



COLLEGE OF
PSYCHOLOGISTS
OF ONTARIO

MEETING OF THE COLLEGE COUNCIL

2022.03

DATE: SEPTEMBER 23, 2022

TIME: 9:00AM - 1:00PM

LOCATION: TO BE HELD VIRTUALLY

110 Eglinton Avenue West, Suite 500
Toronto, Ontario, Canada M4R 1A3
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COUNCIL MEETING AGENDA

2022.03

SEPTEMBER 23, 2022
9:00 AM to 1:00 PM

AGENDA ITEM	TOPIC	ACTION	PAGE #	STRATEGIC DIRECTION*
.00	CALL TO ORDER			
.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 2022.02 June 17, 2022	Decision	4	
.01D	Review of Action List	Discussion	12	
.01E	Council Meeting Evaluation Review	Discussion	14	
.02	CONSENT AGENDA ITEMS	Information		
.02A	Committee Reports	--	--	--
	(1) Executive Committee Report		16	
	(2) Discipline Committee Report		18	
	(3) Quality Assurance Committee Report		20	
	(4) Client Relations Committee Report		22	
	(5) Fitness to Practice Committee Report		23	
	(6) Finance & Audit Committee Report		24	
	(7) Equity, Diversity, and Inclusion Working Group Report		28	
	(8) ABA Working Group Report		29	
.03	POLICY ISSUES			
.03A	Supervision Resource Manual	Receive	31	M1
.03B	ABA Regulations for Circulation	Decision	79	M1/M4/M7
.04	BUSINESS ISSUES			
.04A	President's Report	Information	118	M9
.04B	Registrar & Executive Director's Report	Information	120	M9
.04C	Registration Committee Quarterly Report	Information	121	M9
.04D	Inquiries, Complaints and Reports Committee Quarterly Report	Information	123	M9
.04E	2021-2022 Annual Reports	Decision	127	M9
.04F	Audit 2021-2022: Audited Financial Statements Year-Ending May 31, 2022 – Presentation of Audited Financial Statements by Ms. Liana Bell and Mr. Deric Chan, Hilborn LLP (10:00AM)	Presentation	155	M8
	(1) Approval of Audited Financial Statements	Decision	--	M8
	(2) Appointment of Auditors for 2022-2023	Decision	--	M8

AGENDA ITEM	TOPIC	ACTION	PAGE #	STRATEGIC DIRECTION*
.04G	Transfers from the Investigations and Hearings and the Fee Stabilization Reserve Funds	Decision	183	M9
.05	STRATEGIC ISSUES			
.05A	Strategic Direction Implementation: Chart Update	Discussion	187	All
.06	OTHER BUSINESS			
.06B	Next Council Meeting: <ul style="list-style-type: none"> December 16, 2022 	Information	--	--
.06C	Proposed Council Meeting: <ul style="list-style-type: none"> March 23-24, 2023 	Decision	--	--
.07	IN CAMERA ITEMS			
.07A	Development of a Knowledge or Competency Examination for Registration of Behaviour Analysts ¹	Decision	--	M1
.07B	Search Committee Update ²	Information	--	
.08	ADJOURNMENT			

*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.*

¹ Legal/Financial Contract Matter

² Personnel Matter



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COUNCIL MEETING

2022.02

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

6

7

JUNE 17, 2022

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PRESENT:10 **Wanda Towers**, Ph.D., C.Psych., President11 **Marjory Phillips**, Ph.D., C.Psych., Vice-President12 **Paula Conforti**, Dip.C.S., C.Psych.Assoc.13 **Marilyn Keyes**, Ph.D., C.Psych.14 **Carolyn Kolers**, Public Member15 **David Kurzman**, Ph.D., C.Psych.16 **Archie Kwan**, Ph.D., C.Psych.17 **Conrad Leung**, M.ADS, BCBA18 **Melanie Morrow**, M.A., C.Psych.Assoc.19 **Ian Nicholson**, Ph.D., C.Psych.20 **Cenobar Parker**, Public Member21 **Fred Schmidt**, Ph.D., C.Psych.22 **Paul Stopciati**, Public Member23 **Kendra Thomson**, Ph.D., BCBA-D24 **Scott Warnock**, Public Member

