in North Simcoe Scott has hosted countless fundraising events, served as President of both the Big Brothers of Midland-Penetanguishene and Community Reach North Simcoe and continues to be a volunteer driver for the Canadian Cancer Society.

Scott was awarded the Queen's Diamond Jubilee medal in 2013 and this year was selected as one of 10 recipients of the Inspirational People's Award from the Cultural Alliance of North Simcoe for his four decades of service and being champion for the local communities (Midland, Penetanguishene, Tiny and Tay).

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## COUNCIL MEETING

## 2021.01

To view the Meeting Materials and Briefing Notes corresponding to these Minutes please click [here](#).

### March 19, 2021

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#### PRESENT:

**Michael Grand**, Ph.D., C.Psych., President  
**Denise Milovan**, Ph.D., C.Psych., Vice-President  
**Paula Conforti**, Dip.C.S., C.Psych.Assoc.  
**Janice Currie**, Ph.D., C.Psych.  
**Joyce Isbitsky**, Ph.D., C.Psych.  
**Marilyn Keyes**, Ph.D., C.Psych.  
**Nadia Mocan**, Public Member  
**Melanie Morrow**, M.A., C.Psych.Assoc.  
**Adrienne Perry**, Ph.D., C.Psych.  
**Marjory Phillips**, Ph.D., C.Psych.  
**Philip Ricciardi**, Ph.D., C.Psych.  
**Paul Stopciati**, Public Member  
**Nancy Tkachuk**, Public Member  
**Wanda Towers**, Ph.D., C.Psych.  
**Scott Warnock**, Public Member  
**Jessy Zita**, Public Member

#### REGRETS:

**Graeme Goebelle**, Public Member

#### STAFF:

**Rick Morris**, Ph.D., C.Psych., Registrar & Executive Director  
**Barry Gang**, MBA, Dip.C.S., C.Psych.Assoc., Deputy Registrar & Director of Professional Affairs  
**Zimra Yetnikoff**, Director, Investigations & Hearings  
**Lesia Mackany**, Director, Registration  
**Stephanie Morton**, Manager, Corporate Services  
**Caitlin O'Kelly**, Assistant to the Registrar, Recorder

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### 2021.01.00 CALL TO ORDER

The President called the meeting to order at 9:00AM. The meeting was held virtually by Zoom and livestreamed on YouTube.

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42 **2021.01.01 APPROVAL OF THE AGENDA AND MINUTES**

43

44 **.01A APPROVAL OF AGENDA**

45 Item .04G The Registrar's Performance Review will be conducted as the last order of business. The Council  
46 will go IN CAMERA to discuss this item and then adjourn the meeting when this item has concluded.

47

48 **It was MOVED Towers**

49 **That the agenda for the Council Meeting be approved as amended.**

**CARRIED**

50

51 **.01B DECLARATIONS OF CONFLICTS OF INTEREST**

52 The President asked members of Council if there were any conflicts of interest regarding the items on the  
53 agenda. No conflicts of interest were declared. The President reminded Council members that this should  
54 be considered throughout the meeting and declarations made if appropriate.

55

56 **.01C MINUTES FROM THE COUNCIL MEETING 2020.04 DECEMBER 11, 2020**

57

58 **It was MOVED Currie**

59 **That the minutes from the Council Meeting 2020.04 of December 11, 2020 be approved as presented.**

**CARRIED**

60

61 **.01D REVIEW OF ACTION LIST**

62 The Council reviewed the Action List from the minutes of the previous meeting and noted items that were  
63 completed, outstanding or on the agenda at this meeting.

64

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65 **2021.01.02 CONSENT AGENDA**

66 The Consent Agenda was received.

67

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68 **2021.01.03 POLICY ISSUES**

69

70 **.03A POLICY I-5: CONFIDENTIALITY OBLIGATIONS & HANDLING OF CONFIDENTIAL MATERIALS**

71 The Deputy Registrar provided the Council with a Briefing Note and an amended *Policy I-5: Confidentiality*  
72 *Obligations & Handling of Confidential Materials* for review. There were minor amendments being made  
73 to clarify the language regarding the use of unsecured public Wi-Fi for College business.

74

75 **It was MOVED Perry**

76 **That the amended *Policy I-5: Confidentiality Obligations & Handling of Confidential Materials* regarding**  
77 **use of unsecured public Wi-Fi for College business, be approved.**

**CARRIED**

78

79 **Action Item Staff**

80 Update *Policy I-5: Confidentiality Obligations & Handling of Confidential Materials* in the College's *Policy*  
81 *and Procedures Manual.*

82

83 **.03B LANGUAGE OF CLINICAL RECORDS**

84 The Deputy Registrar provided the Council with a Briefing Note and proposed amendments to the  
85 *Standards of Professional Conduct, 2017. The Personal Health Information Protection Act, 2004 (PHIPA)*  
86 gives clients/patients the statutory right to access their personal health information. In satisfying this  
87 requirement, there appears to be no available jurisprudence regarding whether a health professional  
88

89 must provide access in a language which is understandable to the client. The Client Relations Committee  
 90 reviewed this matter and is of the opinion that it is in the public interest to ensure that personal health  
 91 information is available in a language understandable to the client. Council reviewed and agreed to the  
 92 proposed amendments.

93  
 94 **It was MOVED Stopciati**

95 **That the Principle 9 and Principle 11 of the *Standards of Professional Conduct, 2017* be amended as**  
 96 **follows:**

- 97 • **Principle 9.2 *Individual Client Records* be amended by adding 6) *A member must explain or interpret***  
 98 ***a record written in a language other than that in which the service was provided, if requested by a***  
 99 ***client; and***
- 100 • **Principle 11.2.2 be amended to specify that a member may charge a fee for the translation of**  
 101 **records. CARRIED**

102  
 103 **Action Item Staff**

104 Update the *Standards of Professional Conduct, 2017*.

105  
 106 **.03C POLICY II-5(IV): CONTINUING PROFESSIONAL DEVELOPMENT PROGRAM AND AUDIT CRITERIA FOR**  
 107 **EXEMPTION OR DEFERRAL**

108 The Deputy Registrar provided the Council with a Briefing Note and draft *Policy II – 5(iv): Continuing*  
 109 *Professional Development Program Audit: Criteria for Exemption or Deferral*. This draft policy sets out  
 110 consistent and transparent criteria to ensure fair principles are applied in responding to members'  
 111 requests for deferrals.

112  
 113 **It was MOVED Phillips**

114 **That draft *Policy II – 5(iv): Continuing Professional Development Program Audit: Criteria for Exemption***  
 115 ***or Deferral* be approved. CARRIED**

116  
 117 **Action Item Staff**

118 Add *Policy II – 5(iv): Continuing Professional Development Program Audit: Criteria for Exemption or*  
 119 *Deferral* in the College's *Policy and Procedures Manual*.

120  
 121 **.03D QUALITY ASSURANCE REQUIREMENTS FOR VISITING INTERIM AUTONOMOUS PRACTICE**  
 122 **MEMBERS**

123 The Deputy Registrar provided the Council with a Briefing Note and draft *Policy II-5(iii): Quality Assurance*  
 124 *Requirements for "Visiting" Members with a Limited Certificate of Registration for Interim Autonomous*.  
 125 This policy establishes transparent and appropriate Quality Assurance requirements for out-of-province  
 126 individuals temporarily registered to provide psychological services to their clients located in Ontario.

127  
 128 **It was MOVED Keys**

129 **That *Policy II-5(iii): Quality Assurance Requirements for "Visiting" Members with a Limited Certificate***  
 130 ***of Registration for Interim Autonomous* be approved. CARRIED**

131  
 132 **Action Item Staff**

133 Add *Policy II-5(iii): Quality Assurance Requirements for "Visiting" Members with a Limited Certificate of*  
 134 *Registration for Interim Autonomous* in the College's *Policy and Procedures Manual*.

136 **.03E POLICY II-5(I): QUALITY ASSURANCE COMMITTEE TERMS OF REFERENCE**

137 The Deputy Registrar provided the Council with a Briefing Note and amended *Policy II-5(i): Quality*  
 138 *Assurance Committee Terms of Reference*. Minor amendments are suggested to provide clearer  
 139 expectations with respect to the time commitment associated with Committee participation.

140  
 141 **It was MOVED Currie**

142 **That *Policy II-5(i): Quality Assurance Committee Terms of Reference/Role* be amended to specify that**  
 143 **three-person Panels of the Committee will normally meet three times per year, or as required.**  
 144 **CARRIED**

145  
 146 **Action Item Staff**

147 Update *Policy II-5(i): Quality Assurance Committee Terms of Reference/Role* in the College's *Policy and*  
 148 *Procedures Manual*.

150 **.03F RETIRED CERTIFICATE HOLDERS AND PERMITTED ACTIVITIES**

151 The Registrar provided the Council with a Briefing Note discussing a recommendation to expand the  
 152 activities permitted for members holding a Retired Certificate of Registration. Council agreed that these  
 153 members should now be permitted to teach psychology classes so long as this does not include  
 154 supervision of student's clinical work.

155  
 156 **It was MOVED Perry**

157 **That members holding *Retired Certificates of Registration* be permitted to teach psychology classes; not**  
 158 **to include supervision of student's clinical work.** **CARRIED**

160 **.03G COLLEGE PERFORMANCE MANAGEMENT FRAMEWORK**

161 The Registrar provided the Council with the draft *College Performance Management Framework (CPMF)*  
 162 Report. The *CPMF*, developed by the Ministry of Health, was discussed previously at the Council meeting  
 163 held in December 2020. It sets out performance standards for Ontario's 26 health regulatory Colleges.  
 164 The *Framework*, set out in a standard format, was to be completed by March 31, 2021. The Council  
 165 reviewed the completed draft *CPMF* and endorsed it for submission to the Ministry and posting on the  
 166 College website.

167  
 168 **It was MOVED Isbitsky**

169 **That the Council approve the *College Performance Management Framework Report* for submission to**  
 170 **the Ministry of Health and posting on the College website.** **CARRIED**

171  
 172 **Action Item Staff**

173 Submit the *College Performance Management Framework Report* to the Ministry of Health and post on  
 174 the College website.

176 **.03H ABA REGULATION AND COLLEGE COUNCIL COMPOSITION**

177 The Registrar provided the Council with a Briefing Note on the status of the regulation of Applied  
 178 Behaviour Analysis. The Council discussed the regulation of Behavior Analysts within the governance  
 179 structure of the College. It was recognized that this will necessitate amendments to the *Psychology*  
 180 *Act, 1991* as the College undertakes the governance of two distinct professions; Psychology and  
 181 Applied Behaviour Analysis. A change to be considered relates to the composition of the College

182 Council to ensure adequate representation of members from both Psychology and Applied Behaviour  
183 Analysis.

184

185 **It was MOVED Towers**

186 **That it be recommended to the Ministry of Health that the College Council composition be set out as**  
187 **follows to ensure appropriate regulation for the professions of Psychology and Applied Behaviour**  
188 **Analysis:**

189 **Psychology Professional Members – at least 5 and no more than 7**

190 **Behaviour Analysts – at least 3 and no more than 5**

191 **Public Members – at least 7 and no more than 10**

192 **Academic Members – at least 2 and no more than 4**

**CARRIED**

193

194 **Action Item Registrar**

195 Provide the College Council composition recommendation to the Ministry of Health.

196

197 **2021.01.04 BUSINESS ISSUES**

198

199 **.04A REGISTRAR & EXECUTIVE DIRECTOR'S REPORT**

200 The Council reviewed the Registrar's Report for the third quarter. There were no questions or comments.

201

202 **.04B REGISTRATION COMMITTEE QUARTERLY REPORT**

203 The Council reviewed the third quarter report from the Registration Committee noting the:

204

- Supervision working group continues to meet
- Committee is reviewing the Oral Examinations process. In this review, they will consider the need to test CFTA applicants on the controlled act of communicating a diagnosis.

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208 **.04C INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE QUARTERLY REPORT**

209 The Council reviewed the third quarter report from the Inquiries, Complaints and Reports Committee.

210 There were no questions or comments.

211

212 **.04D PROPOSED BUDGET JUNE 1, 2021 – MAY 31, 2022**

213 The Registrar provided the Council with the proposed budget for the fiscal year June 1, 2021 to May 31,

214 2022. He reported that the budget had already been reviewed by the Finance and Audit Committee at its

215 meeting on February 1, 2021 and by the Executive Committee on February 12, 2021. Both Committees

216 recommended its adoption. The proposed budget anticipates a deficit in the amount of \$416,387. In

217 discussing this proposed deficit, Council questioned the possible need for a membership fee increase. It

218 was noted that fees have not been increased since 2002. The Finance and Audit Committee will

219 be looking at this at their August 2021 meeting and will bring a recommendation to the Council

220 meeting in September.

221

222 **It was MOVED Stopciati**

223 **That the Budget for 2021-2022 be approved as presented.**

**CARRIED**

224

225 **.04E PREMISES RESERVE FUND REDUCTION**

226 The Registrar provided the Council with a Briefing Note regarding the need to approve a

227 reduction in the Premises Reserve Fund related to funds spent in the recent office renovations.

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**It was MOVED Phillips  
That \$772,258 be removed from the Premises Reserve Fund to account for expenditures related to the  
office leasehold improvements. CARRIED**

**.04F NOTICE: EXECUTIVE COMMITTEE ELECTIONS/COUNCIL APPOINTMENTS**

The Registrar provided the Council with copies of *By-law 4: Election of Members of Executive Committee* and *By-law 5: Selection of Committee Chairs and Committee Members* and advised Council of the process for seeking election to the Executive Committee. Council was also informed that a Call for Interest for Committee appointments will be sent to the general membership and that Council members also will be asked to identify their Committee preferences.

**.04G PRESIDENT'S REPORT**

The President thanked those Council members whose terms are expiring prior to the Council meeting in June; Dr. Denise Milovan, Dr. Janice Currie, and Ms. Jessy Zita. The Vice-President thanked Dr. Michael Grand for his efforts and contributions on behalf of the College in many capacities including President for the past two years. Dr. Grand term as President as well as his term as an academic member of Council end prior to the next meeting of Council.

**.04H REGISTRAR'S PERFORMANCE REVIEW – IN CAMERA**

This agenda item was discussed IN CAMERA in the absence of the Registrar, the Recorder, and all other non-Council individuals in attendance. The Minutes for this item were taken by the President.

**It was MOVED Towers  
That the Council go IN CAMERA to discuss the Registrar's Performance Review. CARRIED**

At the end of the IN CAMERA meeting,

**It was MOVED Warnock  
That the IN CAMERA was ended. CARRIED**

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**2021.01.05 STRATEGIC ISSUES**

**.05A STRATEGIC DIRECTION IMPLEMENTATION UPDATE**

The Registrar provided the Council with the updated *Strategic Direction Implementation Table*. This table is used to chart the work undertaken and accomplished in fulfilling the College's Strategic Direction. Items added since the Council Meeting of December 11, 2020 were shown in **Bold**.

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**2021.01.06 OTHER BUSINESS**

**.06A NEXT COUNCIL MEETINGS:**

- June 18, 2021
- September 10, 2021



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275 **2021.01.07 ADJOURNMENT**

276 There being no further business,

277

278 **It was MOVED Warnock**

279 **That the Council Meeting be adjourned.**

**CARRIED**

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281 The Council Meeting was adjourned at 1:28PM.

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TBD President

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TBD Vice-President

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293 **Minutes approved at the Council Meeting on June 18, 2021**

DRAFT



## ACTION LIST

2021.03.01F

### COUNCIL MEETING 2021.01 March 19, 2021

Item:	Responsibility:	Action:	Status:
2019.03.03C	College	To pursue amendments to O.Reg. 74/15 - Registration under the <i>Psychology Act, 1991</i> to discontinue Master's level registration and at that time, grant the title Psychologist to all existing Psychological Associates.	In Process
2020.02.04E	Registrar	Work with Committee Chair and staff liaison to plan and implement the Discipline Committee audit for 2020-2021.	Completed
2020.04.03A	Registration Committee	Establish a process to assess all <i>Canada Free Trade Agreement (CFTA)</i> candidates on their competence to perform the controlled act of communication of a diagnosis.	In Process; being done in conjunction with Oral Examination review
2021.01.03A	Staff	Update <i>Policy I-5: Confidentiality Obligations &amp; Handling of Confidential Materials</i> in the College's <i>Policy and Procedures Manual</i> .	Completed
2021.01.03B	Staff	Update the <i>Standards of Professional Conduct, 2017</i> .	Completed
2021.01.03C	Staff	Add <i>Policy II – 5(iv): Continuing Professional Development Program Audit: Criteria for Exemption or Deferral</i> in the College's <i>Policy and Procedures Manual</i> .	Completed
2021.01.03D	Staff	Add <i>Policy II-5(iii): Quality Assurance Requirements for "Visiting" Members with a Limited Certificate of Registration for Interim Autonomous</i> in the College's <i>Policy and Procedures Manual</i> .	Completed

Item:	Responsibility:	Action:	Status:
2021.01.03E	Staff	Update <i>Policy II-5(i): Quality Assurance Committee Terms of Reference/Role</i> in the College's <i>Policy and Procedures Manual</i> .	Completed
2021.01.03G	Staff	Submit the <i>College Performance Management Framework Report</i> to the Ministry of Health and post it on the College website.	Completed
2021.01.03H	Registrar	Provide the College Council composition recommendation to the Ministry of Health for the regulation of Applied Behaviour Analysts.	Completed

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## REPORT TO COUNCIL

2021.03.04A

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### JUNE 2021 COUNCIL MEETING

#### REGISTRAR & EXECUTIVE DIRECTOR'S REPORT

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##### PUBLIC MEMBER UPDATE

I am pleased to announce that public members of Council Ms. Nadia Macon and Mr. Scott Warnock have been reappointed for three years, effective in late September when their current one-year terms end. Although becoming an effective member of Council has a very steep learning curve, both Ms. Macon and Mr. Warnock quickly became familiar with the role of the public member on Council and have contributed greatly in their short time with us. We certainly look forward to their continued valuable contributions to the work of the College.

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##### BARBARA WAND SEMINAR

The Barbara Wand Seminar took place on June 10<sup>th</sup> when we were pleased to have a very informative and important presentation by Allison Kirschbaum, Ph.D., entitled *Ethical Practice in the Context of Sexual and Gender Diversity*. The Seminar was live streamed to over 2300 registrants; one of the largest number of participants we have had. I want to thank Mr. Barry Gang, Deputy Registrar and Ms. Stephanie Morton, Director, Corporate Services for all their work in organizing the Seminar and making it possible for so many of us to participate. This Seminar as well as those held previously may be found in the [Barbara Wand Seminar Archives](#).

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##### COMMITTEE APPOINTMENTS

On May 25, 2021, the Committee Appointments Working Group met to undertake the first review of applications submitted by members of Council and the profession expressing interest in College Committee work for 2021-2022. The Working group reviewed the 94 responses received and prepared a recommended slate of appointments for the Executive Committee to consider at the meeting which will immediately follow the June Council meeting.

In reviewing the statements of interest, the Working Group considered variables such as areas of practice, populations served, and length of membership, etc. For the first time this year, the Working Group was able to consider equity, diversion and inclusion as members were asked, "Is there anything that you would bring to the Committee that would contribute to our goal of increasing Equity, Diversity, and Inclusion representation at the College?" In considering recommendations for Committee appointments, the Working Group considered the need to ensure continuity of Committee members while also providing the opportunity for new members to join a Committee.

Committee members for 2021-2022 will be notified of their appointments during the week of June 21<sup>st</sup>.

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##### CONTACT FOR QUESTIONS

Dr. Rick Morris, Registrar & Executive Director

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## REPORT TO COUNCIL

2021.03.02B(1)

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**FOURTH QUARTER, MARCH 1, 2021 – MAY 31, 2021**

### EXECUTIVE COMMITTEE

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#### COMMITTEE MEMBERS:

Michael Grand, Chair, Professional Member of Council  
Paula Conforti, Professional Member of Council  
Graeme Goebelle, Public Member of Council  
Denise Milovan, Professional Member of Council  
Paul Stopciati, Public Member of Council  
Wanda Towers, Professional Member of Council

#### STAFF

Rick Morris, Registrar & Executive Director  
Barry Gang, Deputy Registrar & Director of Professional Affairs  
Caitlin O’Kelly, Assistant to the Registrar

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#### MEETINGS

The Executive Committee met on May 20, 2021.

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#### ITEMS TO COUNCIL FOR DECISION

The Executive Committee discussed the following items which are being brought forward for Council consideration:

- Expansion of Funding for Therapy Eligibility
- Amendments to *Policy II-3(i) ICRC Terms of Reference/Role*
- Amendments to *Policy II-3(ii) Release of Member’s Response to Complainant*
- Amendments to *Policy II-3(iv) Responding to Requests for Extensions to Make Written Submissions*

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#### ACTIONS

The Executive Committee reappointed Dr. Marjory Phillips to the Council of the College of Psychologists of Ontario as an academic member for a two-year term.

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#### FOR INFORMATION

The Executive Committee undertook its quarterly review of Continuing the Provisions for Telepsychology Services for Out-of-Province Practitioners during COVID-19. The Executive considered the ongoing need for the provisions put in place to permit out-of-province practitioners to continue to provide service to their clients currently in Ontario due to COVID-19. It was determined that these provisions needed to continue. This will be reviewed again at the next Executive Committee meeting.

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#### SUBMITTED BY

Michael Grand, Ph.D., C. Psych., Chair

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## REPORT TO COUNCIL

2021.03.02B(2)

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**FOURTH QUARTER, MARCH 1, 2021 – MAY 31, 2021**

### DISCIPLINE COMMITTEE

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#### COMMITTEE MEMBERS:

Janice Currie, Council Member, Chair  
 Marilyn Keyes, Council Member, Vice-Chair  
 Paula Conforti, Council Member  
 Lynette Eulette, College Member  
 Robert Gauthier, College Member  
 Graeme Goebelle, Public Member  
 Michael Grand, Council Member  
 Jan Heney, College Member  
 Anthony Hopley, College Member  
 Joyce Isbitsky, Council Member  
 Sandra Jackson, College Member  
 Nina Josefowitz, College Member  
 Maggie Mamen, College Member

Denise Milovan, Council Member  
 Nadia Mocan, Public Member  
 Melanie Morrow, College Member  
 Mary Ann Mountain, College Member  
 Adrienne Perry, Council Member  
 Marjory Phillips, Council Member  
 Donna Reist, College Member  
 Paul Stopciati, Public Member  
 Wanda Towers, Council Member  
 Nancy Tkachuck, Public Member  
 Scott Warnock, Public Member  
 Jessie Zita, Public Member

#### STAFF SUPPORT:

Zimra Yetnikoff, Director, Investigations & Hearings  
 H  l  ne Th  berge, Senior Administrative Assistant

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#### REFERRALS TO DISCIPLINE

There were no referrals to the Discipline Committee in the fourth quarter.

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#### HEARINGS

There were no hearings held in the fourth quarter.

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#### ONGOING MATTERS

1. **Dr. Martin Rovers:** [https://members.cpo.on.ca/public\\_register/show/3067](https://members.cpo.on.ca/public_register/show/3067)

A referral was made to the Discipline Committee on June 29, 2020. The Pre-hearing Conference for this matter took place on December 7, 2020. The Hearing is scheduled for June 29, 2021.

2. **Dr. Darren Schmidt:** [https://members.cpo.on.ca/public\\_register/show/21702](https://members.cpo.on.ca/public_register/show/21702)

A referral was made to the Discipline Committee on July 14, 2020. A Pre-hearing Conference was held regarding this matter on February 1, 2021. The Hearing is scheduled for June 21-23, 2021.

3. **Dr. Augustine Meier:** [https://members.cpo.on.ca/public\\_register/show/1032](https://members.cpo.on.ca/public_register/show/1032)

A referral was made to the Discipline Committee on November 30, 2020. This matter is currently at the Pre-hearing Conference stage.

4. **Dr. Andr   Dessaulles:** [https://members.cpo.on.ca/public\\_register/show/2530](https://members.cpo.on.ca/public_register/show/2530)

A referral was made to the Discipline Committee on January 21, 2021. This matter is currently at the Pre-hearing Conference stage.

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#### SUBMITTED BY

Janice Currie, Ph.D., C.Psych., Chair

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## REPORT TO COUNCIL

2021.03.02B(3)

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**FOURTH QUARTER, MARCH 1, 2021 – MAY 31, 2021**

### QUALITY ASSURANCE COMMITTEE

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#### COMMITTEE MEMBERS

Michael Minden, Chair, College Member  
 Marilyn Keyes, Vice-Chair, Council Member  
 Katherine Green, College Member  
 David Howard, College Member  
 Joyce Isbitsky, Council Member  
 Lynn Laverdière-Ranger, College Member  
 Nancy Tkachuk, Public Member  
 Jessy Zita, Public Member

#### STAFF

Barry Gang, Deputy Registrar & Director of Professional Affairs  
 Julie Hahn, Quality Assurance Coordinator  
 Madeleine Lee, Administrative Assistant

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#### COMMITTEE ACTIVITY

##### Plenary Session

The Committee held a Plenary meeting on May 12, 2021. It reviewed all aspects of the Quality Assurance Program. Using survey data collected from participants in the various QA programs, as well as Committee members' own observations over the course of the year, the following priorities were established:

- Facilitate member engagement with self-assessment as a dynamic and ongoing process, as opposed to what some may perceive as limited to an obligatory duty to fill out forms every two years.
- Facilitate more direct connection between self-assessment and choices made for Continuing Professional Development activities.
- Simplifying the CPD credit system.

In considering the impact of the COVID-19 on many members throughout the past year, the Committee decided to continue to make an alternate Declaration available to those who, despite best efforts, were unable to fulfill all of the requirements due to the pandemic.

The Committee also recognized that restrictions on interpersonal contact prevented the completion of most in-person Peer Assisted Reviews (PAR). It was decided that until it is safe to resume in-person PARs, the focus of the Committee will be on addressing the sizeable backlog of matters. Completion of a PAR via technology will continue to be presented as an option for those wishing to participate virtually. This will be reviewed again at the beginning of 2022, when the Committee will reevaluate whether to select any additional members for review during the current fiscal year.

##### Panel Meetings:

Panels of the Committee met to consider cases on March 23 and April 29, 2021.

**SELF ASSESSMENT GUIDE (SAG)**

<b>Overview</b>		
Declarations due in 2020		2152
Declarations Received by Deadline		2115
Declarations Overdue		37
<b>Total SAG Reviews Planned</b>		<b>37</b>
	<b>Q4</b>	<b>YTD</b>
Reviews Completed by the Committee	5	29
Deferrals/Extensions Granted Under Exceptional Circumstances	0	3
<b>Ongoing Reviews Outstanding for 2020-2021</b>		<b>5</b>

During the fourth quarter, the Committee completed reviews of SAGs of five members. In all cases, the Committee determined that the members' SAGs had been completed in a satisfactory manner. The five remaining matters are currently before the Committee.

**PEER ASSISTED REVIEW (PAR)**

<b>Overview</b>		
Reviews carried over from previous years		40
Referred due to failure to comply with self-assessment requirements		0
Selected by random selection Fall 2020		5
Selected by stratified random selection Fall 2020		35
<b>Total PAR reviews planned for 2020/2021</b>		<b>80</b>
	<b>Q4</b>	<b>YTD</b>
Completed Peer Assisted Reviews	1	6
<b>Reviews Pending Scheduling</b>		<b>74</b>

Members who have been selected for a PAR, as well as Assessors and Reviewers, have been provided with the opportunity to participate in a PAR virtually. To date, two PARs have been conducted in this manner. One PAR report was received and reviewed by the Committee during the fourth quarter. Both the virtual nature of the experience and the results of the Review were reported as positive.

**CONTINUING PROFESSIONAL DEVELOPMENT AUDITS**

<b>Overview</b>		
Selected due to Failure to Declare Completion of CPD Requirements		24
Random Selection		25
Audits carried Over from Previous Years		2
<b>Total Audits Planned for 2020-2021</b>		<b>51</b>
	<b>Q4</b>	<b>YTD</b>
<b>Audits Completed - Outcomes</b>		
Met Program Requirements	10	38
Remedial Feedback	3	11
Refer to Assessor	0	1
Undertaking	0	1
<b>Total Audits Completed by Committee</b>	<b>13</b>	<b>51</b>
<b>Audits Outstanding for 2020-2021</b>		<b>0</b>



During the fourth quarter, the Committee audited the CPD records of 13 members. In 10 matters the Committee determined that the requirements of the CPD program had been met or exceeded. In three cases, the Committee provided feedback concerning the adequacy of information, sufficiency of documentation, and/or specificity of CPD goals set for the period reviewed.

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**SUBMITTED BY**

Michael Minden, Ph.D., C.Psych., Chair



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## REPORT TO COUNCIL

2021.03.02B(4)

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FOURTH QUARTER, MARCH 1, 2021 – MAY 31, 2021

### CLIENT RELATIONS COMMITTEE

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#### COMMITTEE MEMBERS

Kofi Belfon, Chair, College Member  
Janice Currie, Vice-Chair, Council Member  
Rosemary Barnes, College Member  
Emad Hussain, Public Member  
Nadia Mocan, Public Member  
Melanie Morrow, College Member  
Adrienne Perry, College Member  
Jessy Zita, Public Member

#### STAFF

Barry Gang, Deputy Registrar & Director of Professional of Affairs  
Julie Hahn, Practice Advisor & Quality Assurance Coordinator  
Madeleine Lee, Administrative Assistant

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#### COMMITTEE ACTIVITIES

The Committee met on March 11, April 12, and April 29, 2021. All meetings were held virtually.

Two new requests for Funding for Therapy and Counselling were reviewed and granted during this period. The Committee also drafted a policy for consideration by the Council to provide funding for therapy or counselling to clients who experience sexual abuse by non-member therapists or counsellors who are working under the supervision of College members. Those clients do not meet the eligibility requirements for under s. 85.7 of the Health Professions Procedural Code being schedule 2 of the *Regulated Health Professions Act, 1991*.

There are currently four individuals receiving funding under the College's Funding for Therapy and Counselling Program.

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#### SUBMITTED BY

Kofi Belfon, Ph.D., C.Psych., Chair



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## REPORT TO COUNCIL

2021.03.02B(5)

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**FOURTH QUARTER, MARCH 1, 2021 – MAY 31, 2021**

### **FITNESS TO PRACTICE COMMITTEE**

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**COMMITTEE MEMBERS:**

Philip Ricciardi, Chair, Council Member

Paula Conforti, Council Member

Duncan Day, College Member

Graeme Goebelle, Public Member

Julie Goldenson, College Member

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The Fitness to Practice Committee held no meetings during the fourth quarter.



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## REPORT TO COUNCIL

2021.03.02B(6)

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FOURTH QUARTER, MARCH 1, 2021 – MAY 31, 2021

### FINANCE AND AUDIT COMMITTEE

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#### COMMITTEE MEMBERS

Michael Grand, Chair, Council Member  
Janice Currie, Council Member  
Graeme Goebelle, Public Member  
Alana Holmes, College Member  
Paul Stopciati, Public Member

#### STAFF

Rick Morris, Registrar & Executive Director  
Barry Gang, Deputy Registrar & Director of Professional Affairs  
Stephanie Morton, Manager, Corporate Services  
Caitlin O’Kelly, Assistant to the Registrar

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#### COMMITTEE ACTIVITIES

The Finance and Audit Committee (FAC) met by teleconference on May 10, 2021. The FAC reviewed the *Unaudited Financial Statements* and *Variance Report* all to February 28, 2021; the end of the third quarter. In considering the *Statement of Revenue & Expenses*, the FAC reviewed the *Variance Report* which explained items that deviated from the budget by the level of materiality set by Council; items which exceeded the expected budget by \$5,000 or were underspent by \$10,000. The Committee was satisfied with the information presented and voted to receive the reports.

The memorandum from the Registrar & Executive Director confirming the remittances to the Canada Revenue Agency and the Ontario Employer Health Tax for the period December 1, 2020 to February 28, 2021 was received.

Based on the documents reviewed at this meeting, it is the view of the Committee that the College continues to operate on a sound financial basis.

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#### ATTACHMENTS

1. Statement of Revenue and Expenses to February 28, 2021
2. Balance Sheet to February 28, 2021 (unaudited)

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#### SUBMITTED BY

Michael Grand, Ph.D., C.Psych., Chair

**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO**  
**STATEMENT OF REVENUE & EXPENSES**

June 2020 through February 2021

	Annual Budget	Budget	YTD Actual	YTD \$ Variance	2020-2021 % YTD	Expected % YTD	% Variance YTD	Year End to 31 May-21
<b>REVENUE</b>	3,646,250.00	2,746,187.50	2,665,141.21	-81,046.29	73%	75%	-2%	3,564,204.00
<b>COST OF SALES</b>	335,702.00	287,589.00	181,011.48	-106,577.52	54%	86%	-32%	229,432.00
<b>GROSS MARGIN</b>	3,310,548.00	2,458,598.50	2,484,129.73	25,531.23	75%	74%	1%	3,334,772.00
<b>EXPENDITURES</b>								
<b>Governance</b>	99,575.00	72,181.25	27,676.44	-44,504.81	28%	72%	-45%	48,125.00
<b>Registration</b>	103,000.00	77,250.00	48,858.38	-28,391.62	47%	75%	-28%	84,000.00
<b>Client Relations, Communications &amp; Education</b>	33,675.00	25,256.25	5,640.00	-19,616.25	17%	75%	-58%	11,075.00
<b>Quality assurance</b>	50,641.00	37,980.75	7,900.00	-30,080.75	16%	75%	-59%	23,050.00
<b>Investigations and resolutions</b>	149,200.00	111,900.00	74,727.52	-37,172.48	50%	75%	-25%	107,000.00
<b>Hearings</b>	337,400.00	253,050.00	222,201.03	-30,848.97	66%	75%	-9%	328,325.00
<b>Liaison (Professional Organizations)</b>	37,695.00	32,295.00	13,555.78	-18,739.22	36%	86%	-50%	19,950.00
<b>Administration</b>	2,881,719.00	2,161,289.25	2,170,486.59	9,197.34	75%	75%	0%	3,023,168.52
<b>Total Expenditures</b>	3,692,905.00	2,771,202.50	2,571,045.74	-200,156.76	70%	75%	-5%	3,644,693.52
<b>EXCESS OF REVENUE OVER EXPENDITURES</b>	-382,357.00	-312,604.00	-86,916.01	225,687.99	23%	75%	-52%	-309,921.52

**The College of Psychologists of Ontario**  
**Balance Sheet Prev Year Comparison**  
 As of February 28, 2021

	Feb 28, 21	Feb 29, 20	\$ Change
<b>ASSETS</b>			
<b>Current Assets</b>			
<b>Chequing/Savings</b>			
10000 · Petty Cash	200.00	200.00	0.00
10100 · Bank	342,470.48	250,601.89	91,868.59
10250 · Cash Equivalents	3,535,657.35	1,437,172.82	2,098,484.53
<b>Total Chequing/Savings</b>	3,878,327.83	1,687,974.71	2,190,353.12
<b>Accounts Receivable</b>			
10400 · Accounts Receivable - Control	16,916.07	18,064.93	-1,148.86
<b>Total Accounts Receivable</b>	16,916.07	18,064.93	-1,148.86
<b>Other Current Assets</b>			
10300 · Short Term Investments	1,762,120.55	4,706,729.68	-2,944,609.13
10550 · Interest Receivable	546.19	552.71	-6.52
10600 · Prepaid Expenses	53,897.71	51,263.96	2,633.75
<b>Total Other Current Assets</b>	1,816,564.45	4,758,546.35	-2,941,981.90
<b>Total Current Assets</b>	5,711,808.35	6,464,585.99	-752,777.64
<b>Fixed Assets</b>			
<b>12000 · Furniture &amp; Equipment</b>			
12010 · Furniture & Equipment - Cost	52,815.39	55,768.81	-2,953.42
13000 · Accum Amort Furniture & Equip	-47,311.91	-52,656.64	5,344.73
<b>Total 12000 · Furniture &amp; Equipment</b>	5,503.48	3,112.17	2,391.31
<b>12100 · Computer Equipment</b>			
12110 · Computer Equipment - Cost	140,958.46	131,266.81	9,691.65
13100 · Accum Amort Computer Equipment	-116,537.84	-93,444.11	-23,093.73
<b>Total 12100 · Computer Equipment</b>	24,420.62	37,822.70	-13,402.08
<b>12200 · Leasehold Improvements</b>			
12210 · Leasehold Improvements - Cost	1,043,795.53	265,325.61	778,469.92
13200 · Accum Amort Leaseholds	-209,849.73	-164,616.43	-45,233.30
<b>Total 12200 · Leasehold Improvements</b>	833,945.80	100,709.18	733,236.62
<b>12300 · Website Development</b>			
12310 · Website Development - Cost	0.00	235,481.01	-235,481.01
13300 · Accum Amort Website Devt	0.00	-190,944.88	190,944.88
<b>Total 12300 · Website Development</b>	0.00	44,536.13	-44,536.13
<b>Total Fixed Assets</b>	863,869.90	186,180.18	677,689.72
<b>Other Assets</b>			
10302 · Long Term Investment	42,271.68	43,640.96	-1,369.28
<b>Total Other Assets</b>	42,271.68	43,640.96	-1,369.28
<b>TOTAL ASSETS</b>	<b>6,617,949.93</b>	<b>6,694,407.13</b>	<b>-76,457.20</b>

*These statements have been prepared based on information provided by management/owners. These statements are for internal purposes only and should not be relied on by third parties.*

	Feb 28, 21	Feb 29, 20	\$ Change
<b>LIABILITIES &amp; EQUITY</b>			
<b>Liabilities</b>			
<b>Current Liabilities</b>			
<b>Accounts Payable</b>			
21000 · Accounts Payable - Control	43,305.19	48,412.12	-5,106.93
<b>Total Accounts Payable</b>	43,305.19	48,412.12	-5,106.93
<b>Other Current Liabilities</b>			
21100 · Accounts Payable - Other	227,489.42	192,106.78	35,382.64
22000 · Employee Tax Deductions Payable	27,762.38	24,906.96	2,855.42
23000 · Prepaid Fees	855,731.00	831,007.21	24,723.79
24000 · Peer Mentorship - Clearing	-1,200.00	-10,644.74	9,444.74
<b>Total Other Current Liabilities</b>	1,109,782.80	1,037,376.21	72,406.59
<b>Total Current Liabilities</b>	1,153,087.99	1,085,788.33	67,299.66
<b>Total Liabilities</b>	1,153,087.99	1,085,788.33	67,299.66
<b>Equity</b>			
31000 · Retained Earnings	1,455,905.49	1,405,567.89	50,337.60
31100 · Investigtns&Hearing ReserveFund	850,000.00	850,000.00	0.00
31200 · Contingency Reserve Fund	1,000,000.00	1,000,000.00	0.00
31300 · Fee Stabilization Reserve Fund	1,000,000.44	1,000,000.44	0.00
31400 · Website&DatabaseDevtReserveFund	165,872.02	243,810.25	-77,938.23
31500 · Premises Reserve Fund	1,000,000.00	1,000,000.00	0.00
31600 · FairRegn Practices Reserve Fund	80,000.00	80,000.00	0.00
Net Income	-86,916.01	29,240.22	-116,156.23
<b>Total Equity</b>	5,464,861.94	5,608,618.80	-143,756.86
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<b>6,617,949.93</b>	<b>6,694,407.13</b>	<b>-76,457.20</b>

*These statements have been prepared based on information provided by management/owners. These statements are for internal purposes only and should not be relied on by third parties.*

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## REPORT TO COUNCIL

2021.03.02B(7)

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**FOURTH QUARTER, MARCH 1, 2021 – MAY 31, 2021**

### JURISPRUDENCE AND ETHICS EXAMINATION COMMITTEE (JEEC)

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#### COMMITTEE MEMBERS

Mary Ann Mountain (Chair), College Member  
 Audrey Cooley, College Member  
 Donna Ferguson, College Member  
 Tae Hart, College Member  
 Gilles Hébert, College Member

Michele Peterson-Badali, College Member  
 Pierre Ritchie, College Member  
 Carole Sinclair, College Member  
 Angela Troyer, College Member

#### STAFF SUPPORT:

Rick Morris, Ph.D., C.Psych., Registrar & Executive Director  
 Lesia Mackanyn, Director, Registration  
 Caitlin O’Kelly, Assistant to the Registrar

The JEEC met on April 19 and 20, 2021 (via Zoom) for two half day meetings with all members in attendance. The meeting on April 19 was primarily focused on the final evaluation reports for the November 2020 and March 2021 examinations. The Committee also met on May 6 and 7 to complete the item bank review and to review items from the item writing workshop held in January 2021. In addition, staff from Yardstick Assessment Strategies met with the Committee on April 19 to answer questions about their services. Yardstick is the contractor with whom the College has entered into an agreement to provide the Jurisprudence and Ethics Examination (JEE) online. In advance of this meeting, the Committee reviewed a video presentation from Yardstick that provided information on their services, which were later expanded on at the meeting on May 6, 2021. It was noted that there are additional services that Yardstick can offer which the College staff will be pursuing.

#### Jurisprudence and Ethics Examination – November 2020 and March 2021

The final report and addendum on the November 2020 examination were received and approved. Some technical issues were identified with some candidates’ results, primarily related to the French version of the exam. Three candidate whose initial results indicated a failure were found to have passed the examination. This issue has been addressed and a process put in place to minimize the potential for future technical errors in the examination item transfer from the College to the Yardstick software.

Ninety-three candidates wrote the examination, with a pass rate of 77%. Candidate comments on the post-exam survey indicated general approval with the switch to online administration, with most candidates citing no travel to the exam as the biggest advantage. Some candidates did experience technical difficulties, but most were happy with the response from the Yardstick proctors in helping them work through these.



The March 2021 exam was written by 119 candidates with a 90% pass rate. The candidate comments were similar to those received for the November 2020 exam. Responses to the technical issues that occurred on both exams have been added to the FAQ's on the College website. Candidate comments also typically include suggestions to increase the number of sample items and to be more specific about suggested resources for preparation. The Committee will review the list of resources and consider other documents that might be helpful.

#### French Translation of the JEEC

The review of the French translation by Drs. Jean Grenier and Gilles Hebert (JEE Committee member) is up to date for the current item bank and will be ongoing as new items are added.

#### Sample Items

Drs. Pierre Ritchie and Carole Sinclair have completed their initial work on the sample item bank. There are now 30 items in the bank with all items having been updated to ensure that they are consistent with current legislation and standards of practice. A number of items were retired. Dr. Marla Nayer, College Examination Consultant, has determined that the items in the sample item bank are proportionally close to meeting the blueprint criteria for a full exam.

#### Item Writing Workshop

An item writing workshop was held on January 11 and 12, 2021, over two half days via Zoom. Thirty-eight items were created by eight members of the College; five were members of the JEEC and three additional item-writers were recruited. On May 6 and 7 (two half days), the Committee reviewed the items and approved 21 of them for inclusion in the exam. Those items will be sent for translation before they are included in an examination probably in the spring of 2022.

#### Item Bank Review

Members of the Committee reviewed 76 items from the item bank on April 20, 2021. Items are reviewed on a 3-year cycle. This is an ongoing process to ensure that items in the data bank reflect current legislation and standards and use currently acceptable language. Three items were identified for minor translation revisions.

#### Member Retiring

Dr. Michele Peterson-Badali will retire from the JEEC as of June 2021. Dr. Peterson-Badali has been involved in the JEE since the first exam was conducted in October 1999. At that time, Dr. Peterson-Badali was the "new grad" representative on the JEEC. The Committee is grateful for her significant contributions over many years. Her expertise in legislation related to practice with children and historical knowledge of the exam will be missed.

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#### **SUBMITTED BY**

Mary Ann Mountain, Ph.D., C.Psych., Chair



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## REPORT TO COUNCIL

2021.03.02C

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**FOURTH QUARTER, MARCH 1, 2021 – MAY 31, 2021**

### STAFF PRESENTATIONS

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**Dr. Rick Morris, Registrar & Executive Director**

- March 3/10, 2021 Baycrest Centre
- March 18, 2021 University of Waterloo - Ethics Class

**Ms. Lesia Mackanyn, Director, Registration**

- April 23, 2021 GTA Internship Consortium
- May 17, 2021 York University

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## BRIEFING NOTE

2021.03.03A

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### JUNE 2021 COUNCIL MEETING

## EXTENDING THE ELIGIBILITY FOR FUNDING FOR THERAPY AND COUNSELLING

### STRATEGIC DIRECTION REFLECTION

*Acting in a responsibly transparent manner; Advancing the Council's governance practices*

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### MOTION FOR CONSIDERATION

That draft *Policy II – 7(ii): Funding for Therapy and Counselling for Clients of Members Alleged to have been Sexually Abused while Receiving Supervised Psychological Services* be approved.

**Moved By** TBD

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### PUBLIC INTEREST RATIONALE

Current statutory provisions require the College to provide funding for therapy or counselling to those alleging sexual abuse by a member [s. 85.7, Health Professions Procedural Code (*Code*) being Schedule 2 of the *Regulated Health Professions Act, 1991* - Attached]. There is no statutory provision to require similar funding to be extended to individuals alleging sexual abuse by a non-member being supervised by a member.

The College permits members to supervise non-members in the provision of psychological services. In such situations, the recipient of the service is considered to be a client of the supervising member and the College specifically requires that supervisors ensure that services are provided in accordance with the Standards of the profession. The Client Relations Committee is of the view that the public may reasonably expect that a client receiving a psychological service under provisions set by the College will be afforded the same protection as those receiving services directly from members. Given this, the Committee believes it to be reasonable that the College extend funding for therapy and counselling beyond the requirements of the *Code*.

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### BACKGROUND

The College has received at least one request for funding for therapy or counselling from individuals who received services from a non-member under the supervision of a member. In considering these requests, the Client Relations Committee was concerned that the current eligibility criteria excluded these clients. The Committee was of the view that funding should be extended to these individuals who otherwise do not meet the current statutory requirements set out in the *Code*.

The Committee was of the view that those receiving services, although supervised services, should be eligible for funding if they were sexually abused while receiving a service which fell within the scope of practice of the profession as set out in the *Psychology Act, 1991*:

*The practice of psychology is the assessment of behavioral and mental conditions, the diagnosis of neuropsychological disorders and dysfunctions and psychotic, neurotic and personality disorders and dysfunctions and the prevention and treatment of behavioral and mental disorders*

*and dysfunctions and the maintenance and enhancement of physical, intellectual, emotional, social and interpersonal functioning. 1991, c. 38, s. 3.*

Since the College views the client receiving supervised services as being a client of the supervisor, they should be entitled to the same consideration should abuse occur within this supervised relationship. This would include eligibility at the time an allegation is made for the full amount of funding over five years, following the determination of eligibility.

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#### **POLICY FOR CONSIDERATION**

The Client Relations Committee developed the attached proposed policy, *Funding for Therapy and Counselling for Clients of Members Alleging Sexual Abuse while Receiving Supervised Psychological Services*. This draft policy outlines the role of the Client Relations Committee in considering funding applications and outlines the eligibility criteria and other elements of this voluntary College initiative. It should be noted that, for the most part, the policy mirrors the requirement of s. 85.7, Health Professions Procedural Code (*Code*) being Schedule 2 of the *Regulated Health Professions Act, 1991*.

The Executive Committee was in general agreement with the overall intent of the proposed policy, although one element was raised which was felt to require specific Council attention. This relates to the choice of therapist or counsellor in section 6 of the draft policy. In discussing the client's ability to choose their therapist or counsellor, the *Code* permits them to choose any therapist or counsellor subject to certain restrictions. The intent of the legislation is to permit them to choose the person they wish to work with in this very sensitive area which could be either a regulated or non-regulated professional. The legislation does not limit the individual's choice and does not give the College a role in choosing the therapist or counsellor. In the attached draft policy, [section 6 shown in blue](#) uses language which directly mirrors that of the legislation.

Since this is a voluntary College initiative, the question was raised as to whether the College, as a regulatory body, should require the choice of a regulated professional. As reflected in [section 6 shown in green](#), the stipulation would be that the individual must choose a regulated mental health professional.

There are points to consider in determining whether the College policy should require the therapist or counsellor by regulated. As a regulatory organization, the College may not wish to support or promote the practice of non-regulated mental health professionals. Regulation was established to ensure practitioners have met minimum standards of qualifications and are accountable to a regulatory body. While this is a powerful argument, the legislation chose not to go in this direction in setting up the funding requirement wishing to leave the decision with the client and their best judgement in their particular situation. Arguments have been made that to restrict client choice would force them return to a regulated provider when their trust in regulation and the system has been severely damaged. As well, to restrict choice to a regulated mental health professional could exclude other potentially very important sources of help such as members of the clergy, indigenous elders, and other cultural/ethnic specific resources.

If Council chooses to approve this policy, a decision needs to be made regarding which section 6 to adopt.

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#### **BUDGETARY IMPLICATIONS**

It is difficult to quantify the full cost of enacting this policy. There is currently no ability to estimate the potential number of clients who could come forward as there is currently no mechanism for establishing how many non-registered individuals are providing psychological services under the supervision of members. Even with this number, it would be difficult to estimate how likely a client was to suffer abuse; one would hope very unlikely. To date there have only been one or two such requests. The College may

possibly mitigate some of the financial impact by seeking reimbursement from the supervising members if it was established that their supervision was inadequate. Currently, the *Code* provides for a total of \$17,370 per client over five years after eligibility has been established.

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**NEXT STEPS**

Upon approval:

- Include the policy in the College *Policy and Procedure Manual*.
- 

**ATTACHMENTS**

- s.85.7 of the Health Professions Procedural Code being Schedule 2 of the *Regulated Health Professions Act, 1991*
  - Draft *Policy II – 7(ii): Funding for Therapy and Counselling for Clients of Members Alleged to have been Sexually Abused while Receiving Supervised Psychological Services*
- 

**CONTACT FOR QUESTIONS**

Barry Gang, MBA, Dip.C.S., C.Psych.Assoc.

Deputy Registrar & Director of Professional Affairs

**REGULATED HEALTH PROFESSIONS ACT, 1991  
HEALTH PROFESSIONS PROCEDURAL CODE**

**FUNDING FOR THERAPY AND COUNSELLING**

**Funding provided by College**

**85.7** (1) There shall be a program, established by the College, to provide funding for the following purposes in connection with allegations of sexual abuse by members:

1. Therapy and counselling for persons alleging sexual abuse by a member.
2. Any other purposes prescribed in regulations made under clause 43 (1) (y) of the *Regulated Health Professions Act, 1991*. 2017, c. 11, Sched. 5, s. 28 (1).

**Funding governed by regulations**

(2) The funding shall be provided in accordance with the regulations made under the *Regulated Health Professions Act, 1991*. 1993, c. 37, s. 23.

**Administration**

(3) The Patient Relations Committee shall administer the program. 1993, c. 37, s. 23.

**Eligibility**

(4) A person is eligible for funding if,

- (a) it is alleged, in a complaint or report, that the person was sexually abused by a member while the person was a patient of the member; or
- (b) the alternative requirements prescribed in the regulations made by the Council are satisfied. 2017, c. 11, Sched. 5, s. 28 (2).

**Timing**

(5) Where a request is made for funding pursuant to subsection (1), a determination of the person's eligibility for such funding in accordance with subsection (4) shall be made within a reasonable period of time of the request having been received. 2017, c. 11, Sched. 5, s. 28 (2).

**Not a finding**

(5.1) The determination of a person's eligibility for funding in accordance with subsection (4) does not constitute a finding against the member and shall not be considered by any other committee of the College dealing with the member. 2017, c. 11, Sched. 5, s. 28 (2).

**Cessation of eligibility**

(5.2) Despite subsection (4), a person's eligibility to receive funding pursuant to subsection (1) ceases upon the occurrence of any of the prescribed circumstances. 2017, c. 11, Sched. 5, s. 28 (2).

**No assessment**

(6) A person is not required to undergo a psychological or other assessment before receiving funding. 1993, c. 37, s. 23.

**Choice of therapist or counsellor**

(7) A person who is eligible for funding is entitled to choose any therapist or counsellor, subject to the following restrictions:

1. The therapist or counsellor must not be a person to whom the eligible person has any family relationship.
2. The therapist or counsellor must not be a person who, to the College's knowledge, has at any time or in any jurisdiction been found guilty of professional misconduct of a sexual nature or been found civilly or criminally liable for an act of a similar nature.
3. If the therapist or counsellor is not a member of a regulated health profession, the College may require the person to sign a document indicating that he or she understands that the therapist or counsellor is not subject to professional discipline. 1993, c. 37, s. 23.

**Payment**

(8) Funding shall be paid only to the therapist or counsellor chosen by the person or to other persons or classes of persons prescribed in any regulation made under clause 43 (1) (y) of the *Regulated Health Professions Act, 1991*. 2017, c. 11, Sched. 5, s. 28 (3).

**Use of funding**

(9) Funding shall be used only to pay for therapy or counselling and for any other purposes prescribed in any regulation made under clause 43 (1) (y) of the *Regulated Health Professions Act, 1991* and shall not be applied directly or indirectly for any other purpose. 2017, c. 11, Sched. 5, s. 28 (3).

**Same**

(10) Funding may be used to pay for therapy or counselling that was provided at any time after the alleged sexual abuse took place. 2017, c. 11, Sched. 5, s. 28 (3).

**Other coverage**

(11) The funding that is provided to a person for therapy and counselling shall be reduced by the amount that the Ontario Health Insurance Plan or a private insurer is required to pay for therapy or counselling for the person during the period of time during which funding may be provided for the person under the program. 2017, c. 11, Sched. 5, s. 28 (3).

**Right of recovery**

(12) The College is entitled to recover from the member, in a proceeding brought in a court of competent jurisdiction, money paid in accordance with this section for an eligible person referred to in subsection (4). 2017, c. 11, Sched. 5, s. 28 (3).

**Person not required to testify**

(13) The eligible person shall not be required to appear or testify in the proceeding. 1993, c. 37, s. 23.

## POLICY AND PROCEDURE MANUAL

<b>POLICY</b>	Funding for Therapy and Counselling for Clients of Members Alleging Sexual Abused while Receiving Supervised Psychological Services		
<b>SECTION</b>	Council & Committees	<b>POLICY #</b>	II – 7(ii)
<b>DATE CREATED</b>	June 2021	<b>DATE LAST REVISED</b>	
<b>NEXT REVIEW DATE</b>	2024/2025	<b>PAGE #</b>	1 of 2

### POLICY STATEMENT

Funding for Therapy and Counselling may be extended to a client who alleges sexual abuse by a non-member providing psychological services under the supervision of a member.

### PROCEDURE

1. The Client Relations Committee shall review applications for funding made by recipients of psychological services if it has been alleged in a Complaint or Report that they have been sexually abused while receiving such services from an individual being supervised by a member.
2. For this purpose, a psychological service is defined as an activity which falls within the scope of practice of psychology, as set out in the *Psychology Act, 1991*:  
*Scope of practice*  
*3 The practice of psychology is the assessment of behavioral and mental conditions, the diagnosis of neuropsychological disorders and dysfunctions and psychotic, neurotic and personality disorders and dysfunctions and the prevention and treatment of behavioral and mental disorders and dysfunctions and the maintenance and enhancement of physical, intellectual, emotional, social and interpersonal functioning. 1991, c. 38, s. 3.*
3. For the purposes of this policy, an individual will be considered eligible if the alleged abuse occurred while a member is supervising the psychological services and any of the following conditions are satisfied:
  - a. The member has charged or received payment from the individual, or a third party on behalf of the individual, in respect of a service provided under the supervision of the member;
  - b. The member, or the supervisee of the member, has contributed to a health record or file for the individual;
  - c. The individual has consented to the service recommended by the member or the person being supervised by the member; or
  - d. There is sufficient evidence presented to the Client Relations Committee to support a reasonable belief that the alleged abuse occurred during the period of supervision and that the service was provided under the supervision of the member.
4. The determination of a person's eligibility for funding does not constitute a finding against the member and shall not be considered by any other Committee of the College dealing with the member.
5. A person is not required to undergo a psychological or other assessment before receiving funding.



6. A person who is eligible for funding is entitled to choose any therapist or counsellor, subject to the following restrictions:
  - a. The therapist or counsellor must not be a person to whom the eligible person has any family relationship;
  - b. The therapist or counsellor must not be a person who, to the College's knowledge, has at any time or in any jurisdiction been found guilty of professional misconduct of a sexual nature or been found civilly or criminally liable for an act of a similar nature; and
  - c. If the therapist or counsellor is not a member of a regulated health profession, the College may require the person to sign a document indicating that he or she understands that the therapist or counsellor is not subject to professional discipline.

**Or**

6. A person who is eligible for funding is entitled to choose a regulated mental health professional, subject to the following restrictions:
  - a. The therapist or counsellor must not be a person to whom the eligible person has any family relationship;
  - b. The therapist or counsellor must not be a person who, to the College's knowledge, has at any time or in any jurisdiction been found guilty of professional misconduct of a sexual nature or been found civilly or criminally liable for an act of a similar nature.
7. Funding shall be paid only to the therapist or counsellor chosen by the person
8. Funding shall be used only to pay for therapy or counselling and shall not be applied directly or indirectly for any other purpose.
9. Funding may be used to pay for therapy or counselling that was provided at any time after the alleged sexual abuse took place.
10. The funding that is provided to a person for therapy and counselling shall be reduced by the amount paid by the Ontario Health Insurance Plan or a private insurer. In addition, it shall be reduced by the amount paid by another College, if the supervisee is a member of a College required to fund therapy or counselling for the person during the period for which funding may be provided for the person under this policy.
11. The College is entitled to seek recovery from the member and/or supervisee, in a proceeding brought in a court of competent jurisdiction, of money paid in accordance with this policy for an eligible person.
12. The eligible person shall not be required to appear or testify in the proceeding.
13. The maximum amount of funding that may be provided for a person in respect of a case of sexual abuse is the amount that the Ontario Health Insurance Plan would pay for 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist on the day the person becomes eligible for funding.
14. The period of time within which funding may be provided for a person in respect of a case of sexual abuse is five years from either a) the day on which the person first received therapy or counselling , or b) the day on which the person becomes eligible for funding.

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## BRIEFING NOTE

2021.03.03B

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### JUNE 2021 COUNCIL MEETING

### *POLICY II – 3(i) INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE: TERMS OF REFERENCE/ROLE*

#### STRATEGIC DIRECTION REFLECTION

*Advancing the Council's governance practices*

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#### MOTION FOR CONSIDERATION

That the amendments to *Policy II–3(i): Inquiries, Complaints and Reports Committee: Terms of Reference/Role* be approved.

**Moved By** TBD

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#### PUBLIC INTEREST RATIONALE

To ensure an accurate and consistent procedure for communicating information to other College Directors and/or departments.

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#### BACKGROUND

At its April 14, 2021 plenary meeting, the Inquiries, Complaints and Reports Committee (ICRC) reviewed this policy as part of the regular policy review schedule. The ICRC noted that section 1(a) of the policy no longer accurately reflected current practice.

Section 1(a) states: *In addition to its statutory responsibilities and authorities, the Committee will deal with other matters including, but not limited to:*

- a. *providing information to the Director, Professional Affairs regarding areas in which there is an apparent need to provide information to the College members;*

At each ICRC meeting, Committee members consider whether there were any issues identified, while screening complaints and reports, that ought to be dealt with in a more holistic manner. This could include, as currently indicated in the policy, providing information to the Director, Professional Affairs for the purpose of education for the entire membership. It also could include, however, providing information to the Registrar regarding policy issues, or to the Director, Corporate Services regarding logistical issues. The ICRC also noted that it should be clear that the Registrar is routinely apprised of information shared with other departments, even if the Registrar decides that he does not need to be directly involved. The ICRC thought it was reasonable and appropriate that the policy's language be updated.

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#### BUDGETARY IMPLICATIONS

None.

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#### NEXT STEPS

Upon approval:

- Update the policy in the Colleges *Policy and Procedures Manual*

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**ATTACHMENTS**

1. *Policy II-3(i): Inquiries, Complaints and Reports Committee: Terms of Reference/Role* with tracked changes.

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**CONTACT FOR QUESTIONS**

Zimra Yetnikoff  
Director, Investigations & Hearings

## POLICY AND PROCEDURE MANUAL

<b>POLICY</b>	Inquiries, Complaints and Reports Committee: Terms of Reference/Role		
<b>SECTION</b>	Council & Committees	<b>POLICY #</b>	II – 3(i)
<b>DATE CREATED</b>	December 2007	<b>DATE LAST REVISED</b>	June <del>2009</del> 2021
<b>NEXT REVIEW DATE</b>	<del>2020/2021</del> 2024/2025	<b>PAGE #</b>	1 of 1

### POLICY STATEMENT

The Inquiries, Complaints and Reports Committee shall exercise its authority and fulfil its responsibilities as set out in the *Regulated Health Professions Act, 1991*, the By-laws and policies approved by Council.

### PROCEDURE

1. In addition to its statutory responsibilities and authorities, the Committee will deal with other matters including, but not limited to:
  - a. providing information to the [Directors of other College departments, with notice to the Registrar, Director, Professional Affairs regarding areas in which when identifying issues that would be most appropriately considered and addressed by those departments](#); and ~~there is an apparent need to provide information to the College members~~
  - b. development of policies and procedures relevant to the work of the Committee.
2. The Chair of the Inquiries, Complaints and Reports Committee and the Director, Investigations and Hearings will review all Committee policies and procedures on at least an annual basis to ensure the optimal functioning of the committee.
3. A panel of the Committee normally meets every four to six weeks, or as needed, to consider and dispose of complaints in accordance with its statutory obligations.

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## BRIEFING NOTE

2021.03.03C

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### JUNE 2021 COUNCIL MEETING

### *POLICY II – 3(ii) RELEASE OF THE MEMBER’S RESPONSE TO COMPLAINANT*

#### STRATEGIC DIRECTION REFLECTION

*Communicating clearly and effectively with stakeholders, particularly applicants, members, and the public;  
Acting in a responsibly transparent manner*

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#### MOTION FOR CONSIDERATION

That amendments to *Policy II – 3(ii) Release of the Member’s Response to the Complainant* be approved.

**Moved By** TBD

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#### PUBLIC INTEREST RATIONALE

To increase investigative efficiency by allowing the ICRC Chair or their designate, rather than a full panel, to consider a member’s request to not to share their response with the complainant. Housekeeping changes to clarify language and readability have also been made.

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#### BACKGROUND

At its April 14, 2021 plenary meeting, the ICRC reviewed this policy as part of its regular policy review schedule. As written, the current policy requires a decision by a full panel of the ICRC, regarding the release of the member’s response to the complainant. The Committee suggests it would be more efficient for the Committee Chair, or their designate, to have the authority to determine if a member’s response should be released. The Chair, or designate, would have the option of consulting with a full panel, if deemed necessary. If a panel has been convened to hear the matter, then it is expected that the Committee Chair will designate the panel Chair to consider the request.

The current policy, as written, notes that, *5. In the letter sent with the member’s response, complainants will be asked if they wish to proceed with the complaint after reviewing the response.* The ICRC is recommending that this be amended by removing the reference to ‘asking the client if they wished to proceed’. The Committee was concerned that, as currently drafted, the policy could be seen to be encouraging complainants to withdraw complaints upon receipt of a member’s response. It was noted that information is provided at various points in the investigative process which informs complainants that they are free to proceed with or withdraw a complaint at any time.

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#### RISK

There is little risk in having these requests considered by one Committee member as opposed to a full panel. There is no statutory requirement to disclose a member’s response to a complainant, nor any corresponding statutory obligation to redact or withhold a member’s response.

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#### BUDGETARY IMPLICATIONS

Committee costs may be reduced if one Committee member considers each request, rather than a full panel however, such differences would be immaterial.

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**NEXT STEPS**

Upon approval:

- Update the policy in the Colleges *Policy and Procedures Manual*.

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**ATTACHMENTS**

1. *Policy II – 3(ii) Release of the Member’s Response to the Complainant* with tracked changes.

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**CONTACT FOR QUESTIONS**

Zimra Yetnikoff

Director, Investigations & Hearings

## POLICY AND PROCEDURE MANUAL

<b>POLICY</b>	Release of the Member's Response to the Complainant		
<b>SECTION</b>	Council & Committees	<b>POLICY #</b>	II – 3(ii)
<b>DATE CREATED</b>	June 2000	<b>DATE LAST REVISED</b>	June <del>2017</del> 2021
<b>NEXT REVIEW DATE</b>	<del>2020/2021</del> 2024/2025	<b>PAGE #</b>	1 of 2

### POLICY STATEMENT

The member's response to a complaint shall ordinarily be provided to the complainant by the College, however the member's clinical records and other documentation will not be released.

### BACKGROUND

Pursuant to the direction of the *Health Professions Appeal and Review Board* and in response to concerns raised by members of the public, the College Council created a policy on the release of the member's response to the complainant in June 2000.

### PROCEDURE

- The College will advise members that their response to complaint allegations will be provided to the complainant. The College will provide ~~The College shall advise a member against whom there is a complaint that if the member~~ s with the opportunity to indicate whether ~~has reason to believe that they believe~~ disclosure of their member's ~~response to a complaint~~ could result in harm to the complainant or any other person. ~~, the member should raise these concerns in writing, providing an opinion and reasons as to why all or part of the response should not be disclosed to the complainant.~~
- In all relevant cases, the College will advise both the member and the complainant that if the complainant is not a client of the member, or the parent, legal guardian, or legal representative of the client, the College will not disclose any information that would violate the confidentiality of the client. For example, an individual who has concerns about services received by a spouse or an adult child may choose to lodge a complaint. In such a situation, the complainant would be entitled to receive only those parts of the member's response that do not include confidential information.
- ~~2.3. When~~ Upon receipt of a member's written reasons for concern about the disclosure of their response, whether due to potential harm or breach of confidentiality, the Chair of the Inquiries, Complaints and Reports Committee (ICRC), or their designate, will consider ~~the disclosure of a member's response is at issue, a panel of the Inquiries, Complaints and Reports Committee will be convened to determine~~ if all or part of a member's response should not be disclosed to the complainant. The Chair or designate may request that the matter be considered by a full panel of the ICRC, if appropriate. If a panel has been convened to hear the matter, then it is expected that the Committee Chair will designate the panel Chair to consider the request.
- ~~3.4. In considering potential harm, T~~ he panel ~~Chair, their designate or the full panel,~~ will weigh the member's arguments against the advantages of releasing the response, and make a decision regarding disclosure of the member's response to the complainant. In making this decision, the panel may take guidance from s.32(3) of the Health Professions Procedural Code (Code), being Schedule 2 to the

*Regulated Health Professions Act, 1991*, in assessing whether releasing the member’s response could result in harm to the complainant or any other person. Section 32(3) of the Code provides the Health Professions Appeal and Review Board (HPARB) with authority to refuse to disclose anything in the complaint file that may, in HPARB’s opinion:

- a. disclose matters involving public security;
- b. undermine the integrity of the complaint investigation and review process;
- c. disclose financial or personal or other matters of such a nature that the desirability of avoiding their disclosure in the interest of any person affected or in the public interest outweighs the desirability of adhering to the principle that disclosure be made;
- d. prejudice a person involved in a criminal or in a civil suit or proceeding; or
- e. jeopardize the safety of any person.

The College however, is not restricted to those situations identified in s.32(3) of the Code, and may consider any other circumstance, such as one which may prejudice a person involved in a family law matter, in which harm may be caused by the release of the member’s response.

4. ~~The member will be advised that if the complainant is not a client of the member (or the parent, legal guardian, or legal representative of the client), the College will not include any information that would violate the confidentiality of the client, in the disclosure of the member’s response to the complainant. For example, in a case where an individual has concerns about services received by a spouse or an adult child, they may choose to lodge a complaint. In such a situation, the complainant would be entitled to receive only those parts of the member’s response that do not include confidential information. In the event of a review of the Inquiries, Complaints and Reports Committee’s decision by HPARB, the College would also notify HPARB of the concerns with respect to confidentiality.~~
5. In ~~the letter sent with~~ sending the member’s response, complainants will be ~~asked if they wish to proceed with the complaint after reviewing the response. If they wish to proceed, they will~~ advised that the College will accept *new* information from them within 14 days, and that the member will be given an opportunity to respond to the *new* information provided. Requests for extensions to provide *new* information occasioned by the member’s response will be considered.
6. ~~If, because of potential harm to the complainant or another person,~~ Should all or part of the member’s response ~~is~~ not be released to the complainant, whether due to concerns about harm or confidentiality, and if the matter is ultimately referred to HPARB for a review, the College will:
  - a. advise HPARB that the member’s response (or parts thereof) was not released to the complainant during the investigation;
  - b. explain the reasons why the member’s response (or parts thereof) was not released to the complainant during the investigation; and
  - c. ask HPARB not to release the member’s response (or the relevant parts thereof) to the complainant.



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## BRIEFING NOTE

2021.03.03D

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### JUNE 2021 COUNCIL MEETING

### ***POLICY II – 3(iv): RESPONDING TO REQUESTS FOR EXTENSIONS TO MAKE WRITTEN SUBMISSIONS***

#### **STRATEGIC DIRECTION REFLECTION**

*Communicating clearly and effectively with stakeholders, particularly applicants, members and the public;  
Acting in a responsibly transparent manner*

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#### **MOTION FOR CONSIDERATION**

That amendments to *Policy II–3(iv): Responding to Requests for Extensions to Make Written Submissions* be approved.

**Moved By** TBD

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#### **PUBLIC INTEREST RATIONALE**

To increase investigative efficiency by allowing the Inquiries, Complaints and Reports Committee (ICRC) Chair or designate, rather than a full panel, to consider requests for extensions to submit a written response. References to additional days provided when materials are distributed by regular mail are now obsolete and so are deleted.

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#### **BACKGROUND**

At its April 14, 2021 plenary meeting, the ICRC reviewed this policy as part of its regular policy review schedule. As written, the current policy requires a full panel of the ICRC to decide on a request for an extension. The ICRC is recommending that it would be much more efficient for the Committee Chair or their designate, to have the authority to approve requests for extensions to provide written submissions. The Chair or designate would have the option of consulting with a full panel, if deemed necessary. If a panel has been convened to hear the matter, then it is expected that the Committee Chair will designate the panel Chair to consider the request.

As a housekeeping item, the ICRC recommends that the policy be updated to remove references to the additional five days provided when documents are sent by regular mail. As documents normally are now shared electronically, these references are no longer necessary.

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#### **RISK**

There is little risk to one ICRC member considering these requests as opposed to a full panel. Procedural fairness requires the ICRC to provide extensions when they are necessary and supported by reasons. There is no rule or legislative requirement that a whole panel must consider such a request.

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#### **BUDGETARY IMPLICATIONS**

Committee costs may be somewhat reduced if only one Committee member considers each request, rather than a full panel.

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**NEXT STEPS**

Upon approval:

- Update the policy in the Colleges *Policy and Procedures Manual*.

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**ATTACHMENTS**

1. *Policy II-3(iv): Responding to Requests for Extensions to Make Written Submissions* with tracked changes.

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**CONTACT FOR QUESTIONS**

Zimra Yetnikoff

Director, Investigations & Hearings

## POLICY AND PROCEDURE MANUAL

<b>POLICY</b>	Responding to Requests for Extensions to Make Written Submissions		
<b>SECTION</b>	Council & Committees	<b>POLICY #</b>	II – 3(iv)
<b>DATE CREATED</b>	June 2018	<b>DATE LAST REVISED</b>	<u>June 2021</u>
<b>NEXT REVIEW DATE</b>	<del>2020/2021</del> <u>2024/2025</u>	<b>PAGE #</b>	1 of 2

### POLICY STATEMENT

The Inquiries, Complaints and Reports Committee (ICRC) is alert to its statutory requirement to dispose of cases in a timely manner. To ensure procedural fairness and the adequacy of investigations however, the ICRC considers requests, from both members and complainants, for extensions of time to make written submissions when those requests are made in writing and supported by adequate reasons.

### BACKGROUND

Pursuant to section 25.2(1) of the Health Professions Procedural Code (Code), being Schedule 2 to the *Regulated Health Professions Act, 1991*, a member who is the subject of a complaint or report may make written submissions to the Inquiries, Complaints and Reports Committee within 30 days of receiving notice [of the report or complaint](#). ~~(35 days if notice is sent by regular mail, pursuant to section 39(2) of the Code).~~ It is the College's practice to provide complainants with 14 days to respond to a member's response, if the response is provided to them ~~(19 days if the response is sent by regular mail)~~. For any subsequent and additional information provided to the member, it is the College's practice to provide the member with 14 days ~~(or 19, as above)~~ to make additional written submissions.

From time to time and for various reasons, members and complainants request extensions of time to make written submissions to the College. This policy is intended to clarify and provide consistency for how such requests will be considered.

This policy is created pursuant to the College's rule-making authority to govern its own procedures and practices under section 25.1 of the *Statutory Powers Procedures Act*, R.S.O. 1990, c. S.22

### PROCEDURE

1. A request for an extension must be received in written form by letter, email or fax and must include:
  - a. the reasons for the request, which must be based upon extenuating circumstances; and,
  - b. a proposed date for providing the written submissions and/or supporting materials to the College.
2. Based on the nature of the request, College staff may grant extensions for a cumulative maximum of 21 days.
3. If staff have questions about the appropriateness of a request for an extension within the 21-day timeframe, they will consult with the ICRC Chair who may [consider the request, or](#) ~~decide to~~ take the request to a panel of the ICRC.
4. A request for extensions totalling more than 21 days must be approved by ~~a panel of the ICRC~~[the Chair of the ICRC or their designate. The ICRC Chair or designate may request that the matter be considered by a full panel of the ICRC, if deemed appropriate. If a panel has been convened to hear](#)

the matter, then it is expected that the Committee Chair will designate the panel Chair to consider the request.

5. After considering a request for an extension, the ICRC Chair, designate or panel, may:
  - a. grant the extension requested;
  - b. grant an extension, but for less time than requested; or
  - c. not grant the extension.
6. When considering an extension request, the ICRC Chair, designate or panel may consider other appropriate means for obtaining the information at issue, including summoning the information.
7. The ICRC Chair, designate or panel may decide not to grant the extension if there is ~~it considers that it has~~ adequate information to make a reasonable decision in the matter, and ~~that~~ procedural fairness will not be compromised.
8. Different considerations apply to requests for extensions for submissions regarding the notice of intention to make an interim order pursuant to section 25.4(6) of the Code.
  - a. A request for extension to provide written submissions regarding notice of an interim order will be treated as separate and distinct from a request for an extension to provide written submissions regarding a complaint or report, even where notice of the complaint or report and notice of the interim order are provided at the same time.
  - b. The request for extension must be received in written form by letter, email or fax.
  - c. The request for extension must include reasons, as under section 1, above, and must include a proposed date of extension.
  - d. Staff, on behalf of the ICRC, will consider an extension of up to 5 days to provide submissions in response to notice of an interim order.
  - e. Should the ICRC proceed with an interim order under circumstances where the member does not believe there was an adequate opportunity to respond, the ICRC will reconsider the matter pursuant to section 25.4(4) of the Code as soon as possible upon receipt of the member's written submissions.

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## BRIEFING NOTE

2021.03.03E

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### JUNE 2021 COUNCIL MEETING

### APPLIED BEHAVIOUR ANALYSIS REGULATION - UPDATE

#### STRATEGIC DIRECTION REFLECTION

*Collaborating in shaping the regulatory environment*

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#### FOR INFORMATION

The enabling legislation to authorize the College to undertake the regulation of the profession of Applied Behaviour Analysis (ABA) - *Bill 283, Advancing Oversight and Planning in Ontario's Health System Act, 2021* (attached) passed Third Reading on June 1 and received Royal Assent on June 3, 2021. This legislation contains provisions related to a variety of health care matters with the specific provisions related to ABA and the College contained within Schedule 4.

Upon proclamation, Schedule 4 would repeal the *Psychology Act, 1991* and replace it with a new Act, the *Psychology and Applied Behaviour Analysis Act, 2021*. The legislation authorizes the regulation of Behaviour Analysts while maintaining the current regulatory framework for Psychologists and Psychological Associates.

Prior to passage of Bill 283, the Standing Committee on Social Policy met on May 13th and May 14th to receive oral submissions and entertained written submissions until May 14. The College made a written submission (attached) regarding the wording of Section 8 related to restricted titles and terms, as well as the "holding out" clause. This section, as written, stated that members of the College may use the titles "Psychologist", "Psychological Associate" or "Behaviour Analyst" without reference to a member's registration designation. It was felt that clarity would be provided if there was reference to the member's professional designation.

ONTABA, the Association representing Behaviour Analysts in Ontario, made both an oral and written submission. In it, the Association expressed their appreciation that Behaviour Analysts will now be a regulated profession and indicated their desire to continue to work with the College and the Ministry in undertaking the work necessary in moving toward proclamation. There were no changes made to Schedule 4 of Bill 283 as a result of the Standing Committee work except for a housekeeping matter to ensure that any other legislation which refers to members of the College of Psychologists will continue to mean only Psychologists or Psychological Associates.

There are a few Colleges whose members use behaviour analytic techniques as part of their work, for example, Social Work, Early Childhood Educators, Psychotherapy and Speech Language Pathology. These individuals are not necessarily Behaviour Analysts, but they do employ some behaviour analysis. These Colleges have inquired as to whether the new legislation will require their members to hold registration in two Colleges. The legislation does not restrict individuals from using behaviour analytic techniques in their practice. If, however, these individuals wish to hold two professional titles, e.g., Social Worker and

Behaviour Analyst, then dual registration will be necessary. The relevant Colleges will be cooperating on the preparation of a communication to members regarding the implications of Bill 283 to their practice.

While the legislation has been passed, the relevant sections of Schedule 4, relevant to our College, will not be proclaimed until the College has put in place the regulatory tools needed to regulate this new profession. The first major task will be to consider the elements of the Registration Regulation as it pertains to Behaviour Analysts, including both grandparent provisions for those currently working in the field as well as regular entry requirements. In addition, the College will need to review its By-laws and Policies to determine the extent of change that may be necessary.

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**ATTACHMENTS**

- *Bill 283 – An Act to amend and enact various Acts with respect to the health system. Advancing Oversight and Planning in Ontario’s Health System Act, 2021.*
- *Submission to the Standing Committee on Social Policy*

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**CONTACT FOR QUESTIONS**

Rick Morris, Ph.D., C.Psych.

Registrar & Executive Director



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May 12, 2021

**VIA ELECTRONIC SUBMISSION**

Mr. Deepak Anand, MPP, Chair  
 Ms. Tanzima Khan, Clerk  
 Standing Committee on Social Policy  
 Room 1405, Whitney Block  
 Queen's Park, Toronto, Ontario, M7A 1A2

Dear Mr. Anand:

***Re: Schedule 4 - Bill 283, Advancing Oversight and Planning in Ontario's Health System Act, 2021***

I am the Registrar & Executive Director of the College of Psychologists of Ontario. The College is pleased to be undertaking the very important initiative to regulate the profession of Applied Behaviour Analysis (ABA) as a new profession under the College's current governance structure. I want to thank you for the opportunity to comment on the Bill; specifically, Schedule 4.

In reviewing Schedule 4 of *Bill 283, Advancing Oversight and Planning in Ontario's Health System Act, 2021*, there are comments I wish to provide with respect to Section 8; the use of restricted titles and terms and the "holding out" provisions. My interest is in ensuring clarity of language so that the legislation maintains the regulatory framework for psychologists while establishing regulation of Applied Behaviour Analysis. I believe that the proposed legislation would be considerably clearer with the addition of some language that differentiates between the members of the two professions. I have addressed each of the parts of section 8 below, providing some suggested amendments to the current wording.

**Restricted titles, 8 (1)** currently states that:

*No person other than a member shall use the title "psychologist", "psychological associate" or "behaviour analyst" or abbreviation or an equivalent in another language.* I believe that, as written, this may lead to some confusion in suggesting that a member may use any of the titles, rather than the one for which they are registered.

I suggest this section would be clearer if the reference to the two professions were separated as follows:  
*In the course of engaging in the practice of psychology, no person other than a member shall use the title "psychologist", "psychological associate" or abbreviation or an equivalent in another language; and, in the course of engaging in the practice of applied behaviour analysis, no person other than a member shall use the title "behaviour analyst" or abbreviation or an equivalent in another language.*

**Representation of qualifications, 8(2)** currently states that:

*No person other than a member shall hold themselves out as a person who is qualified to practise in Ontario as a psychologist, psychological associate or behaviour analyst or in a speciality of psychology or*

*behaviour analysis*. Similar to the concern with respect to 8(1) above, this may lead to some confusion in suggesting that a member, regardless of their professional registration, may hold themselves out as qualified in either profession.

I suggest this section would be clearer if the reference to the two professions were separated as follows: *In the course of engaging in the practice of psychology, no person other than a member shall hold themselves out as a person who is qualified to practise in Ontario as a psychologist or psychological associate or in a speciality of psychology; and, in the course of engaging in the practice of applied behaviour analysis, no person other than a member shall hold themselves out as a person who is qualified to practise as a behaviour analyst or in a speciality of behaviour analysis.*

**Same 8 (3)** currently states that:

*A person who is not a member contravenes subsection (2) if the person uses the word “psychology” or “psychological”, an abbreviation or an equivalent in another language in any title or designation or in any description of services offered or provided.* This section, as it reads, would appear to permit members of the profession of applied behavioural analysis to use the word “psychology” or “psychological”. These terms have been restricted to those registered to engage in the practice of psychology, and no other health profession, and this restriction should continue as part of the maintenance of the regulatory framework for psychologists.

I suggest this section would be more in keeping with the intent of the current *Psychology Act, 1991* if it read:

*A person who is not a member engaged in the practice of psychology contravenes subsection (2) if the person uses the word “psychology” or “psychological”, an abbreviation or an equivalent in another language in any title or designation or in any description of services offered or provided.*

Thank you for considering my comments and suggestions and please do not hesitate to contact me if you have any questions or wish further elaboration.

Yours truly,

A handwritten signature in black ink, appearing to read "R. Morris". The signature is fluid and cursive, with the first name "Rick" and last name "Morris" clearly distinguishable.

Rick Morris, Ph.D., C.Psych.  
Registrar & Executive Director  
[rmorris@cpo.on.ca](mailto:rmorris@cpo.on.ca)



Legislative  
Assembly  
of Ontario



Assemblée  
législative  
de l'Ontario

1ST SESSION, 42ND LEGISLATURE, ONTARIO  
70 ELIZABETH II, 2021

# Bill 283

*(Chapter 27 of the Statutes of Ontario, 2021)*

## **An Act to amend and enact various Acts with respect to the health system**

**The Hon. C. Elliott**  
Minister of Health

1st Reading	April 27, 2021
2nd Reading	May 4, 2021
3rd Reading	June 1, 2021
Royal Assent	June 3, 2021



## EXPLANATORY NOTE

*This Explanatory Note was written as a reader's aid to Bill 283 and does not form part of the law. Bill 283 has been enacted as Chapter 27 of the Statutes of Ontario, 2021.*

**SCHEDULE 1  
COVID-19 VACCINATION REPORTING ACT, 2021**

Persons and entities that administer COVID-19 vaccines are required to provide certain information to the Ministry of Health. The use that the Ministry may make of the information is provided for.

**SCHEDULE 2  
HEALTH AND SUPPORTIVE CARE PROVIDERS OVERSIGHT AUTHORITY ACT, 2021**

The Schedule enacts the *Health and Supportive Care Providers Oversight Authority Act, 2021* and makes complementary amendments to several other Acts. The major elements of the Schedule are described below.

Part I sets out interpretive provisions that apply to the Act.

Part II establishes the Health and Supportive Care Providers Oversight Authority (the “Authority”). The Authority is governed by a board composed of directors appointed by the Lieutenant Governor in Council and directors appointed by the members of the board. The board appoints a Chief Executive Officer to discharge a number of duties and obligations under the Act. The objects of the Authority include administering the Act and the regulations and governing the health services and supportive care services provided by registrants. The Authority must enter into a memorandum of understanding with the Minister of Health, who is entitled to appoint a supervisor to assume control of the Authority if the Minister considers it to be in the public interest. The Authority must comply with policy directions issued by the Minister.

Part III establishes the process for applying for registration with the Authority. Applicants can apply to join the personal support worker class of registration or any other prescribed class of registration. Applicants must meet the prescribed criteria for registration and shall be refused registration if they meet the prescribed prohibited grounds for registration. Refusals to register an applicant and decisions to impose conditions on a registrant may be submitted to the Health Professions Appeal and Review Board for a written review.

Part IV establishes the rules that apply to registrations. Registrations are subject to conditions applied under the Act or the regulations and expire in accordance with the rules set out in the Authority’s by-laws. The Chief Executive Officer is required to establish a register of registrants and make certain information about them available to the public. Registrants are required to report to the Chief Executive Officer when they are found guilty of or charged with certain offences. They are also required to make a report if they have reasonable grounds to believe that another registrant or a member of a health profession college has sexually abused a person who receives health services or supportive care services. Persons who choose not to register with the Authority are not prohibited from providing health services or supportive care services, but they cannot hold themselves out as a registrant with the Authority or use any visual mark or other identifier established by the Authority for registrants.

Part V establishes the procedures for complaints and investigations. The Chief Executive Officer may investigate complaints or may appoint investigators on their own initiative. Investigators have a number of powers to investigate contraventions of the Act and the regulations. The Chief Executive Officer may take action as appropriate, which may include requiring additional training for registrants, applying conditions to their registration or referring contraventions of the prescribed code of ethics to the discipline committee. Urgent interim action may also be taken in certain circumstances. The discipline committee is established by the board to hear allegations of contraventions of the prescribed code of conduct. They may direct the Chief Executive Officer to revoke, suspend or impose conditions on a registration. Their decisions may be appealed to the appeals committee, which is also established by the board.

Part VI sets out a number of miscellaneous provisions, including provisions respecting fees, confidentiality, evidence and the service of documents.

Part VII sets out offences under the Act and establishes the penalty for committing an offence. It also empowers the court to take precautions to avoid the disclosure of personal health information in relation to investigations and prosecutions under the Act.

Part VIII sets out limitations on the liability of the Authority, the Crown, and various officers, employees, service providers, agents and other officials.

Part IX sets out the Lieutenant Governor in Council’s power to make regulations under the Act.

Part X sets out amendments to the Act and complementary amendments to various other Acts. The *Fair Access to Regulated Professions and Compulsory Trades Act, 2006* is amended so that the Authority is a regulated profession for the purposes of that Act. The *Ministry of Health and Long-Term Care Appeal and Review Boards Act, 1998* is amended to provide the Health Professions Appeal and Review Board with the authority to make decisions in respect of the Authority. The *Regulated Health Professions Act, 1991* is amended to permit certain information to be communicated to the Authority and to require members of every College to report if they have a reasonable belief that a registrant of the Authority has sexually abused a patient. The

*Excellent Care for All Act, 2010*, the *Quality of Care Information Protection Act, 2016* and the *Personal Health Information Protection Act, 2004* are amended to extend the application of certain provisions of those Acts to the Authority.

Part XI sets out the commencement and short title of the Act set out in this Schedule.

**SCHEDULE 3  
MEDICINE ACT, 1991**

The *Medicine Act, 1991* is amended to provide for a class of members of the College of Physicians and Surgeons of Ontario to be known as “physician assistants”. Rules concerning the acts they may perform are provided for.

**SCHEDULE 4  
PSYCHOLOGY AND APPLIED BEHAVIOUR ANALYSIS ACT, 2021**

The *Psychology and Applied Behaviour Analysis Act, 2021* is enacted. The *Psychology Act, 1991* is repealed, and the College of Psychologists of Ontario is continued under the name College of Psychologists and Behaviour Analysts of Ontario.

The scopes of practice of psychology and applied behaviour analysis are provided for.

Related amendments are made to the *Regulated Health Professions Act, 1991*.

Bill 283

2021

**An Act to amend and enact various Acts with respect to the health system**

**CONTENTS**

1.	Contents of this Act
2.	Commencement
3.	Short title
Schedule 1	Covid-19 Vaccination Reporting Act, 2021
Schedule 2	Health and Supportive Care Providers Oversight Authority Act, 2021
Schedule 3	Medicine Act, 1991
Schedule 4	Psychology and Applied Behaviour Analysis Act, 2021

Her Majesty, by and with the advice and consent of the Legislative Assembly of the Province of Ontario, enacts as follows:

**Contents of this Act**

**1 This Act consists of this section, sections 2 and 3 and the Schedules to this Act.**

**Commencement**

**2 (1) Subject to subsections (2) and (3), this Act comes into force on the day it receives Royal Assent.**

**(2) The Schedules to this Act come into force as provided in each Schedule.**

**(3) If a Schedule to this Act provides that any provisions are to come into force on a day to be named by proclamation of the Lieutenant Governor, a proclamation may apply to one or more of those provisions, and proclamations may be issued at different times with respect to any of those provisions.**

**Short title**

**3 The short title of this Act is the *Advancing Oversight and Planning in Ontario's Health System Act, 2021*.**

**SCHEDULE 1**  
**COVID-19 VACCINATION REPORTING ACT, 2021**

**Definitions**

**1** In this Act,

“information” includes personal health information within the meaning of the *Personal Health Information Protection Act, 2004*; (“renseignements”)

“Minister” means the Minister of Health, or such other Minister as may be assigned responsibility for the administration of this Act under the *Executive Council Act*; (“ministère”)

“Ministry” means the Ministry of the Minister; (“ministre”)

“personal health information” has the same meaning as in section 4 of the *Personal Health Information Protection Act, 2004*; (“renseignements personnels sur la santé”)

“regulations” means the regulations made under this Act; (“règlements”)

“vaccinator” means any person or entity who administers a vaccine to an individual in Ontario; (“vaccinateur”)

“vaccine” means a vaccine to protect against COVID-19. (“vaccine”)

**Providing information re individual**

**2** Every vaccinator shall ensure that the following information is disclosed to the Ministry in respect of every individual to whom the vaccinator administers a vaccine and every individual to whom the vaccinator declines to administer a vaccine, unless the individual has not supplied the information to the vaccinator:

1. The name or names of the individual, including a legal name, an alternate name or an alias.
2. The telephone number or email address of the individual.
3. The individual’s date of birth.
4. The individual’s sex.
5. The individual’s health number within the meaning of the *Personal Health Information Protection Act, 2004*.
6. Any other information provided for in the regulations.

**Providing information re vaccine**

**3** Every vaccinator shall ensure that the following information is disclosed to the Ministry with respect to each dose of a vaccine administered by the vaccinator:

1. Product name and manufacturer.
2. Date of administration.
3. Lot number.
4. Expiry date.
5. Dose number for the individual it was administered to.
6. The responsible public health unit for the geographic area in which the dose was administered.
7. The anatomical location of injection.
8. The route of administration.
9. Any other information provided for in the regulations.

**Information re vaccinator**

**4** Every vaccinator shall ensure that the following information is disclosed to the Ministry with respect to the vaccinator:

1. The vaccinator’s name.
2. The vaccinator’s contact information.
3. The vaccinator’s professional designation and licence number.
4. Any other information provided for in the regulations.

**Use and disclosure of reportable information by Ministry**

**5** The Ministry shall use and disclose the information disclosed to it under sections 2, 3 and 4 in accordance with the *Personal Health Information Protection Act, 2004* and with any additional requirements that may be provided for in the regulations.

**Directives**

**6** (1) The Minister may make directives in writing respecting the form, manner and timing of the disclosures required under sections 2, 3 and 4, and every vaccinator to whom a directive is directed shall comply with the directive.

**Not a regulation**

(2) A directive under this section is not a regulation within the meaning of Part III (Regulations) of the *Legislation Act, 2006*.

**Regulations**

**7** The Lieutenant Governor in Council may make regulations,

- (a) respecting and governing anything that, under this Act, may be prescribed or provided for in the regulations;
- (b) modifying or clarifying the definition of “vaccinator” for the purposes of this Act;
- (c) respecting how vaccinators may provide information under sections 2, 3 and 4;
- (d) providing for exemptions from this Act or any provision of this Act, and setting conditions on such an exemption;
- (e) generally, for carrying out the purposes, provisions and intent of this Act.

**Commencement**

**8** The Act set out in this Schedule comes into force on the day the *Advancing Oversight and Planning in Ontario’s Health System Act, 2021* receives Royal Assent.

**Short title**

**9** The short title of the Act set out in this Schedule is the *COVID-19 Vaccination Reporting Act, 2021*.

**SCHEDULE 2  
HEALTH AND SUPPORTIVE CARE PROVIDERS OVERSIGHT AUTHORITY ACT, 2021**

**CONTENTS**

**PART I  
INTERPRETATION**

1. Interpretation

**PART II  
THE AUTHORITY**

ESTABLISHMENT, COMPOSITION AND GOVERNANCE

2. Authority established  
3. Composition of Authority  
4. Board  
5. Interim board  
6. By-laws  
7. Not Crown agent  
8. Corporations Act, Corporations Information Act

EMPLOYEES, OFFICERS, AGENTS AND COMMITTEES

9. Employees  
10. Chief Executive Officer  
11. Advisory committees

OBJECTS, POWERS AND DUTIES

12. Objects  
13. Capacity, rights, powers and privileges  
14. Memorandum of understanding

ACCOUNTABILITY

15. Minister's authority to appoint supervisor  
16. Status of board during supervisor's tenure  
17. Policy directions  
18. Ministerial reviews  
19. Duty to advise the Minister  
20. Internal audit  
21. External audit  
22. Disclosure of compensation and other payments  
23. Public interest considerations

MISCELLANEOUS

24. Prohibitions  
25. Services in French

**PART III  
APPLICATIONS FOR REGISTRATION**

26. Applications  
27. Registration  
28. Refusal to register, etc.  
29. Written review by HPARB

**PART IV  
REGISTRATIONS**

CONDITIONS AND THE REGISTER

30. Registration subject to conditions  
31. Expiry of registration  
32. Register

REPORTING AND INFORMATION

33. Reporting by registrants re: offences  
34. Reporting by registrants re: charges and bail conditions, etc.  
35. Sexual abuse reporting  
36. Collection of personal information from registrants

PROHIBITIONS ON NON-REGISTRANTS

37. Holding out prohibitions for non-registrants

**PART V  
COMPLAINTS, INVESTIGATIONS AND DISCIPLINE**

COMPLAINTS AND INVESTIGATIONS

38. Complaints  
39. Appointment of investigators  
40. Entry to dwellings  
41. Entries and searches  
42. Copying of documents and objects

43. Obstruction, etc. prohibited  
RESOLUTION OF COMPLAINTS OR INVESTIGATIONS AND APPEALS
44. Chief Executive Officer actions
45. Urgent interim action
46. Discipline and appeals committees
47. Appeals committee
48. Public access to decisions

**PART VI  
MISCELLANEOUS**

49. Forms
50. Fees, etc.
51. Confidentiality
52. Evidence in civil proceedings
53. Service
54. Review of Act

**PART VII  
OFFENCES**

55. Offences
56. Penalty
57. Protection of personal health information

**PART VIII  
LIABILITY OF THE AUTHORITY AND THE CROWN**

58. No personal liability, Authority officials
59. No personal liability, Crown officials
60. No Crown liability, persons other than Crown officials
61. Proceedings barred
62. Interpretation, former officials

**PART IX  
REGULATIONS**

63. Regulations

**PART X  
AMENDMENTS TO THIS ACT AND COMPLEMENTARY AMENDMENTS TO OTHER ACTS**

64. Amendments to this Act
65. Excellent Care for All Act, 2010
66. Fair Access to Regulated Professions and Compulsory Trades Act, 2006
67. Ministry of Health and Long-Term Care Appeal and Review Boards Act, 1998
68. Personal Health Information Protection Act, 2004
69. Quality of Care Information Protection Act, 2016
70. Regulated Health Professions Act, 1991

**PART XI  
COMMENCEMENT AND SHORT TITLE**

71. Commencement
72. Short title

**PART I  
INTERPRETATION**

**Interpretation**

**1** (1) In this Act,

“Authority” means the corporation without share capital incorporated under section 2; (“Office”)

“board” means the board of directors of the Authority; (“conseil”)

“Chief Executive Officer” means the Chief Executive Officer of the Authority appointed under subsection 10 (1); (“directeur général”)

“memorandum of understanding” means the memorandum of understanding described in subsection 14 (1); (“protocole d’entente”)

“Minister” means the Minister of Health or such other member of the Executive Council as may be assigned the administration of this Act under the *Executive Council Act*; (“ministre”)

“personal health information” has the same meaning as in section 4 of the *Personal Health Information Protection Act, 2004*; (“renseignements personnels sur la santé”)

“personal information” means personal information within the meaning of the *Freedom of Information and Protection of Privacy Act*; (“renseignements personnels”)



“prescribed” means prescribed by the regulations; (“prescrit”)

“registrant” means a person or individual that is registered with the Authority under this Act; (“titulaire d’une inscription”)

“regulations” means the regulations made under this Act. (“règlements”)

#### **Sexual abuse**

(2) In this Act,

“sexual abuse” of a person who receives health services or supportive care services from a registrant means,

- (a) sexual intercourse or other forms of physical sexual relations between the registrant and the person,
- (b) touching, of a sexual nature, of the person by the registrant, or
- (c) behaviour or remarks of a sexual nature by the registrant towards the person.

#### **Same, exceptions**

(3) For the purposes of subsection (2),

“sexual nature” does not include,

- (a) touching, behaviour or remarks that are appropriate to the service provided by the registrant, or
- (b) any other prescribed conduct, behaviour or remarks.

## **PART II THE AUTHORITY**

### ESTABLISHMENT, COMPOSITION AND GOVERNANCE

#### **Authority established**

2 A corporation without share capital is established under the name Health and Supportive Care Providers Oversight Authority in English and Office de surveillance des fournisseurs de soins de santé et de soutien in French.

#### **Composition of Authority**

3 (1) The Authority is composed of the members of its board of directors.

#### **Same**

(2) A person ceases to be a member of the Authority when they cease to be a director of the Authority.

#### **Board**

4 (1) The Authority shall have a board of directors which shall manage or supervise the management of the affairs of the Authority.

#### **Composition of board**

(2) The board shall consist of no fewer than eight and no more than 12 directors.

#### **Appointed directors**

(3) The Lieutenant Governor in Council may appoint directors to the board, subject to subsection (4).

#### **Not majority**

(4) The Lieutenant Governor in Council shall ensure that the directors appointed by the Lieutenant Governor in Council do not constitute a majority of the directors on the board.

#### **Elected directors**

(5) The directors that are not appointed by the Lieutenant Governor in Council shall be elected by the members of the board.

#### **Eligibility**

(6) A person is eligible to be elected or appointed as a director of the Authority if they,

- (a) are not a registrant;
- (b) meet any prescribed qualifications; and
- (c) in the case of elected board members described in subsection (5), meet any qualifications that are set out in the Authority’s by-laws.

#### **Rules respecting who may serve as director of Authority**

(7) The regulations may establish rules regarding who can serve as a director of the Authority, including,

- (a) requiring that no more than a fixed percentage of directors shall be drawn from among specified persons or classes of persons;
- (b) specifying the qualifications for being a director of the Authority;
- (c) specifying the length of a director's term; and
- (d) specifying the number of terms that a director can serve.

#### **Remuneration and expenses**

(8) The Authority shall pay reasonable remuneration and expenses to the directors.

#### **Meetings**

(9) The board shall meet regularly throughout the year and in any event shall hold at least four meetings in each calendar year.

#### **Quorum**

(10) A majority of the number of directors required to be on the board constitutes a quorum.

#### **Chair**

(11) The Minister shall designate a chair of the board from among the directors.

#### **First election**

(12) The first election of the directors mentioned in subsection (5) shall take place before the second anniversary of the day this section comes into force or before a later date that is prescribed.

#### **Interim board**

**5** (1) Until the first election of the directors mentioned in subsection 4 (12) takes place, the Authority shall have an interim board consisting of three to five directors who shall be appointed by the Lieutenant Governor in Council.

#### **Remuneration and expenses of interim board**

(2) The remuneration and expenses of the directors on the interim board shall be determined by the Lieutenant Governor in Council.

#### **Application of s. 4**

(3) Section 4, except subsections (2) to (5) and (8), applies to the interim board.

#### **By-laws**

**6** (1) The board may make by-laws for the management of the Authority and for the conduct and administration of the Authority's operations, including with respect to,

- (a) delegating any powers and duties of the board or of the Chief Executive Officer under this Act to any person, subject to any conditions the board may specify;
- (b) establishing and governing the expiry of registrations issued under this Act; and
- (c) requiring information to be included in the register required by section 32.

#### **Elected directors**

(2) The board shall make a by-law regarding who can serve as directors elected to the board, the criteria and qualifications for persons to be nominated for election to the board and the process for their election.

#### **Minister's approval required**

(3) The board may make a by-law described in subsection (2) only with the written approval of the Minister.

#### **Available to the public**

(4) The Authority shall publish each by-law on the website of the Authority as soon as practicable after the by-law becomes effective.

#### **Not Crown agent**

**7** The Authority is not an agent of the Crown and shall not hold itself out as an agent of the Crown.

#### **Corporations Act, Corporations Information Act**

**8** The *Corporations Act* and the *Corporations Information Act* do not apply to the Authority except as prescribed.

#### EMPLOYEES, OFFICERS, AGENTS AND COMMITTEES

#### **Employees**

**9** The Authority may employ or retain the services of any qualified person to carry out any power or duty of the Authority.

**Chief Executive Officer**

**10** (1) The board shall appoint one of its employees as the Chief Executive Officer.

**Restriction**

(2) The Chief Executive Officer shall not be a registrant or a director of the Authority.

**Duties**

(3) The Chief Executive Officer shall have the powers and perform the duties assigned to the Chief Executive Officer under this Act and by the board.

**Non-application of *Statutory Powers Procedure Act***

(4) The *Statutory Powers Procedure Act* does not apply to anything done by the Chief Executive Officer under this Act, except as may be prescribed.

**Advisory committees**

**11** (1) The board shall establish a separate advisory committee for each class of registrants in accordance with the regulations to advise and make recommendations to the board and the Chief Executive Officer about issues pertaining to registrants in that class of registration.

**Composition**

(2) In addition to any other requirements provided for in the regulations, every advisory committee for a class of registrants shall include,

- (a) one or more individuals who represent the interests of persons who receive health services or supportive care services from that class of registrants or the caregivers of such individuals;
- (b) one or more individuals who are registrants in that class of registration; and
- (c) one or more individuals who are educators of registrants in that class of registration.

OBJECTS, POWERS AND DUTIES

**Objects**

**12** The objects of the Authority are,

- (a) to administer this Act and the regulations, including overseeing their enforcement;
- (b) to establish and maintain educational and skills-based qualifications for each class of registrants;
- (c) to establish and maintain one or more visual marks or identifiers for use by registrants that can identify registrants to members of the public;
- (d) to promote the provision of safe, competent, ethical and high-quality health services and supportive care services by registrants to members of the public;
- (e) to establish and maintain codes of ethics applicable to each class of registrants in relation to the health services or supportive care services they provide to members of the public;
- (f) to educate registrants, employers and members of the public about matters relating to this Act and the regulations;
- (g) to advise the Minister, at the Minister's request, on matters specified by the Minister, which may include,
  - (i) whether additional classes of registration should be prescribed,
  - (ii) whether existing classes of registration should no longer be prescribed,
  - (iii) suggestions for amendments to the Act or the regulations to support the operations of the Authority, and
  - (iv) any other policy matter concerning the Authority's objects that the Minister considers advisable; and
- (h) to carry out any other duties or powers assigned to the Authority under this Act.

**Capacity, rights, powers and privileges**

**13** The Authority has the capacity and the rights, powers and privileges of a natural person, except as limited by this Act or the regulations.

**Memorandum of understanding**

**14** (1) The Minister and the Authority shall enter into a memorandum of understanding, which must, at a minimum,

- (a) set out requirements relating to the governance of the Authority;

- (b) set out requirements with which the Authority shall comply in connection with its administration of this Act and the regulations, including a requirement that the Authority maintain adequate insurance against liability arising out of its administration of this Act and the regulations; and
- (c) set out requirements with which the Authority shall comply in connection with carrying out its other objects.

#### **Conflict**

(2) In the event of conflict between any provision of this Act or the regulations and any provision of the memorandum of understanding or the Authority's by-laws or resolutions, the provision of this Act or the regulations prevails to the extent of the conflict.

#### **Amendment by Minister**

(3) If the Minister considers it to be in the public interest, the Minister may unilaterally amend the memorandum of understanding after giving the Authority the notice that the Minister considers reasonable in the circumstances.

### ACCOUNTABILITY

#### **Minister's authority to appoint supervisor**

**15** (1) If the Minister considers it to be in the public interest, the Minister may appoint a person as a supervisor for the Authority for the purposes of assuming control of it and responsibility for its activities.

#### **Notice of appointment**

(2) The Minister shall give the board the notice that the Minister considers reasonable in the circumstances before appointing the supervisor.

#### **Immediate appointment**

(3) Subsection (2) does not apply if there are not enough members on the board to form a quorum.

#### **Term of appointment**

(4) The appointment of the supervisor is valid until the Minister terminates the appointment.

#### **Powers and duties of supervisor**

(5) Unless the supervisor's appointment provides otherwise, the supervisor has the exclusive right to exercise all the powers and perform all the duties of the directors, officers and members of the Authority.

#### **Same**

(6) In appointing the supervisor, the Minister may specify the supervisor's powers and duties and the conditions governing them.

#### **Right of access**

(7) The supervisor has the same rights as the board in respect of the Authority's documents, records and information.

#### **Report to Minister**

(8) The supervisor shall report to the Minister as the Minister requires.

#### **Minister's directions**

(9) The Minister may issue directions to the supervisor with regard to any matter within the supervisor's jurisdiction, and the supervisor shall carry them out.

#### **Status of board during supervisor's tenure**

**16** (1) On the appointment of a supervisor under section 15, the members of the board cease to hold office, unless the supervisor's appointment provides otherwise.

#### **Same**

(2) During the term of the supervisor's appointment, the powers of any director of the Authority who continues to hold office are suspended, unless the supervisor's appointment provides otherwise.

#### **Policy directions**

**17** (1) If the Minister considers it to be in the public interest, the Minister may issue policy or operational directions to the Authority relating to its administration of this Act, after giving the Authority the notice that the Minister considers reasonable in the circumstances.

#### **Compliance required**

(2) The Authority shall comply with the policy directions and shall implement measures to do so.

**Ministerial reviews**

**18** (1) The Minister may require that reviews of the Authority, of its operations or of both, including, without limitation, performance, governance, accountability and financial reviews, be carried out,

- (a) by or on behalf of the Authority; or
- (b) by a person or entity specified by the Minister.

**Access to records**

(2) If a review is carried out by a person or entity specified by the Minister, the Authority shall give the person or entity specified by the Minister and the employees and agents of the person or entity access to all records and other information required to conduct the review.

**Report to Minister**

(3) The results of reviews under this section shall be reported to the Minister within the time specified by the Minister.

**Conditions**

(4) The Minister may impose any additional requirements or conditions with respect to a review carried out under this section.

**Duty to advise the Minister**

**19** (1) The Authority shall promptly inform and advise the Minister with respect to,

- (a) any information that could affect the Authority's ability to exercise its powers or perform its duties under this Act; and
- (b) any urgent or critical matter that is likely to require action by the Minister.

**Same**

(2) The Authority shall advise or report to the Minister, within the time period that the Minister specifies, on any matter that the Minister refers to it and that relates to this Act, the regulations or the memorandum of understanding.

**Internal audit**

**20** The board shall appoint an auditor licensed under the *Public Accounting Act, 2004* to audit the accounts and financial transactions of the Authority annually.

**External audit**

**21** (1) The Auditor General appointed under the *Auditor General Act* may conduct an audit of the Authority, other than an audit required under the *Corporations Act*.

**Access**

(2) When the Auditor General conducts an audit under subsection (1), the Authority shall give the Auditor General and employees of the Auditor General access to all records and other information required to conduct the audit.

**Disclosure of compensation and other payments**

**22** (1) The Authority shall, in accordance with the regulations, make available to the public any information specified by the Minister relating to,

- (a) the compensation that the Authority pays to members of its board of directors, its officers and its employees; and
- (b) any other payments that the Authority makes or is required to make to the persons mentioned in clause (a).

**Website, etc.**

(2) The information described in subsection (1) must be made available to the public on the Authority's website and by any other means that the Authority determines.

**Definition**

(3) In this section,

“compensation” means anything paid or provided, directly or indirectly, to or for the benefit of a person who performs duties and functions that entitle the person to be paid, and includes salary, benefits, perquisites and all forms of non-discretionary and discretionary payments.

**Public interest considerations**

**23** In exercising a power under subsection 14 (3), 15 (1) or 17 (1), the Minister may consider any matter the Minister regards as relevant to the public interest including, without limiting the generality of the foregoing, whether,

- (a) the exercise of the power is necessary to prevent serious harm to public safety or to the interests of individuals who receive health services or supportive care services from registrants;

- (b) an event of force majeure has occurred;
- (c) the Authority is facing a risk of insolvency; or
- (d) the board's composition is no longer in compliance with the requirements set out in this Act, or the number of directors of the Authority is insufficient for a quorum.

#### MISCELLANEOUS

#### **Prohibitions**

#### **Commercial activities**

**24** (1) The Authority shall not engage in commercial activity through an individual, corporation or other entity that is related to the Authority.

#### **Subsidiary corporations**

(2) The Authority shall not establish a subsidiary corporation.

#### **Services in French**

**25** The *French Language Services Act* applies to the Authority as though it were a government agency under that Act.

### **PART III APPLICATIONS FOR REGISTRATION**

#### **Applications**

**26** (1) An applicant may apply to the Authority for registration or renewal of registration in a class described in subsection (2).

#### **Classes**

- (2) The classes of registration to which an applicant may apply are,
  - (a) the personal support worker class; and
  - (b) any other prescribed class.

#### **Form and manner**

(3) The application must be made in the form and manner required by the Authority.

#### **Registration**

**27** (1) An applicant is entitled to registration or renewal of registration by the Chief Executive Officer in the class they are applying for unless the Chief Executive Officer refuses to grant the application under section 28.

#### **Request for information**

- (2) The Chief Executive Officer may request that an applicant for registration or renewal of registration provide to the Chief Executive Officer, in the form and manner and within the time period specified by the Chief Executive Officer,
  - (a) information specified by the Chief Executive Officer that is relevant to the decision to be made by the Chief Executive Officer as to whether or not to grant the registration or renewal; and
  - (b) verification, by affidavit or otherwise, of any information described in clause (a) that the applicant is providing or has provided to the Chief Executive Officer.

#### **Approval and conditions**

- (3) Subject to subsection (4), the Chief Executive Officer may,
  - (a) approve the registration or renewal of a registration on such conditions as the Chief Executive Officer considers appropriate; and
  - (b) at any time impose on a registration such conditions as the Chief Executive Officer considers appropriate.

#### **Notice required if no consent to conditions**

(4) The Chief Executive Officer must provide notice in writing to the applicant under subsection 28 (3) if the Chief Executive Officer proposes to impose conditions on a registration or renewal to which the applicant has not consented.

#### **Refusal to register, etc.**

- 28** (1) If an applicant or a registrant meets the prescribed prohibited grounds for registration, the Chief Executive Officer shall, as applicable,
  - (a) refuse to register or renew the registration of the applicant; or
  - (b) revoke the registrant's registration.

**Failure to meet prescribed criteria**

(2) The Chief Executive Officer may refuse to grant or renew a registration if, in the Chief Executive Officer's opinion, the applicant does not meet the prescribed criteria for that class of registration.

**Notice**

- (3) The Chief Executive Officer shall notify an applicant or registrant in writing if they propose to,
- (a) refuse to grant or renew a registration in accordance with subsection (1) or (2);
  - (b) revoke the registrant's registration in accordance with subsection (1); or
  - (c) impose conditions to a registration or renewal to which the applicant has not consented.

**Content of notice**

- (4) The notice described in subsection (3) shall,
- (a) set out the reasons for the proposed action; and
  - (b) state that the applicant is entitled to a review in writing of the application and the documentary evidence supporting it by the Health Professions Appeal and Review Board if the applicant mails or delivers, within 15 days after service of the notice, a written request to the Chief Executive Officer and to the Health Professions Appeal and Review Board.

**Where no request for review**

(5) If an applicant does not request a review in writing after receiving the notice described in clause (4) (b), the Chief Executive Officer may carry out the proposal.

**If review requested**

(6) If a review in writing of a matter is requested, the Health Professions Appeal and Review Board shall conduct the written review in accordance with section 29.

**Continuation pending renewal**

(7) If, within the time prescribed or, if no time is prescribed, before the expiry of the applicant's registration, the applicant has applied for renewal of a registration and paid the required fee, if any, the registration shall be deemed to continue,

- (a) until the renewal is granted; or
- (b) if the applicant is served notice that the Chief Executive Officer proposes to refuse to grant the renewal, until the time for requesting a review has expired or, if a review is requested, until the Health Professions Appeal and Review Board makes its order.

**Voluntary cancellation**

(8) The Chief Executive Officer may cancel a registration upon the request, in writing, of the applicant and this section does not apply to the cancellation.

**Written review by HPARB**

**29** (1) After receiving a request for a written review from an applicant under subsection 28 (6), the Health Professions Appeal and Review Board shall conduct a written review in accordance with the procedures provided for in the regulations, if any.

**Non-application of the *Statutory Powers Procedure Act***

(2) A written review conducted by the Health Professions Appeal and Review Board under this section is not a proceeding within the meaning of the *Statutory Powers Procedure Act* and the *Statutory Powers Procedure Act* does not apply to such a review, except as provided for in the regulations.

**Powers**

- (3) After conducting a written review, the Health Professions Appeal and Review Board may by order,
- (a) direct the Chief Executive Officer to carry out the Chief Executive Officer's proposal; or
  - (b) substitute its opinion for that of the Chief Executive Officer, which may include granting, refusing to grant or applying conditions to the registration.

**CEO shall comply**

(4) The Chief Executive Officer shall comply with any orders made under subsection (3).

**Conditions**

(5) An order under subsection (3) is subject to any conditions specified in the order and may attach conditions to a registration.

**Parties**

(6) The Chief Executive Officer and the applicant are the parties to a written review under this section.

**PART IV  
REGISTRATIONS**

CONDITIONS AND THE REGISTER

**Registration subject to conditions**

**30** A registration is subject to any conditions that are applied to the registration under this Act or that are otherwise prescribed.

**Expiry of registration**

**31** Registrations expire in accordance with the rules set out in the Authority's by-laws.

**Register**

**32** (1) The Chief Executive Officer shall, in accordance with the regulations, establish and maintain a register of registrants and shall make available to the public,

- (a) the names of registrants;
- (b) any other information that may be prescribed in respect of registrants; and
- (c) any other information that may be required by the Authority's by-laws.

**Form and manner**

(2) The information to be maintained by the Chief Executive Officer in the register shall be maintained in the form and manner set out in the regulations.

REPORTING AND INFORMATION

**Reporting by registrants re: offences**

**33** (1) A registrant shall file a report in writing with the Authority if the registrant has been found guilty of an offence, other than a prescribed offence.

**Timing of report**

(2) The report must be filed as soon as reasonably practicable after the registrant receives notice of the finding of guilt.

**Contents of report**

(3) Subject to subsection (4), the report must contain,

- (a) the name of the registrant filing the report;
- (b) the nature of, and a description of the offence;
- (c) the date the registrant was found guilty of the offence;
- (d) the name and location of the court that found the registrant guilty of the offence; and
- (e) the status of any appeal initiated respecting the finding of guilt.

**Publication ban**

(4) The report shall not contain any information that violates a publication ban.

**Same**

(5) No action shall be taken under this section which violates a publication ban and nothing in this section requires or authorizes the violation of a publication ban.

**Additional reports**

(6) A registrant who files a report under subsection (1) shall file an additional report if there is a change in status of the finding of guilt as the result of an appeal.

**Reporting by registrants re: charges and bail conditions, etc.**

**34** (1) A registrant shall file a report in writing with the Authority if the registrant has been charged with an offence other than a prescribed offence, and the report shall include information about every bail condition or other restriction imposed on, or agreed to, by the registrant in connection with the charge.

**Timing of report**

(2) The report must be filed as soon as reasonably practicable after,



- (a) the registrant receives notice that they were charged with the offence; or
- (b) the bail conditions or other restrictions were imposed on or agreed to by the registrant.

#### **Contents of report**

- (3) Subject to subsection (4), the report must contain,
- (a) the name of the registrant filing the report;
  - (b) the nature of, and a description of, the charge;
  - (c) the date the charge was laid against the registrant;
  - (d) the name and location of the court in which the charge was laid or in which the bail condition or restriction was imposed on or agreed to by the registrant;
  - (e) every bail condition imposed on the registrant as a result of the charge;
  - (f) any other restriction imposed on or agreed to by the registrant relating to the charge; and
  - (g) the status of any proceedings with respect to the charge.

#### **Publication ban**

- (4) The report shall not contain any information that violates a publication ban.

#### **Same**

- (5) No action shall be taken under this section which violates a publication ban and nothing in this section requires or authorizes the violation of a publication ban.

#### **Additional reports**

- (6) A registrant who files a report under subsection (1) shall file an additional report if there is a change in status of the charge or bail conditions as the result of an appeal.

#### **Sexual abuse reporting**

- 35** (1) A registrant shall file a written report with the Authority if the registrant has reasonable grounds to believe that another registrant has sexually abused a person who receives health services or supportive care services.

#### **Same, member of health profession College**

- (2) A registrant shall file a written report with a College within the meaning of the *Regulated Health Professions Act, 1991* if the registrant has reasonable grounds to believe that a member of that College has sexually abused a person who receives health services or supportive care services.

#### **If name not known**

- (3) A registrant is not required to file a report under subsection (1) or (2) if the registrant does not know the name of the registrant or member who would be the subject of the report.

#### **Requirement to inform**

- (4) If a registrant is required to file a report under subsection (1) or (2), the registrant shall use their best efforts to advise the person who is alleged to have been sexually abused of the requirement to file the report before doing so.

#### **Contents of report**

- (5) The report required under subsection (1) or (2) must contain the following information, to the extent that it is known by the registrant:

1. The name of the registrant filing the report.
2. The name of the registrant or member who is the subject of the report.
3. An explanation of the alleged sexual abuse.
4. Subject to subsection (6), the name of the person who was alleged to have been sexually abused.

#### **Consent required**

- (6) The name of a person who was alleged to have been sexually abused must not be included in a report under subsection (1) or (2) unless that person, or if that person is incapable, the person's representative, consents in writing to the inclusion of the person's name.

#### **Collection of personal information from registrants**

- 36** (1) At the request of the Minister, the Authority shall collect information directly from registrants as is reasonably necessary for the purpose of human resources planning or research.

**Unique identifiers**

(2) A unique identifier shall be assigned by the Minister or a person designated by the Minister for each registrant from whom information is collected under subsection (1).

**Form and manner**

(3) The unique identifier shall be in the form and manner specified by the Minister.

**Registrants to provide information**

(4) A registrant who receives a request for information for the purpose of subsection (1) shall provide the information to the Authority within the time period and in the form and manner specified by the Authority.

**Disclosure to Minister**

(5) The Authority shall disclose the information collected under subsection (1) to the Minister within the time period and in the form and manner specified by the Minister.

**Use, collection, disclosure and publication**

(6) The following applies to information collected under subsection (1):

1. The information may only be used for the purposes set out under subsection (1).
2. The Minister shall not collect personal information if other information will serve the purposes set out under subsection (1).
3. The Minister shall not collect more personal information than is necessary for the purposes set out under subsection (1).
4. The Minister may disclose the information only for the purposes set out in subsection (1).
5. Reports and other documents using information collected under this section may be published for the purposes set out under subsection (1), and for those purposes only, but personal information about a registrant shall not be included in those reports or documents.

**Notice required by s. 39 (2) of FIPPA**

(7) If the Minister requires the Authority to collect personal information from its registrants under subsection (1), the notice required by subsection 39 (2) of the *Freedom of Information and Protection of Privacy Act* is given by,

- (a) a public notice posted on a website of the Government of Ontario; or
- (b) any other public method that may be prescribed.

**Same**

(8) If the Minister publishes a notice referred to under subsection (7), the Minister shall advise the Authority of the notice and the Authority shall also publish a notice about the collection within 20 days of receiving the advice from the Minister.

**Definitions**

(9) In this section,

“human resources planning” means ensuring the sufficiency and appropriate distribution of registrants in Ontario; (“planification des ressources humaines”)

“information” includes personal information about registrants, but does not include personal health information; (“renseignements”)

“research” means the study of data and information in respect of human resources planning. (“recherche”)

**PROHIBITIONS ON NON-REGISTRANTS****Holding out prohibitions for non-registrants****Use of mark or visual identifier**

**37** (1) No individual shall use or hold themselves out as being entitled to use a visual mark or other identifier established by the Authority for a class of registrants unless the individual is authorized to do so by the Authority in accordance with this Act and the regulations.

**Other forms of holding out**

(2) No individual shall otherwise represent or hold themselves out as being a registrant unless the individual is registered with the Authority in accordance with this Act.

**PART V**  
**COMPLAINTS, INVESTIGATIONS AND DISCIPLINE**  
**COMPLAINTS AND INVESTIGATIONS**

**Complaints**

**38** (1) If the Chief Executive Officer receives a complaint about a registrant, the Chief Executive Officer may investigate the complaint and may, in writing, request information in relation to the complaint from any person, including the registrant who is the subject of the complaint.

**Request for information**

(2) A request for information under subsection (1) shall indicate the nature of the complaint.

**Duty to comply with request**

(3) A registrant who receives a request for information under subsection (1) shall provide the information as soon as possible.

**Appointment of investigators**

**39** (1) The Chief Executive Officer may appoint persons to be investigators for the purposes of conducting investigations,

- (a) into complaints received by the Chief Executive Officer; or
- (b) where the Chief Executive Officer has reason to believe that a registrant may have acted in a manner that breaches the Act, the regulations or the prescribed code of ethics that applies to them.

**Certificate of appointment**

(2) The Chief Executive Officer shall issue to every investigator a certificate of appointment bearing the Chief Executive Officer's signature or a facsimile of the signature.

**Production of certificate of appointment**

(3) Every investigator who is conducting an investigation shall, upon request, produce the certificate of appointment as an investigator.

**Application of *Public Inquiries Act, 2009***

(4) An investigator may inquire into and examine the actions of a registrant and section 33 of the *Public Inquiries Act, 2009* applies to that inquiry and examination.

**Reasonable inquiries**

(5) An investigator may make reasonable inquiries of any person, including the registrant who is the subject of the investigation, on matters relevant to the investigation.

**Entry and examination**

(6) Subject to section 40, an investigator may, on the production of their certificate of appointment, enter a place in which a registrant provides health services or supportive care services to the public, or in which documents or records relevant to the registrant's provision of health services or supportive care services are located, at any reasonable time and may examine anything found there that is relevant to the investigation.

**Entry to dwellings**

**40** In conducting an investigation, an investigator shall not enter any dwelling except,

- (a) with the consent of the occupier; or
- (b) under the authority of a warrant issued under section 41.

**Entries and searches**

**41** (1) A justice of the peace may, on the application of an investigator made without notice, issue a warrant authorizing an investigator to enter and search a place and examine any document or thing specified in the warrant if the justice of the peace is satisfied that the investigator has been properly appointed and that there are reasonable and probable grounds for believing that,

- (a) the registrant being investigated has contravened the prescribed code of ethics that applies to them; and
- (b) there is something relevant to the investigation at the place.

**Hours of execution**

(2) A warrant issued under subsection (1) may be executed only between 8 a.m. and 8 p.m. unless the warrant specifies otherwise.

**Application for dwelling**

(3) An application for a warrant under subsection (1) to enter a dwelling shall specifically indicate that the application relates to a dwelling.

**Powers under the warrant**

- (4) Subject to any conditions contained in the warrant, a warrant issued under subsection (1) authorizes an investigator to,
- (a) enter or access the building, dwelling, receptacle or place specified in the warrant and to seize, examine and remove anything described in the warrant;
  - (b) make reasonable inquiries of any person, orally or in writing, with respect to anything relevant to the investigation;
  - (c) require a person to produce the information or evidence described in the warrant and to provide whatever assistance is reasonably necessary, including using any data storage, processing or retrieval device or system to produce, in any form, the information or evidence described in the warrant;
  - (d) use any data storage, processing or retrieval device or system used to engage in the activities of a registrant in order to produce information or evidence described in the warrant, in any form; and
  - (e) use any investigative technique or procedure or do anything described in the warrant.

**Assistance and entry by force**

(5) An investigator entering and searching a place under the authority of a warrant issued under subsection (1) may call upon police officers for assistance in executing the warrant and may enter a place using whatever reasonable force is necessary.

**Investigator to show identification**

(6) An investigator entering and searching a place under the authority of a warrant issued under subsection (1) shall produce their certificate of appointment, on request, to any person at the place.

**Copying of documents and objects**

**42** (1) An investigator may copy, at the Authority's expense, a document or object that an investigator may examine under subsection 39 (6) or under the authority of a warrant issued under subsection 41 (1).

**Removal for documents and objects**

- (2) An investigator may remove a document or object described in subsection (1) if,
- (a) it is not practicable to copy it in the place where it is examined; or
  - (b) a copy of it is not sufficient for the purposes of the investigation.

**Return of documents and objects or copies**

- (3) If it is practicable to copy a document or object removed under subsection (2), the investigator shall,
- (a) if it was removed under clause (2) (a), return the document or object within a reasonable time; or
  - (b) if it was removed under clause (2) (b), provide the person who was in possession of the document or object with a copy of it within a reasonable time.

**Copy as evidence**

(4) A copy of a document or object certified by an investigator to be a true copy shall be received in evidence in any proceeding to the same extent and shall have the same evidentiary value as the document or object itself.

**Definition**

(5) In this section,

“document” means a record of information in any form and includes any part of it.

**Obstruction, etc. prohibited**

**43** (1) No person shall,

- (a) hinder, obstruct or interfere with an investigator in the performance of their duties;
- (b) withhold or conceal from an investigator or destroy anything that is relevant to the investigation; or
- (c) knowingly furnish false information to an investigator in the performance of their duties.

**Co-operation**

- (2) A registrant shall co-operate fully with,
- (a) any investigator appointed under this Act; and

- (b) any request for information by the Chief Executive Officer under subsection 38 (1).

#### RESOLUTION OF COMPLAINTS OR INVESTIGATIONS AND APPEALS

##### **Chief Executive Officer actions**

**44** At any time following the receipt of a complaint or following the appointment of an investigator, the Chief Executive Officer may do any of the following, as appropriate, subject to any additional procedures provided for in the regulations:

1. Attempt to mediate or resolve the complaint.
2. Give the registrant a written warning that action may be taken against them if they continue to engage in specified activity.
3. Require the registrant to take further educational courses or training.
4. Impose conditions on the registration under clause 27 (3) (b), subject to the requirements in section 28.
5. Refer any contraventions of the prescribed code of ethics that applies to the registrant, in whole or in part, to the discipline committee of the Authority.
6. Take any further prescribed actions that the Chief Executive Officer considers appropriate.

##### **Urgent interim action**

**45** (1) The Chief Executive Officer may, at any time following the receipt of a complaint or following the appointment of an investigator, suspend or impose conditions on a registrant's registration on an interim basis if the Chief Executive Officer believes on reasonable and probable grounds that the conduct of the registrant exposes or is likely to expose members of the public who receive health services or supportive care services from the registrant to harm or injury and that urgent intervention by the Chief Executive Officer is needed.

##### **No notice or review required**

- (2) The requirements in section 28 do not apply to an interim action taken under subsection (1).

##### **Duration**

- (3) An interim action taken under subsection (1) continues in force until,
- (a) it is varied or revoked by the Chief Executive Officer;
  - (b) the Chief Executive Officer chooses to take an action under paragraphs 1, 2, 3, 4 or 6 of section 44 with respect to the matter;
  - (c) if the Chief Executive Officer refers the matter to the discipline committee under paragraph 5 of section 44,
    - (i) the matter is disposed of by the discipline committee and any applicable deadline for appealing the decision to the appeals committee expires, or
    - (ii) the appeals committee finally disposes of the matter.

##### **Procedure following interim action**

(4) If an interim action is taken under subsection (1), the Chief Executive Officer shall give precedence to the complaint or investigation that gave rise to the interim action and endeavour to investigate or otherwise deal with the matter within a reasonable period of time.

##### **Discipline and appeals committees**

###### **Discipline committee**

**46** (1) The board shall establish a discipline committee in accordance with the regulations to hear and determine, in accordance with the prescribed procedures, issues concerning whether registrants have failed to comply with the prescribed code of ethics that applies to them.

###### **Non-application of *Statutory Powers Procedure Act***

(2) The *Statutory Powers Procedure Act* does not apply to proceeding before the discipline committee concerning whether registrants have failed to comply with the prescribed code of ethics that applies to them, except as provided for in the regulations.

###### **Appointment of members**

(3) The board shall appoint the members of the discipline committee and, in making the appointments, shall ensure that the prescribed requirements for the composition of the committee are met.

**Result of a determination**

(4) If the discipline committee makes a determination under subsection (1) that a registrant has failed to comply with the prescribed code of ethics that applies to them, it may make an order as appropriate,

- (a) directing the Chief Executive Officer to revoke the registrant's registration;
- (b) directing the Chief Executive Officer to suspend a registrant's registration for a specified period of time;
- (c) directing the Chief Executive Officer to impose specified conditions on a registrant's registration for a specified or indefinite period of time; or
- (d) taking such other action as may be prescribed.

**CEO shall comply**

(5) The Chief Executive Officer shall comply with any orders made under subsection (4).

**No notice or review required**

(6) The requirements in section 28 do not apply with respect to any actions taken to comply with an order made under subsection (4).

**Same**

(7) In making an order under subsection (4), the discipline committee may specify criteria to be satisfied for the removal of a suspension or the removal of conditions imposed on a registrant's registration.

**Circumstances where revocation of registration is mandatory**

(8) Despite subsection (4), if the discipline committee determines that a registrant has failed to comply with the prescribed code of ethics that applies to them in prescribed circumstances, the discipline committee must make an order directing the Chief Executive Officer to revoke the registrant's registration.

**Suspension of order**

(9) The discipline committee may suspend the effect of all or part of an order made under subsection (4) for a specified period and on specified conditions.

**Exception**

(10) Subsection (9) does not apply to orders that the discipline committee is required to make under subsection (8).

**Appeals committee**

**47** (1) The board shall establish an appeals committee in accordance with the regulations to consider, in accordance with the prescribed procedures, appeals from orders of the discipline committee.

**Appointment of members**

(2) The board shall appoint the members of the appeals committee and, in making such appointments, shall ensure that the prescribed requirements for the composition of the committee are met.

**Appeal**

(3) A party to a proceeding before the discipline committee may appeal the final order of the discipline committee to the appeals committee in accordance with the regulations.

**Procedure**

(4) The appeals committee shall conduct any appeals to it in accordance with the procedural requirements set out in the regulations, if any.

**Non-application of *Statutory Powers Procedure Act***

(5) The *Statutory Powers Procedure Act* does not apply to a proceeding before the appeals committee, except as may be prescribed.

**Power of the appeals committee**

(6) The appeals committee may by order overturn, affirm or modify the order of the discipline committee and may make an order described in section 44.

**Public access to decisions**

**48** Decisions of the discipline committee and the appeals committee shall be made available to the public in such manner as may be prescribed.

**PART VI  
MISCELLANEOUS**

**Forms**

**49** The Authority may require the use of forms it develops in connection with administering this Act or the regulations.

**Fees, etc.**

**50** (1) The Authority may set and charge fees, costs or other charges in relation to anything that the Authority does in administering this Act or anything that the Chief Executive Officer does under this Act as long as the decisions to set and charge are made in accordance with processes and criteria that the Authority establishes and that the Minister approves.

**Exception**

(2) The Authority shall not set or charge any fees, costs or charges payable by a person for making a complaint to the Chief Executive Officer.

**Setting fees, etc.**

(3) In setting the fees, costs and charges described in subsection (1), the Authority may specify their amounts or the method for determining the amounts.

**Collection**

(4) The Authority may,

- (a) set the time and manner of payment of the fees, costs and charges charged by it under subsection (1); and
- (b) require the payment of interest and other penalties, including payment of collection costs, when fees, costs and charges charged under subsection (1) are unpaid or paid after the due date.

**Publication**

(5) The Authority shall publish the fees, costs and charges, the processes and criteria and anything set or required under subsection (4) on its website and in any other way described in the memorandum of understanding.

**Not public money**

(6) For greater certainty, the money that the Authority collects in administering this Act or the regulations is not public money as defined in the *Financial Administration Act*, and the Authority may use the money to carry out its objects.

**Confidentiality**

**51** (1) A person who obtains information in the course of exercising a power or carrying out a duty related to the administration of this Act, the regulations or the memorandum of understanding shall preserve secrecy with respect to the information and shall not communicate the information to any person except,

- (a) as may be required in connection with a proceeding under this Act or in connection with the administration of this Act or the regulations;
- (b) for the purposes of the administration of another prescribed Act of Ontario or Canada;
- (c) to a College that governs a health profession within the meaning of the *Regulated Health Professions Act, 1991* or to a similar body that governs a health profession outside of Ontario;
- (d) to another person or entity outside of Ontario that regulates the activities of individuals who perform health services or supportive care services that are substantially similar to those performed by registrants;
- (e) to a police officer to aid an investigation that may result in a law enforcement proceeding, subject to any restrictions set out in the regulations;
- (f) to the counsel of the person who is required to keep the information confidential under this section;
- (g) for the purpose of confirming whether the Authority has received a complaint or is investigating a registrant, if there is a compelling public interest in the disclosure of that information;
- (h) if the disclosure is required by an Act of Ontario or Canada;
- (i) if there are reasonable grounds to believe that the disclosure is necessary for the purpose of eliminating or reducing a significant risk of serious bodily harm to a person or group of persons;
- (j) with the consent of the person to whom the information relates; or
- (k) to a prescribed entity or organization.

**Testimony**

(2) Except in a proceeding under this Act, no person shall be required to give testimony in a civil proceeding with regard to information obtained in the course of exercising a power or carrying out a duty related to the administration of this Act, the regulations or the memorandum of understanding.

**Evidence in civil proceedings**

**52** No record of a proceeding under this Act, no document or thing prepared for or statement given at such a proceeding and no order or decision made in such a proceeding is admissible in a civil proceeding other than a proceeding under this Act.

**Service**

**53** (1) Any notice, order or request made under this Act is sufficiently given or served if it is,

- (a) delivered personally;
- (b) sent by courier;
- (c) sent by registered mail;
- (d) sent by e-mail; or
- (e) sent by fax.

**Deemed service**

(2) Subject to subsection (3), the notice, order or request shall be deemed to have been served,

- (a) on the day it was delivered personally;
- (b) on the fifth day after it was couriered;
- (c) on the fifth day after it was mailed;
- (d) on the day after it was sent by email; or
- (e) on the day after it was sent by fax.

**Holidays**

(3) If the day described in clause (2) (b), (c), (d) or (e) is a holiday, the notice shall be deemed to have been served on the next day that is not a holiday.

**Failure to receive beyond person's control**

(4) Subsection (2) does not apply if the person receiving the notice, order or request that the person, acting in good faith, did not receive it or received it on a later date because of a reason beyond the person's control, including accident, disability or illness.

**Exception**

(5) Despite subsections (1) and (2), the Health Professions Appeal and Review Board may order any other method of service that it considers appropriate in the circumstances of any notices, orders or requests to or from the Board.

**Review of Act**

**54** (1) Within five years after this section comes into force, the Minister shall undertake a comprehensive review of this Act and shall prepare a report setting out the findings of the review.

**Tabling in Assembly**

(2) The Minister shall deliver the report to the Speaker of the Assembly, who shall lay the report before the Assembly at the earliest reasonable opportunity.

**PART VII  
OFFENCES**

**Offences**

**55** A person is guilty of an offence if the person,

- (a) furnishes false information in any application of registration or renewal of registration under this Act;
- (b) contravenes subsection 35 (1) or (2) (Sexual abuse reporting);
- (c) contravenes section 37 (Holding out prohibitions for non-registrants); or
- (d) contravenes section 43 (Obstruction, etc. prohibited).



**Penalty****Individual**

**56** (1) Every individual who is found guilty of an offence under section 55 is liable on conviction to a fine of not more than \$25,000.

**Corporation**

(2) Every corporation that is found guilty of an offence under section 55 is liable on conviction to a fine of not more than \$50,000.

**Directors and officers**

(3) If a corporation is guilty of an offence under section 55, every director or officer of the corporation who authorized, permitted or acquiesced in the commission of the offence is deemed to be a party to and guilty of the offence and on conviction is liable to a fine of not more than \$25,000.

**Protection of personal health information**

**57** Where documents or materials are filed with a court in relation to an investigation into an offence under this Act or in a prosecution for an offence under this Act, including under sections 158 to 160 of the *Provincial Offences Act*, the court may, at any time, take precautions to avoid the disclosure by the court or any person of any personal health information about an individual, including, where appropriate,

- (a) removing the identifying information of any person whose personal health information is referred to in any documents or materials;
- (b) receiving representations without notice;
- (c) conducting hearings or parts of hearings in private; or
- (d) sealing all or part of the court files.

**PART VIII****LIABILITY OF THE AUTHORITY AND THE CROWN****No personal liability, Authority officials**

**58** (1) No cause of action arises against any of the following persons as a result of any act done in good faith in the exercise or performance or intended exercise or performance of their duties or powers under this Act or any alleged neglect or default in the performance in good faith of such duties or powers:

1. The Chief Executive Officer.
2. An investigator appointed under this Act.
3. A director or an officer of the Authority.
4. Any other person whom the Authority employs or whose services the Authority retains in accordance with this Act.
5. An agent of the Authority.
6. A member of the discipline committee, the appeals committee or of any other committee provided for in the regulations.
7. A supervisor appointed under this Act.

**No personal liability during supervisor's tenure, directors**

(2) No cause of action arises against a director of the Authority for any act, neglect or default done by the supervisor or the Authority after the director's removal under subsection 16 (1) or while the director's powers are suspended under subsection 16 (2).

**Liability of Authority for Authority officials**

(3) Subsections (1) and (2) do not relieve the Authority of liability to which it would otherwise be subject in respect of the acts or omissions of a person mentioned in subsection (1).

**Authority officials not agents or employees of the Crown**

(4) The persons listed in subsection (1) are not and shall not be deemed to be agents or employees of the Crown, and they shall not hold themselves out as such.

**No personal liability, Crown officials**

**59** (1) No cause of action arises against any of the following persons as a result of any act done in good faith in the exercise or performance or intended exercise or performance of their duties or powers under this Act or any alleged neglect or default in the performance in good faith of such duties or powers:

1. A member of the Executive Council, including the Minister.
2. An employee, officer or agent of the Crown.

#### **Crown liability for Crown officials**

(2) Despite subsection 8 (3) of the *Crown Liability and Proceedings Act, 2019*, subsection (1) does not relieve the Crown of liability to which it would otherwise be subject.

#### **Loss of status as Crown official**

(3) A person mentioned in subsection (1) who accepts employment in or assignment to the Authority, including appointment as a director or supervisor of the Authority, is deemed not to be an employee, officer or agent of the Crown for the purposes of this Part during the period of the employment or assignment, as the case may be, in respect of any act or omission relating to the employment or assignment.

#### **No Crown liability, persons other than Crown officials**

**60** (1) No cause of action arises against the Crown, or any person mentioned in subsection 59 (1), as a direct or indirect result of any act or omission of a person who is not a person mentioned in subsection 59 (1) if the act or omission is related, directly or indirectly, to the exercise or performance or intended exercise or performance of a duty or power under this Act.

#### **Indemnification**

(2) The Authority shall indemnify the Crown and any person mentioned in subsection 59 (1) in respect of damages and costs incurred by the Crown or any such person for any act or omission of the Authority or of any person mentioned in subsection 58 (1) in carrying out that person's duties or powers under this Act.

#### **Proceedings barred**

**61** (1) No proceeding, including but not limited to any proceeding in contract, restitution, tort or trust, shall be commenced against,

- (a) any person mentioned in subsection 58 (1) in respect of a matter referred to in that subsection;
- (b) any director of the Authority mentioned in subsection 58 (2) in respect of a matter referred to in that subsection;
- (c) any person mentioned in subsection 59 (1) in respect of a matter referred to in that subsection; or
- (d) any person, including the Crown, mentioned in subsection 60 (1) in respect of a matter referred to in that subsection.

#### **Application**

(2) Without limiting the generality of subsection (1), that subsection applies to any proceeding, including a court, administrative or arbitral proceeding, claiming any remedy or relief, including specific performance, injunction, declaratory relief, any form of compensation or damages, including loss of revenue and loss of profit, or any other remedy or relief, and includes a proceeding to enforce a judgment, order or award made by a court, tribunal or arbitrator outside of Canada.

#### **Exception — judicial review**

(3) This Part does not apply to prevent an application for judicial review.

#### **Interpretation, former officials**

**62** A reference in this Part to an officer, employee, service provider, agent, or other official includes reference to a former officer, employee, service provider, agent, or other official, in relation to the exercise of powers and the performance of duties and functions in their capacity as an officer, employee, service provider, agent or other official.

## **PART IX REGULATIONS**

#### **Regulations**

**63** The Lieutenant Governor in Council may make regulations,

- (a) prescribing anything that, under this Act, may or must be prescribed, provided for or otherwise done by regulation;
- (b) exempting any person or class of person from any part of this Act and attaching conditions to the exemption;
- (c) prescribing classes of registrants in addition to the personal support worker class;
- (d) governing the rules that apply to different classes of registrants;
- (e) prescribing the code of ethics for the classes of registrants, which may include establishing different codes of ethics for different classes of registrants;
- (f) requiring the establishment of any committee of the Authority that is not already established in this Act;
- (g) governing the composition, operations, procedures and functions of any committee of the Authority;

- (h) respecting applications for registration or renewal of registration, which may include,
  - (i) prescribing requirements for registration and renewal of registration,
  - (ii) requiring applicants or registrants to meet specified educational or skills-based requirements, which may include completing a program of studies or taking one or more designated courses,
  - (iii) designating organizations that are authorized to provide the programs and courses referred to in subclause (ii), and
  - (iv) prescribing exemptions from these requirements and attaching conditions to the exemption;
- (i) respecting the issuance of visual marks and other identifiers established and maintained by the Authority and authorizing their use by registrants;
- (j) requiring and governing the disclosure of compensation and other payments under section 22;
- (k) governing the register that is required to be established and maintained under section 32 of this Act, including prescribing the information to be contained in the register and the form and manner in which it shall be maintained;
- (l) respecting matters having to do with the complaints received by the Authority and investigations involving allegations of sexual abuse by registrants, which may include,
  - (i) requiring the Authority to establish a fund for the purposes of providing therapy and counselling for persons who allege that sexual abuse has been committed by registrants,
  - (ii) requiring the Authority to provide other types of supports in relation to allegations of sexual abuse by registrants;
- (m) respecting investigations under this Act;
- (n) respecting the manner in which and the frequency with which decisions of the discipline committee and appeals committee are made available to the public;
- (o) requiring or authorizing the Chief Executive Officer or the board to conduct continuous quality improvement activities for registrants, which may include requiring registrants to complete continuous quality improvement activities as a condition of registration;
- (p) providing for any transitional matter necessary for the effective implementation of this Act;
- (q) defining, for the purposes of this Act, any word or expression that is used in this Act but not defined in this Act;
- (r) respecting matters concerning the winding up and dissolution of the Authority and the transfer of its assets, liabilities, rights and obligations;
- (s) respecting any matter that the Lieutenant Governor in Council considers advisable to carry out effectively the intent and purpose of this Act.

## PART X

### AMENDMENTS TO THIS ACT AND COMPLEMENTARY AMENDMENTS TO OTHER ACTS

#### Amendments to this Act

**64 (1) Section 8 of this Act is repealed and the following substituted:**

*Not-for-Profit Corporations Act, 2010, Corporations Information Act*

**8** The *Not-for-Profit Corporations Act, 2010* and the *Corporations Information Act* do not apply to the Authority except as prescribed.

**(2) Subsection 21 (1) of the Act is amended by striking out “Corporations Act” at the end and substituting “Not-for-Profit Corporations Act, 2010”.**

*Excellent Care for All Act, 2010*

**65 The definition of “proceeding” in subsection 13.2 (5) of the *Excellent Care for All Act, 2010* is repealed and the following substituted:**

“proceeding” includes a proceeding held in, before or under the rules of a court, a tribunal, a commission, a justice of the peace, a coroner, a committee of a College within the meaning of the *Regulated Health Professions Act, 1991*, a committee of the Board of Regents continued under the *Drugless Practitioners Act*, a committee of the Ontario College of Social Workers and Social Service Workers under the *Social Work and Social Service Work Act, 1998*, a committee of the Authority within the meaning of the *Health and Supportive Care Providers Oversight Authority Act, 2021*, an arbitrator or a mediator.

*Fair Access to Regulated Professions and Compulsory Trades Act, 2006*

**66 Section 1 of Schedule 1 to the *Fair Access to Regulated Professions and Compulsory Trades Act, 2006* is amended by adding the following paragraph:**

6. The Health and Supportive Care Providers Oversight Authority.

***Ministry of Health and Long-Term Care Appeal and Review Boards Act, 1998***

**67 (1) Section 2 of the *Ministry of Health and Long-Term Care Appeal and Review Boards Act, 1998* is amended by striking out “the *Drug and Pharmacies Regulation Act, the*” and substituting “the *Drug and Pharmacies Regulation Act, the Health and Supportive Care Providers Oversight Authority Act, 2021, the*”.**

**(2) Subsection 6 (1) of the Act is amended by adding the following paragraph:**

4.1 The *Health and Supportive Care Providers Oversight Authority Act, 2021*.

***Personal Health Information Protection Act, 2004***

**68 (1) The definition of “proceeding” in section 2 of the *Personal Health Information Protection Act, 2004* is repealed and the following substituted:**

“proceeding” includes a proceeding held in, before or under the rules of a court, a tribunal, a commission, a justice of the peace, a coroner, a committee of a College within the meaning of the *Regulated Health Professions Act, 1991*, a committee of the Board of Regents continued under the *Drugless Practitioners Act*, a committee of the Ontario College of Social Workers and Social Service Workers under the *Social Work and Social Service Work Act, 1998*, a committee of the Authority within the meaning of the *Health and Supportive Care Providers Oversight Authority Act, 2021*, an arbitrator or a mediator; (“instance”)

**(2) Clause 9 (2) (e) of the Act is repealed and the following substituted**

(e) the regulatory activities of a College under the *Regulated Health Professions Act, 1991*, the College under the *Social Work and Social Service Work Act, 1998*, the Board under the *Drugless Practitioners Act* or the Health and Supportive Care Providers Oversight Authority under the *Health and Supportive Care Providers Oversight Authority Act, 2021*; or

**(3) Subsection 17.1 (1) of the Act is amended by adding the following definition:**

“Authority” means the Authority within the meaning of the *Health and Supportive Care Providers Oversight Authority Act, 2021*; (“Office”)

**(4) Subsection 17.1 (2) of the Act is amended by striking out the portion before paragraph 1 and substituting the following:**

**Termination, suspension, etc., of employed members or registrants**

(2) Subject to any exceptions and additional requirements, if any, that are prescribed, if a health information custodian employs a health care practitioner who is a member of a College or a registrant of the Authority, the health information custodian shall give written notice of any of the following events to the College or Authority within 30 days of the event occurring:

. . . . .

**(5) Subsection 43 (1) of the Act is amended by adding the following clause:**

(b.1) to the Authority within the meaning of the *Health and Supportive Care Providers Oversight Authority Act, 2021* for the purpose of the administration or enforcement of that Act;

***Quality of Care Information Protection Act, 2016***

**69 The definition of “proceeding” in subsection 2 (1) of the *Quality of Care Information Protection Act, 2016* is repealed and the following substituted:**

“proceeding” includes a proceeding that is within the jurisdiction of the Legislature and that is held in, before or under the rules of a court, a tribunal, a commission, a justice of the peace, a coroner, a committee of a College within the meaning of the *Regulated Health Professions Act, 1991*, a committee of the Board of Regents continued under the *Drugless Practitioners Act*, a committee of the Ontario College of Social Workers and Social Service Workers under the *Social Work and Social Service Work Act, 1998*, a committee of the Authority within the meaning of the *Health and Supportive Care Providers Oversight Authority Act, 2021*, an arbitrator or a mediator, but does not include any activities carried on by a quality of care committee; (“instance”)

***Regulated Health Professions Act, 1991***

**70 (1) Subsection 36 (1) of the *Regulated Health Professions Act, 1991* is amended by adding the following clause:**

(c.1) to the Health and Supportive Care Providers Oversight Authority for the purposes of administering the *Health and Supportive Care Providers Oversight Authority Act, 2021*;

**(2) Section 85.1 of Schedule 2 to the Act is repealed and the following substituted:**

**Reporting by members**

**85.1 (1)** A member shall file a report in accordance with section 85.3 if the member has reasonable grounds, obtained in the course of practising the profession, to believe that,

- (a) another member of the same or a different College has sexually abused a patient; or
- (b) a registrant of the Health and Supportive Care Providers Oversight Authority has sexually abused a patient who receives health care or supportive care services from the registrant.

**If name not known**

(2) A member is not required to file a report if the member does not know the name of the member or registrant who would be the subject of the report.

**If information from a patient**

(3) If a member is required to file a report because of reasonable grounds obtained from one of the member's patients, the member shall use his or her best efforts to advise the patient of the requirement to file the report before doing so.

**(3) Section 85.3 of Schedule 2 to the Act is repealed and the following substituted:**

**Requirements of required reports**

**85.3** (1) A report required under section 85.1 or 85.2 must be filed in writing with,

- (a) the Registrar of the College if a member of the College is the subject of the report; or
- (b) the Health and Supportive Care Providers Oversight Authority if a registrant of the Authority is the subject of the report.

**Timing of report**

(2) The report must be filed within 30 days after the obligation to report arises unless the person who is required to file the report has reasonable grounds to believe that the member or registrant will continue to sexually abuse the patient or will sexually abuse other patients, or that the incompetence or the incapacity of the member is likely to expose a patient to harm or injury and there is urgent need for intervention, in which case the report must be filed forthwith.

**Contents of report**

(3) The report must contain,

- (a) the name of the person filing the report;
- (b) the name of the member or registrant who is the subject of the report;
- (c) an explanation of the alleged sexual abuse, incompetence or incapacity; and
- (d) if the grounds of the person filing the report are related to a particular patient of the member who is the subject of the report, the name of that patient, subject to subsection (4).

**Patients not named without consent**

(4) The name of a patient who may have been sexually abused must not be included in a report unless the patient, or if the patient is incapable, the patient's representative, consents in writing to the inclusion of the patient's name.

**If reporter providing psychotherapy**

(5) If a member who is required to file a report under section 85.1 is providing psychotherapy to the member who would be the subject of the report, the report must also contain the opinion of the member filing the report, if he or she is able to form one, as to whether or not the member who is the subject of the report is likely to sexually abuse patients in the future.

**PART XI  
COMMENCEMENT AND SHORT TITLE**

**Commencement**

**71 The Act set out in this Schedule comes into force on a day to be named by proclamation of the Lieutenant Governor.**

**Short title**

**72 The short title of the Act set out in this Schedule is the *Health and Supportive Care Providers Oversight Authority Act, 2021*.**

**SCHEDULE 3  
MEDICINE ACT, 1991**

**1 The *Medicine Act, 1991* is amended by adding the following section:**

**Physician assistants**

**4.1** (1) There shall be a class of members to be known as physician assistants.

**Restriction**

(2) Subject to subsection (3), a reference in any other Act or regulation to a physician, a legally qualified medical practitioner, a member of the College or any similar expression does not include a physician assistant unless the other Act or regulation specifically provides that it does.

**Exception**

(3) Despite subsection (2), a provision of the *Regulated Health Professions Act, 1991*, that applies with respect to a member of the College applies with respect to a physician assistant unless it provides otherwise, except in,

- (a) clause 33 (2) (c) of that Act; and
- (b) paragraph 3 of subsection 33.1 (1) of that Act.

**Additional requirements for authorized acts by physician assistants**

(4) A member who is a physician assistant shall not perform an act under the authority of section 4 unless the performance of the act by the member is permitted by the regulations and the member performs the act in accordance with the regulations.

**Grounds for misconduct**

(5) In addition to the grounds set out in subsection 51 (1) of the Health Professions Procedural Code, a panel of the Discipline Committee shall find that a member has committed an act of professional misconduct if the member contravenes subsection (4).

**2 (1) Subsection 9 (1) of the Act is amended by striking out ““physician” or “surgeon”” and substituting ““physician”, “surgeon” or “physician assistant””.**

**(2) Subsection 9 (3) of the Act is amended by striking out “physician or surgeon” and substituting “physician, surgeon or physician assistant”.**

**3 Section 12 of the Act is amended by adding the following clause:**

- (d) governing the performance of acts by members who are physician assistants.

**Commencement**

**4 This Schedule comes into force on a day to be named by proclamation of the Lieutenant Governor.**

**SCHEDULE 4**  
**PSYCHOLOGY AND APPLIED BEHAVIOUR ANALYSIS ACT, 2021**

**Definitions**

**1** In this Act,

“College” means the College of Psychologists and Behaviour Analysts of Ontario; (“Ordre”)

“Health Professions Procedural Code” means the Health Professions Procedural Code set out in Schedule 2 to the *Regulated Health Professions Act, 1991*; (“Code des professions de la santé”)

“member” means a member of the College; (“membre”)

“profession” means the professions of psychology and applied behaviour analysis; (“profession”)

“this Act” includes the Health Professions Procedural Code. (“la présente loi”)

**Health Professions Procedural Code**

**2** (1) The Health Professions Procedural Code shall be deemed to be part of this Act.

**Terms in Code**

(2) In the Health Professions Procedural Code, as it applies in respect of this Act,

“College” means the College of Psychologists and Behaviour Analysts of Ontario; (“ordre”)

“health profession Act” means this Act; (“loi sur une profession de la santé”)

“profession” means the professions of psychology and applied behaviour analysis; (“profession”)

“regulations” means the regulations under this Act. (“règlements”)

**Definitions in Code**

(3) Definitions in the Health Professions Procedural Code apply with necessary modifications to terms in this Act.

**Scope of practice****Psychology**

**3** (1) The practice of psychology is the assessment of behavioural and mental conditions, the diagnosis of neuropsychological disorders and dysfunctions and psychotic, neurotic and personality disorders and dysfunctions, the prevention and treatment of behavioural and mental disorders and dysfunctions and the maintenance and enhancement of physical, intellectual, emotional, social and interpersonal functioning.

**Applied behaviour analysis**

(2) The practice of applied behaviour analysis is the assessment of covert and overt behaviour and its functions through direct observation and measurement, and the design, implementation, delivery and evaluation of interventions derived from the principles of behaviour in order to produce meaningful improvements.

**Authorized acts**

**4** In the course of engaging in the practice of psychology, a member is authorized, subject to the terms, conditions and limitations imposed on the member’s certificate of registration, to perform the following:

1. To communicate a diagnosis identifying, as the cause of a person’s symptoms, a neuropsychological disorder or psychologically based psychotic, neurotic or personality disorder.
2. To treat, by means of psychotherapy technique delivered through a therapeutic relationship, an individual’s serious disorder of thought, cognition, mood, emotional regulation, perception or memory that may seriously impair the individual’s judgement, insight, behaviour, communication or social functioning.

**College continued**

**5** The College of Psychologists of Ontario is continued under the name College of Psychologists and Behaviour Analysts of Ontario in English and L’Ordre des psychologues et des analystes du comportement de l’Ontario in French.

**Council**

**6** (1) The Council shall be composed of,

- (a) at least eight and no more than 12 persons who are members elected in accordance with the by-laws, at least three and no more than five of whom must hold a certificate of registration in applied behaviour analysis;
- (b) at least eight and no more than 13 persons appointed by the Lieutenant Governor in Council who are not,
  - (i) members,

- (ii) members of a College as defined in the *Regulated Health Professions Act, 1991*, or
- (iii) members of a Council as defined in the *Regulated Health Professions Act, 1991*; and
- (c) at least two and no more than four persons selected, in accordance with a by-law made under section 11, from among members who belong to the faculty of a department of a university in Ontario, if that department is,
  - (i) a department of psychology, or
  - (ii) a department, however described, that offers a specialization in applied behaviour analysis.

#### **Additional qualification**

(2) At least one of the members selected pursuant to clause 1 (c) must belong to the faculty of a department that offers a specialization in applied behaviour analysis.

#### **Who can vote in elections**

(3) Subject to the by-laws, every member who practises or resides in Ontario and who is not in default of payment of the annual membership fee is entitled to vote in an election of members of the Council.

#### **President and Vice-President**

7 The Council shall have a President and Vice-President who shall be elected annually by the Council from among the Council's members.

#### **Restricted titles**

8 (1) No person other than a member shall use the title "psychologist", "psychological associate" or "behaviour analyst", a variation or abbreviation or an equivalent in another language.

#### **Representations of qualification, etc.**

(2) No person other than a member shall hold himself out as a person who is qualified to practise in Ontario as a psychologist, psychological associate or behaviour analyst or in a specialty of psychology or applied behaviour analysis.

#### **Same**

(3) A person who is not a member contravenes subsection (2) if the person uses the word "psychology" or "psychological", an abbreviation or an equivalent in another language in any title or designation or in any description of services offered or provided.

#### **Exception for university faculty**

(4) Subsections (1) and (3) do not apply to a person in the course of their employment by a university.

#### **Definition**

(5) In this section,

"abbreviation" includes an abbreviation of a variation.

#### **Notice if suggestions referred to Advisory Council**

9 (1) The Registrar shall give a notice to each member if the Minister refers to the Advisory Council, as defined in the *Regulated Health Professions Act, 1991*, a suggested,

- (a) amendment to this Act;
- (b) amendment to a regulation made by the Council; or
- (c) regulation to be made by the Council.

#### **Requirements re notice**

(2) A notice mentioned in subsection (1) shall set out the suggestion referred to the Advisory Council and the notice shall be given within 30 days after the Council of the College receives the Minister's notice of the suggestion.

#### **Offence**

10 Every person who contravenes subsection 8 (1) or (2) is guilty of an offence and on conviction is liable to a fine of not more than \$25,000 for a first offence and not more than \$50,000 for a second or subsequent offence.

#### **By-laws**

11 The Council may make by-laws,

- (a) respecting the qualifications, number, selection and terms of office of Council members who are selected; and
- (b) specifying Ontario universities for the purposes of clause 6 (1) (c).



**Transition**

**12 (1)** A person who, on the day before section 15 of this Act came into force, was registered under the *Psychology Act, 1991* shall be deemed to be the holder of a certificate of registration issued under this Act subject to any term, condition or limitation to which the registration was subject.

**Same, Council members**

(2) A person who, on the day before section 15 of this Act came into force, was a member of the Council or the President or Vice-President of the Council under the *Psychology Act, 1991* continues in office under this Act until their term would otherwise expire.

**Same, by-laws and regulations**

(3) By-laws and regulations made under the *Psychology Act, 1991* that were in force on the day before section 15 of this Act came into force remain in force until they are revoked or replaced under this Act.

**Power of Council**

(4) The Council of the College of Psychologists of Ontario has the power to make by-laws and regulations under this Act to come into force on or after the day section 15 comes into force.

**Other Acts**

**13** A reference in any other Act to a member of the College of Psychologists of Ontario shall be deemed to be a reference to a member of the College of Psychologists and Behaviour Analysts of Ontario who practises the profession of psychology.

**Amendment to this Act**

**14 Section 9 of this Act is repealed.**

**Repeal, *Psychology Act, 1991***

**15 The *Psychology Act, 1991* is repealed.**

***Regulated Health Professions Act, 1991***

**16 (1) Clause 33 (2) (d) of the *Regulated Health Professions Act, 1991* is amended by striking out “College of Psychologists of Ontario” and substituting “College of Psychologists and Behaviour Analysts of Ontario who holds a certificate of registration in the profession of psychology”.**

**(2) Item 15 of the Table to the Act is struck out and the following substituted:**

15.	person registered under the <i>Psychologists Registration Act</i>	member of the College of Psychologists and Behaviour Analysts of Ontario
15.1.	member of the College of Psychologists of Ontario	member of the College of Psychologists and Behaviour Analysts of Ontario

**(3) Schedule 1 to the Act is amended by striking out,**

<b>Psychology Act, 1991</b>	<b>Psychology</b>
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**and substituting the following:**

Psychology and Applied Behaviour Analysis Act, 2021	Psychology and applied behaviour analysis
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**Commencement**

**17 (1) Subject to subsection (2), the Act set out in this Schedule comes into force on a day to be named by proclamation of the Lieutenant Governor.**

**(2) Subsection 12 (4) comes into force on the day the *Advancing Oversight and Planning in Ontario’s Health System Act, 2021* receives Royal Assent.**

**Short title**

**18 The short title of the Act set out in this Schedule is the *Psychology and Applied Behaviour Analysis Act, 2021*.**

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## BRIEFING NOTE

2021.03.03F

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### JUNE 2021 COUNCIL MEETING

### COLLEGE GOVERNANCE REFORM

#### STRATEGIC DIRECTION REFLECTION

*Advancing the Council's governance practices; Collaborating in shaping the regulatory environment*

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#### FOR INFORMATION

On Tuesday, June 8<sup>th</sup>, the College Presidents and Registrars received the attached letter from Mr. Sean Court, Assistant Deputy Minister, Ministry of Health. The letter describes work being undertaken by the Ministry with regard to “exploring opportunities for governance reforms under the Regulated Health Professions Act, 1991” with the goal of increasing the Colleges’ ‘efficiency and ability to respond swiftly to emerging needs’.

In a recent meeting with the Health Professions Regulators of Ontario (HPRO), the Ministry explained that there is an opportunity to consider governance changes and efficiencies which may be consistent with government thinking about regulatory burden and red tape reduction. The intent is not to engage in massive reform of the *Regulated Health Professions Act, 1991 (RHPA)* or any of the profession specific acts but rather make changes which may introduce efficiencies in College governance. These efforts are moving quickly as evidenced by the short turnaround time for College input – June 30, 2021.

As noted in the letter, many Colleges have expressed interest in governance reform and a number have undertaken formal reviews of their governance structure. One such effort was that of the College of Nurses, described in their publication [Final Report: A vision for the future](#). In September 2019, Ms. Anne Coghlan, Executive Director and CEO and Mr. Kevin McCarthy, Director, Strategy, of the College of Nurses made a presentation to our Council providing an overview of their three-year governance review process and the resulting recommendations.

To date, our College has not pursued a governance reform review however a number of ideas have been generated from the governance reform initiatives undertaken by other Colleges. For example, some Colleges have run into difficulty in being able to continue to operate when they did not have the minimum number of Council members required by their profession specific act. This usually related to the loss of public members, but I understand has also occurred due to the vacancy of professional members. It may be important to introduce a legislative change which would permit Councils to remain properly constituted even when it has vacancies.

Members of Council may recall that one of the Standards set out in the College Performance Management Framework related to competency-based selection of Council members. Currently, the selection of professional members is by election from among the members as the legislation allows the College to enact an elections bylaw “respecting the election of Council members, including the requirements for members to be able to vote. . .” Such an election process does not readily lend itself to introducing competency-based selection.

A third area being considered by some Colleges relates overall governance structure. This is most widely discussed in two areas. The first relates to the overall number of Council members. Some College with large Councils are wishing to move to a much smaller governing Board. For example, the College of Nurses currently has a Council of 37 members, including 21 nurses and 16 members of the public. They have proposed a future board of 12 members. In keeping with the concept of a smaller Council, some Colleges are proposing elimination of their Executive Committee and a separation of Council and Committee membership.

The second part of this governance structure review relates to the ratio of public to professional members. Depending on the College, suggestions range from the current model of just below 50%, to equal numbers to just over 50% of public members. The minimum and maximum number of professional and public members is set out in each profession specific act. Some Colleges are proposing legislative language which could permit Colleges to develop the governance structure which is most effective for their College.

It has also been suggested that this may be an appropriate opportunity to modernize the language used in the *RHPA* and the *Health Professions Procedural Code* to more accurately convey the structure and role of Colleges. Suggestions include replacing *Council* with *Board* or *Board of Directors* and *Member* with *Registrant*. As well, a more descriptive term such as *Regulator* could be used in place of *College*. While more discussion on the best terms will be needed, many people agree that the existing terminology can be confusing and even misleading.

If it is the wish of Council, I can prepare a letter addressing some or all of the above noted points. Alternately, since the College has not undertaken its own governance review, the Council could decide that it does not wish to reply. In speaking with the Ministry, they indicated that while responses are being sought, they are not necessarily expecting all Colleges will have information to share.

As a summary, the points mentioned for consideration are:

Council Vacancies

Competency-Based Council Member Selection

Flexibility in Council Structure (size, role, public/professional composition)

Terminology

Other Areas upon which Council may wish to comment.

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#### **ATTACHMENTS**

- *June 8, 2021 Letter to College Presidents and Registrars from Mr. Sean Court, ADM, Ministry of Health*

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#### **CONTACT FOR QUESTIONS**

Rick Morris, Ph.D., C.Psych.

Registrar & Executive Director

Ministry of Health  
Ministry of Long-Term Care

Assistant Deputy Minister  
Strategic Policy, Planning & French Language  
Services Division

438 University Avenue, 10<sup>th</sup> floor  
Toronto ON M7A 2A5

Ministère de la Santé  
Ministère des Soins de longue durée

Sous-ministre adjoint  
Division des politiques et de la planification  
stratégiques, et des services en français

438 avenue University, 10<sup>e</sup> étage  
Toronto ON M7A 2A5



June 8, 2021

158-2021-46

**Dear College Presidents and Registrars/ Executive Directors**

Over the past several months, we have seen the ongoing diligent and tireless contributions of all our health system partners in response to the COVID-19 pandemic.

As we prepare for a potential burden reduction Bill this Fall, the ministry is exploring opportunities for governance reforms under the *Regulated Health Professions Act, 1991* and your respective 26 health profession Acts that would increase your efficiency and your ability to respond swiftly to emerging needs.

I am aware that many colleges have expressed interest in governance changes since 2017. Since that time, there have been developments, namely, the ongoing pandemic and the introduction of Bill 283, which have added to the discussion on governance reform.

As I have noted in previous conversations, I would like to seek your input on whether previous advice to the ministry on governance reform has changed in light of the progress of time and recent experience with the COVID-19 pandemic, as well as, the government's introduction of legislation establishing a new framework for oversight.

I am requesting your feedback on possible governance reforms by June 30th.

I look forward to our continued partnership as we explore opportunities to improve and strengthen the oversight system for health professions in Ontario.

Sincerely,

A handwritten signature in black ink, appearing to read "Sean Court", written in a cursive style.

Sean Court  
Assistant Deputy Minister

Encl.

c. Allison Henry, Director

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## REPORT TO COUNCIL

2021.03.04A

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**FOURTH QUARTER, MARCH 1, 2021 – MAY 31, 2021**

### REGISTRATION COMMITTEE

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#### COMMITTEE MEMBERS:

Marjory Phillips, Co-Chair, Council Member  
Wanda Towers, Co-Chair, Council Member  
Mark Coates, College Member  
Paula Conforti, Council Member  
Jane Ledingham, College Member

Nadia Mocan, Public Member  
Adrienne Perry, Council Member  
Philip Ricciardi, Council Member  
Sheila Tervit, College Member  
Jessy Zita, Public Member

#### STAFF

Lesia Mackanyn, Director: Registration  
Myra Veluz, Senior Registration Assistant  
Shannon Elliott, Registration Assistant  
Deneika Greco, Registration Assistant  
Amineh Sherazee, Administrative Assistant: Registration

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#### COMMITTEE ACTIVITIES

##### Meetings of the Registration Committee:

##### March 25, 2021: Panel A

The Registrar referred a total of 40 cases to Panel A which included:

- 4 academic credential reviews (3 masters and 1 doctoral);
- 22 retraining for supervised practice members or eligible candidates (10 doctoral, 12 masters);
- 2 examination outcomes;
- 1 removal or modification of a limitation and/or condition;
- 11 requests for change of area of practice.

##### March 26, 2021: Panel B

The Registrar referred a total of 46 cases to Panel B which included:

- 3 academic credential reviews (3 masters);
- 25 retraining for supervised practice members or eligible candidates (10 doctoral, 15 masters);
- 3 examination outcomes;
- 1 removal or modification of a limitation and/or condition;
- 12 requests for change of area of practice;
- 2 requests to return to an autonomous certificate from an inactive certificate.

##### May 14, 2021: Panel A

The Registrar referred a total of 40 cases to Panel A which included:

- 4 academic credential reviews (3 masters and 1 doctoral);
- 20 retraining for supervised practice members or eligible candidates (20 doctoral, 20 masters);

- 6 examination outcomes;
- 2 removals or modifications of a limitation and/or condition;
- 7 requests for change of area of practice;
- 1 request to return to an autonomous certificate from an inactive certificate.

**May 13, 2021: Panel B**

The Registrar referred a total of 35 cases to Panel B which included:

- 3 academic credential reviews (2 masters and 1 doctoral);
- 15 retraining for supervised practice members or eligible candidates (8 doctoral, 7 masters);
- 3 examination outcomes;
- 2 removals or modifications of a limitation and/or condition;
- 2 reciprocity applications;
- 10 requests for change of area of practice.

**March 25, 2021 Plenary Session:**

Staff provided the Committee with updates on the College's required examinations; the completion of the March 8<sup>th</sup> Jurisprudence and Ethics Examination (JEE), and planning for the June 2021 Oral Examinations via Zoom.

Dr. Marjory Phillips provided a brief oral report on the third meeting of the Supervision Resource Manual Working Group which met on March 9<sup>th</sup>. The Supervision Resource Manual Working Group includes Dr. Marjory Phillips, Dr. Jane Ledingham, Dr. Paolo Pires, and College staff Mr. Barry Gang and Ms. Lesia Mackany.

The Committee continued its review the College's Oral Examinations including discussions on the process and developing a rubric for evaluating competency in the Controlled Act of Diagnosis. The Committee agreed to schedule an additional Plenary Session in early May to devote more time to the Oral Examination review.

**May 6, 2021 Plenary Session:**

This Plenary Session was specifically focused on continuing to review the College's Oral Examinations. The Committee Co-Chairs led the group through a review of a table outlining the oral examination process, and a draft rubric for evaluating competency in diagnosis. Members of the Committee shared first impressions of the rubric and suggestions for next steps and planning.

**May 13, 2021 Plenary Session:**

The Committee reviewed its workplan and discussed ongoing projects and planning for the new term beginning after June 2021.

Dr. Marjory Phillips provided a brief oral report on the fourth meeting of the Supervision Resource Manual Working Group which met on April 27<sup>th</sup>.

The Committee received two recent decisions of the Health Professions Appeal and Review Board (HPARB). In both cases, the Board upheld the Registration Committee's decision to refuse an application for registration.

The Committee reviewed the Guidelines for Completing the Declaration of Competence and the Guidelines and Forms for Training Plans. These revised guidelines have been in place for approximately one year. The Committee discussed how these guidelines have been implemented over the past year and suggested some revisions to the evaluation forms used by supervisors of training plans.

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**SUBMITTED BY**

Marjory Phillips, Ph.D., C.Psych., Co-Chair

Wanda Towers, Ph.D., C.Psych., Co-Chair

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**TERMS**

- **Academic Credential Review:** Cases where after an initial review, the Registrar has referred an application for supervised practice to the Registration Committee for a further review to determine whether the applicant has an acceptable master's or doctoral degree.
- **Change of Area of Practice:** Autonomous practice members who wish to be authorized to practice in a new area and/or with a new client group.
- **Examination Outcome:** Individual cases that require a review of the outcome of, or an issue with, the Oral Examination, JEE, or EPPP.
- **Reciprocity Application:** Reviews of cases where an applicant has applied from a jurisdiction in which the College has entered into a written reciprocity agreement.
- **Removal or modification of limitation and/or condition:** Autonomous practice members who wish to have a registration related limitation and/or condition removed (or modified) from their certificate of practice.
- **Retraining:** Applies to supervised practice members and eligible candidates. If after an initial review, it appears that a candidate is missing required components in the area for which they have declared competence to practise, the Registrar will refer the candidate's application to the Registration Committee for a review of their education and training. The Committee will determine whether the candidate must augment her/his knowledge and skills via a retraining plan.
- **Return to Autonomous Certificate from Inactive Certificate:** Members who have held an Inactive Certificate of Registration for longer than 2 years and who wish to return to a Certificate of Registration Authorizing Autonomous Practice.

## REPORT TO COUNCIL

2021.03.04B

FOURTH QUARTER, MARCH 1, 2021 – MAY 31, 2021

### INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE (ICRC)

#### COMMITTEE MEMBERS:

Denise Milovan, Council Member, Chair  
Gilles Boulais, College Member, Vice-Chair  
Diane Addie, College Member  
Jason Brown, College Member  
Michael Grand, Council Member  
David Gold, College Member  
Allyson Harrison, College Member  
Joyce Isbitsky, Council Member  
Melanie Morrow, College Member

Rana Pishva, College Member  
Naomi Sankar-DeLeeuw, College Member  
Fred Schmidt, College Member  
Laura Spiller, College Member  
Paul Stopciati, Public Member  
Nancy Tkachuk, Public Member  
Scott Warnock, Public Member  
Natasha Whitfield, College Member

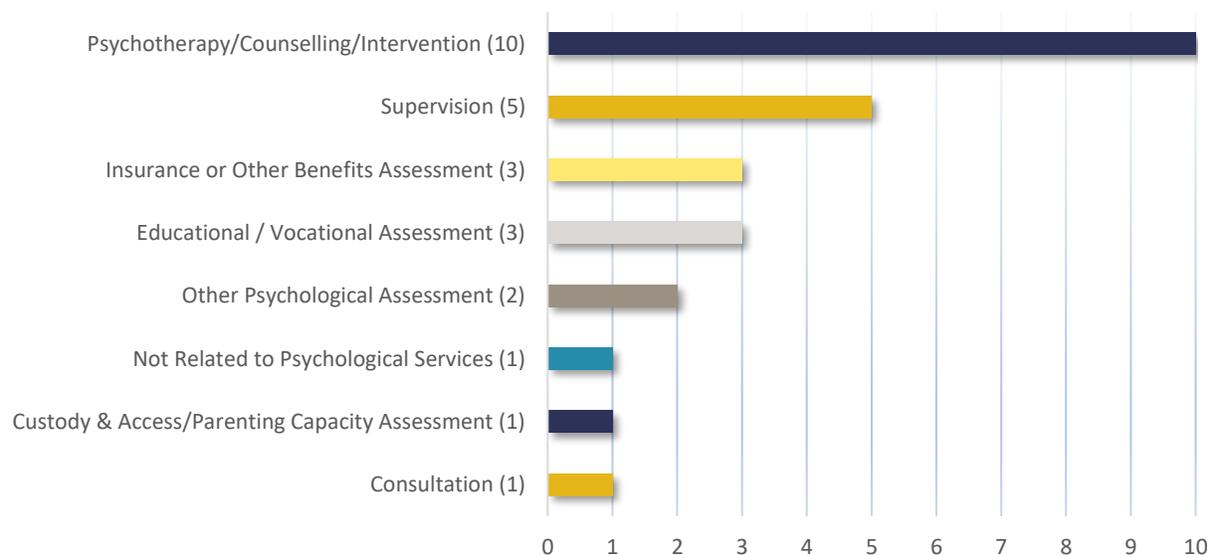
#### STAFF

Zimra Yetnikoff, Director, Investigations & Hearings  
Hélène Theberge, Senior Administrative Assistant  
Jennifer Taylor, Administrative Assistant

#### COMMITTEE ACTIVITIES

##### New Complaints and Reports

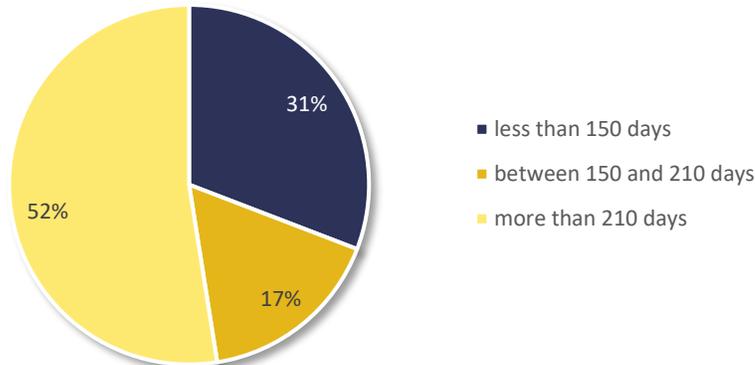
In the 4<sup>th</sup> Quarter, the College received 25 new complaints and opened 1 new Registrar's Investigation, for a total of 26 new matters. The nature of service in relation to these matters is as follows:





### Timeline Snapshot

There are currently 120 open Complaints and Registrar's Investigations that are being actively investigated. A little under half of these cases are under 210 days old.

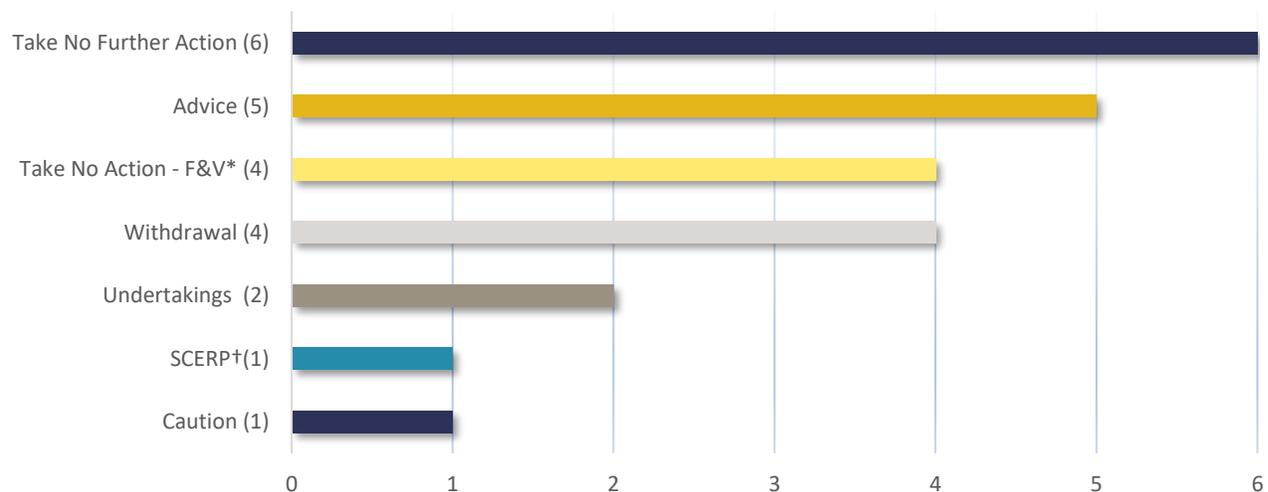


### ICRC Meetings

The ICRC met on March 23, April 21, and May 25, 2021 to consider a total of 36 cases. The ICRC also held 16 teleconferences to consider 28 cases. The next meeting is scheduled for June 17, 2021, where 7 cases are scheduled to be discussed. An ICRC Plenary session was also held on April 14, 2021, to discuss various policy issues related to the Committee.

### ICRC Dispositions

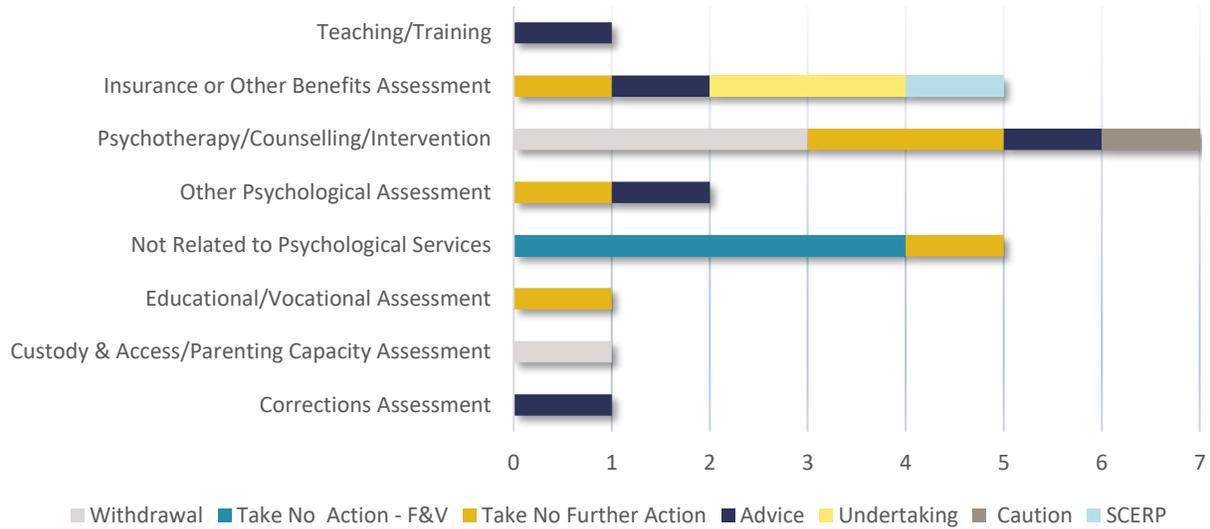
The ICRC disposed of 23 cases during the 3<sup>rd</sup> Quarter, as follows:



\*F&V: Frivolous, vexatious, made in bad faith, moot or otherwise an abuse of process, pursuant to s.26(4) of the Health Professions Procedural Code.

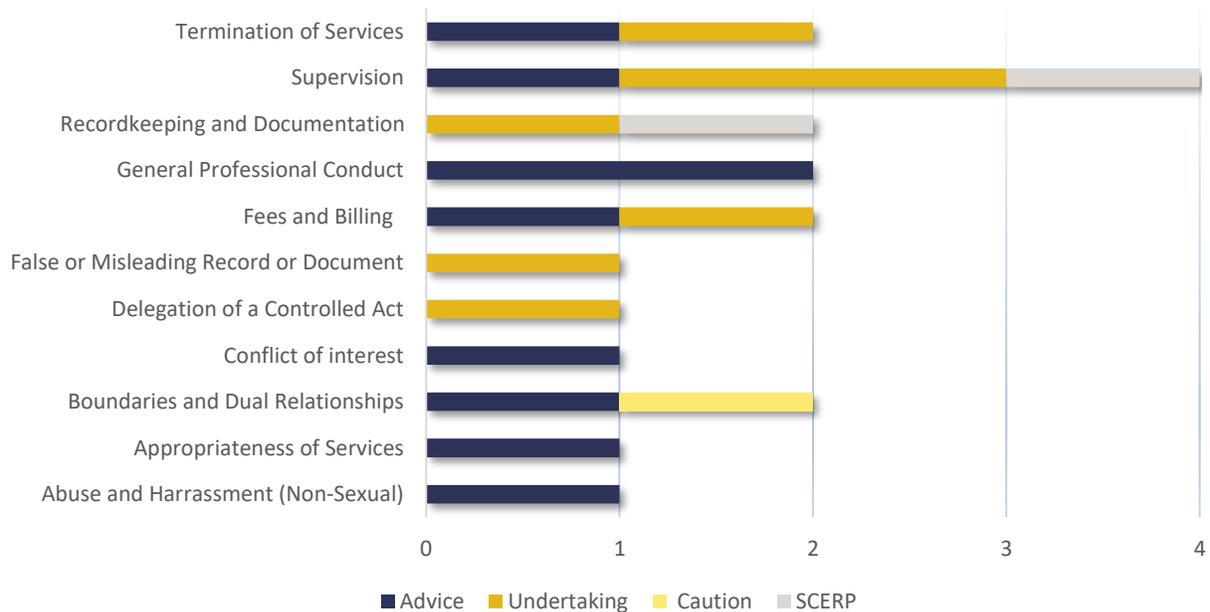
†SCERP: Specified Continuing Education or Remediation Program.

The dispositions of these 23 cases, as they relate to nature of service, are as follows:



**Disposition of Allegations**

The 23 cases disposed of included the consideration of 66 allegations. The ICRC took some remedial action with respect to 19, or 29%, of these allegations.



**Health Professions Appeal and Review Board (HPARB)**

In the 4<sup>th</sup> Quarter, two HPARB reviews of ICRC decisions were requested. The College received the results of four HPARB reviews of ICRC decisions. All four ICRC decisions were confirmed.

**SUBMITTED BY**

Denise Milovan, Ph.D., C.Psych., Chair

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## BRIEFING NOTE

2021.03.04D

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### JUNE 2021 COUNCIL

### SIGNING AUTHORITIES

#### STRATEGIC DIRECTION REFLECTION

*Advancing the Council's governance practices*

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#### MOTION FOR CONSIDERATION

As [TBD] has been elected President and [TBD] elected as Vice-President; that their names be added to the list of signing officers; and

As the President resides outside of the GTA, that [TBD] be added to the list of signing officers as per section 9.8.5 of *By-law 9: Banking and Finance*; and

As Michael Grand, Denise Milovan and Janice Currie are no longer on Council, that their names be removed as signing officers.

**Moved By** TBD

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#### BACKGROUND

*By-law 9: Banking and Finance* requires that:

- 9.8.1 For any amount, either the Registrar or the Deputy Registrar plus one of the President, the Vice President, or a member or members of Council appointed in accordance with Section 9.8.5;
- 9.8.2 For amounts up to \$7,500, the Registrar and the Deputy Registrar; or either the Registrar or the Deputy Registrar plus either the Director, Registration, the Director, Investigations and Hearings or the Director, Corporate Services;
- 9.8.3 Notwithstanding the above, for amounts up to \$35,000, the signing officers identified in 9.8.2 shall also be authorized to sign all cheques for: (1) mandatory employer remittances to the Canada Customs and Revenue Agency including payroll deductions and employer contributions; (2) monthly rent or mortgage payments for College premises; and (3) monthly premium payments for employee benefits.
- 9.8.4 Signing officers shall be provided with a duly approved invoice or purchase order in support of any cheque to be signed.
- 9.8.5 For purposes of paragraph 9.8.1, where either the President or the Vice-President resides in the Greater Toronto Area (GTA), Council shall appoint as a signing officer one other member of the Council who resides in the GTA. If neither the President nor the Vice-President resides in the GTA, Council shall appoint as signing officers two other members of the Council who reside in the GTA.

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#### CONTACT FOR QUESTIONS

Dr. Rick Morris, Registrar & Executive Director

## STRATEGIC DIRECTION 2017-2022

2021.03.05A

### **VISION** *[What we aspire to be]*

The College strives for excellence in self-regulation in service of the public interest.

### **MISSION** *[Why we exist]*

To regulate the practice of psychology in serving and protecting the public interest

### **STRATEGIES** *[How we accomplish our Mission]*

In accomplishing our Mission, the College promotes excellence in the practice of psychology by:

- Enforcing standards fairly and effectively through:
  - Developing, establishing, and maintaining standards of qualifications for individuals seeking registration,
  - Developing, establishing, and maintaining standards of practice and professional ethics for all members,
  - Developing, establishing, and maintaining standards of knowledge and skill and programs to promote continuing evaluation, competence, and improvement among members;
- Communicating clearly and effectively with stakeholders, particularly applicants, members, and the public;
- Supporting and assisting members to meet high standards;
- Responding to changing needs in new and emerging practice areas;
- Collaborating in shaping the regulatory environment;
- Acting in a responsibly transparent manner; and,
- Advancing the Council's governance practices.

### **VALUES** *[What we uphold in all our activities]*

#### Fairness

The College approaches decisions in a just, reasonable, and impartial manner.

#### Accountability

The College acts in an open, transparent, and responsible manner and communicates about its processes.

#### Integrity

The College acts honestly, ethically, and responsibly.

#### Respect

The College treats members of the public, members of the College, prospective members, and other stakeholders with respect.

## IMPLEMENTATION CHART - UPDATED MAY 31, 2021

Agenda Key	MISSION: To regulate the practice of psychology in serving and protecting the public interest by:	Current/Recent Examples	In Development/Proposed Examples
M1	<ul style="list-style-type: none"> <li>• Enforcing standards fairly and effectively through:               <ul style="list-style-type: none"> <li>– Developing, establishing, and maintaining standards of qualifications for individuals seeking registration,</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Revised the manner for recording Oral Exam results when not all areas of practice/client groups are authorized (September 2016)</li> <li>• Issuance of IAP Certificate for temporary and limited practice by practitioners registered in other jurisdictions (June 2019)</li> <li>• Setting the JEE pass point to Ontario first time test takers. (December 2019)</li> <li>• Amendments to the <i>Guidelines for Completing the Declaration of Competence</i> (December 2019)</li> <li>• Amendments to the Guidelines for Retraining for Supervised Practice (March 2020)</li> <li>• Transitioning to Online Administration of the JEE (November 2020)</li> </ul>	<ul style="list-style-type: none"> <li>• Pursue amendments to O.Reg. 74/15 under the Psychology Act, 1991 to discontinue Master's level registration and at that time, grant the title Psychologist to all existing Psychological Associates. (September 2019)</li> <li>• Supervision Resource Manual Working Group formed (September 2020)</li> <li>• Establish a process to assess all CFTA candidates on their competence to perform the controlled act of communication of a diagnosis. (December 2020)</li> </ul>
M2	<ul style="list-style-type: none"> <li>• Enforcing standards fairly and effectively through:               <ul style="list-style-type: none"> <li>– Developing, establishing, and maintaining standards of practice and professional ethics for all members,</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Review of Standards of Professional Conduct (Fall 2016)</li> <li>• Adoption of new <i>Standards of Professional Conduct</i>, to go into effect September 1, 2017 (March 2017)</li> <li>• Implementation of the ICRC Risk Rubric (August 2017)</li> <li>• <b>Update to the <i>Standards of Professional Conduct, 2017</i> with regards to the language of clinical records (March 2021)</b></li> <li>• <b><i>Standards of Professional Conduct, 2017</i> updated with gender neutral language (March 2021)</b></li> </ul>	

M3	<ul style="list-style-type: none"> <li>• Enforcing standards fairly and effectively through: <ul style="list-style-type: none"> <li>– Developing, establishing, and maintaining standards of knowledge and skill and programs to promote continuing evaluation, competence, and improvement among members</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Quality Assurance Committee began auditing CPD forms. (Fall 2019)</li> </ul>	
M4	<ul style="list-style-type: none"> <li>• Communicating clearly and effectively with stakeholders, particularly applicants, members, and the public</li> </ul>	<ul style="list-style-type: none"> <li>• Publication of quarterly <i>e-Bulletin</i></li> <li>• Staff presentations to students and member groups (ongoing)</li> <li>• Strategic Direction 2017 – 2022 to members</li> <li>• Executive Committee Reception with London members (May 2017)</li> <li>• Executive Committee Reception with Guelph members (November 2017)</li> <li>• Proposed Policy II-3(iii) Appearance before a panel of the ICRC to be Cautioned (December 2017)</li> <li>• College Communications Plan (March 2018)</li> <li>• Executive Committee Reception with Kingston Members (May 2018)</li> <li>• Use of Title Consultation (February 2019)</li> <li>• Executive Committee Reception with Thunder Bay members (May 2019)</li> <li>• Executive Committee Reception with Hamilton members (November 2019)</li> <li>• New College Logo, as part of Communications Plan, Approved (December 2019)</li> <li>• Launch of new quarterly newsletter, <i>HeadLines</i> (July 2020)</li> <li>• Launch of new Website (August 2020)</li> <li>• Launch of Social Media (October 2020)</li> <li>• Approval of support for victims of sexual abuse and misconduct to be implemented January 1, 2021 (September 2020)</li> </ul>	<ul style="list-style-type: none"> <li>• COVID-19 Updates (Spring 2020) and ongoing</li> <li>• Work with Ministry of Health and local Public Health Units in member vaccine notification (Spring 2021 and ongoing)</li> </ul>

M5	<ul style="list-style-type: none"> <li>Supporting and assisting members to meet high standards</li> </ul>	<ul style="list-style-type: none"> <li>Practice Advice Service (ongoing)</li> <li>Barbara Wand Symposium (December 2016)</li> <li>Revision of the <i>Self-Assessment Guide and Professional Development Plan</i> (May 2017)</li> <li>Continuing Professional Development (CPD) Program Implemented</li> <li>Examination and Corporation Fee reduced (June 2017)</li> <li>Practical Applications within new <i>Standards</i> to be continuously updated (June 2017)</li> <li>Barbara Wand Symposium in Ottawa (June 2017)</li> <li>Updated Policy II-3(ii) Release of the Member's Response to the Complainant (June 2017)</li> <li>Frequently Ask Questions for the new <i>Standards</i> and CPD Program continuously updated (August 2017)</li> <li>Barbara Wand Seminar (January 2018)</li> <li>Barbara Wand Seminar (June 2018)</li> <li>Peer Assisted Reviewer Training (November 2018)</li> <li>French Language translations of new <i>Standards</i> completed (November 2018)</li> <li>Barbara Wand Seminar (January 2019)</li> <li>Guidelines for CPD published in <i>e-Bulletin</i> (January 2019)</li> <li>Release of new materials for the prevention of boundary violations and sexual abuse, including discussion guide.</li> <li>Barbara Wand Seminar (June 2019)</li> <li>Peer Assisted Reviewer Training (November 2019)</li> <li>Barbara Wand Seminar (December 2019)</li> </ul>	<ul style="list-style-type: none"> <li><b>Barbara Wand Seminar (June 10, 2021)</b></li> </ul>
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		<ul style="list-style-type: none"> <li>• Barbara Wand Seminar (September 2020)</li> </ul>	
M6	<ul style="list-style-type: none"> <li>• Responding to changing needs in new and emerging practice areas</li> </ul>	<ul style="list-style-type: none"> <li>• New technological standard within the revised <i>Standards of Professional Conduct 2017</i></li> <li>• <b>Equity, Diversity and Inclusion Working Group formed (October 2020)</b></li> </ul>	<ul style="list-style-type: none"> <li>• Equity, Diversity and Inclusion Working Group formed (October 2020)</li> </ul>
M7	<ul style="list-style-type: none"> <li>• Collaborating in shaping the regulatory environment</li> </ul>	<ul style="list-style-type: none"> <li>• Participation in ASPPB, ACPRO, FHRCO</li> <li>• College participation in inter-College Psychotherapy Working Group</li> <li>• FHRCO Sexual Abuse Prevention Task Force Chaired by Deputy Registrar (2016-2017)</li> <li>• College participation in FHRCO discussions regarding Bill 87 (transparency and other changes to the RHPA)</li> <li>• College Council responded to the Standing Committee on Bill 87 (March 2017)</li> <li>• Submission to HPRAC, re: Psychotherapy (October 2017)</li> <li>• Submission to MOHLTC on regulation amendments in the Health Professions Procedural Code (March 2018)</li> <li>• Submission to Ontario Regulation Registry on Psychotherapy (June 2018)</li> <li>• Confirmation to Pursue Regulation of ABA (September 2019)</li> <li>• Discussions with the MOH and MCCSS regarding regulation of ABA (November 2017)</li> <li>• Applied Behaviour Analysis Working Group Formed (December 2020)</li> <li>• <b>Applied Behaviour Analysis Working Group formed (December 2020)</b></li> <li>•</li> </ul>	



		<ul style="list-style-type: none"> <li>• <b>College Performance Management Framework (March 2021)</b></li> <li>• <b>Council Composition recommendation provided to the Ministry of Health for the regulation of ABA (March 19, 2021)</b></li> </ul>	
M8	<ul style="list-style-type: none"> <li>• Acting in a responsibly transparent manner</li> </ul>	<ul style="list-style-type: none"> <li>• Posting of Council materials on website in advance of meetings (June 2016)</li> <li>• Council and Executive to declare Conflicts of Interest at start of each meeting (June 2017)</li> <li>• Amendments to <i>By-law 18: Fees</i> (December 2017)</li> <li>• Amendments to <i>By-law 25: The Register and Related Matters</i> (June 2018)</li> <li>• Amendments to <i>By-law 5: Selection of Committee Chairs and Committee Members</i> and <i>By-law 21: Committee Composition</i> (September 2018)</li> <li>• Consultation on <i>By-Law 18: Fees</i> (June 2019)</li> <li>• Process implemented for temporary practice in Ontario with existing clients by registrants from other jurisdictions</li> <li>• Amendments to <i>By-Law 18: Fees</i> (September 2019)</li> </ul>	
M9	<ul style="list-style-type: none"> <li>• Advancing the Council's governance practices</li> </ul>	<ul style="list-style-type: none"> <li>• New Briefing Note format for Council materials</li> <li>• March 2017 Council Training Day</li> <li>• Revision to Role of the Executive Committee</li> <li>• Agenda to Reflect Strategic Direction of Item</li> <li>• Introduction of Board Self-Assessment process (June 2017)</li> </ul>	

		<ul style="list-style-type: none"> <li>• Amendments to <i>By-law 20: Elections to Council</i>. . . (December 2017)</li> <li>• Two Committee Audits Planned for 2017-2018</li> <li>• HIROC Risk Management System implemented (September 2017)</li> <li>• Sunsetting of Nominations and Leadership Development Committee; role incorporated into the Executive Committee (September 2020)</li> </ul>	
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**Notes: Some items could be entered in more than one place. When an item could belong to more than one area, it has been placed in the primary category.**

**The items shown in BLUE have been added by the Registrar since March 2021 as activities undertaken in service of the College's Strategic Directions 2017 - 2022**