25

REGRETS:27 **Ilia Maor**, Public Member28 **Nadia Mocan**, Public Member29 **Adrienne Perry**, Ph.D., C.Psych.30 **Esther Vlessing**, Public Member

31

STAFF:33 **Rick Morris**, Ph.D., C.Psych., Registrar & Executive Director34 **Barry Gang**, MBA, Dip.C.S., C.Psych.Assoc., Deputy Registrar & Director, Professional Affairs35 **Zimra Yetnikoff**, Director, Investigations & Hearings36 **Lesia Mackanyn**, Director, Registration37 **Stephanie Morton**, Director, Corporate Services38 **Caitlin O'Kelly**, Assistant to the Registrar, Recorder

39

2022.02.00 CALL TO ORDER

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

43

44 The Registrar welcomed new Council members Dr. Fred Schmidt representing District 1 (North),

45 Dr. Ian Nicholson representing District 2 (Southwest) and returning Council member Dr. Wanda

46 Towers representing District 3 (Central) and Dr. Adrienne Perry who was reappointed to an
47 academic Council seat. The Registrar also welcomed one new public member recently appointed
48 to the College Council, Ms. Carolyn Kolers. Also joining Council are Mr. Conrad Leung and Dr.
49 Kendra Thomson who have been newly appointed to the College Council as non-voting members
50 representing the profession of Applied Behaviour Analysis.

51

52 **2022.00.00B ELECTIONS TO THE EXECUTIVE COMMITTEE**

53 The Registrar informed the Council that the first order of business was the election of the
54 Executive Committee and confirmed that Council members had received the *Statements of*
55 *Interest* submitted by those wishing to run for positions on the Executive.

56

57 The Registrar confirmed that *Statements of Interest* had been received for the following positions:
58 President, Vice-President, one Professional Member and two Public Members. Prior to each
59 election, the Registrar provided Council members with the opportunity to ask questions of each
60 candidate.

61

62 The Registrar announced that since only one nomination had been received for the position of
63 President, Dr. Wanda Towers was acclaimed as President.

64

65 The Registrar announced that since only one nomination had been received for the position of
66 Vice-President, Dr. Marjory Phillips was acclaimed as Vice-President.

67

68 *By-law 21: Committee Composition* requires four members of the Council, who are members of
69 the College, to be on the Executive Committee. Dr. Wanda Towers, as President, and Dr. Marjory
70 Phillips as Vice-President fill two of these seats. To satisfy the requirement that every Committee
71 have Psychological Associate representation, Ms. Paula Conforti as the only Psychological
72 Associate member on Council, was acclaimed to one of the two remaining Professional Member
73 seats. After a call for nominations from the floor to fill the remaining professional member seat,
74 Dr. Ian Nicholson's name was put forward and he was acclaimed.

75

76 *By-law 21: Committee Composition* requires the Executive Committee have two members
77 appointed to the College Council by the Lieutenant Governor in Council. Since there were only
78 two nominations submitted for these positions, Mr. Scott Warnock and Mr. Paul Stopciati were
79 acclaimed to these seats.

80

81 **Executive Committee 2022-2023**

82 Wanda Towers, Professional Member, President

83 Marjory Phillips, Professional Member, Vice-President

84 Paula Conforti, Professional Member

85 Ian Nicholson, Professional Member

86 Paul Stopciati, Public Member

87 Scott Warnock, Public Member

88

89 The Registrar congratulated the new Executive Committee and requested that the President, Dr.
90 Wanda Towers, take the Chair and conduct the proceedings of Council. The President began the

91 meeting with a land acknowledgement statement in recognition and respect for Indigenous
92 peoples.

93

94 **2022.02.01 APPROVAL OF THE AGENDA AND MINUTES**

95

96 **.01A APPROVAL OF AGENDA**

97

98 **It was MOVED by M. Phillips**

99 **That the Agenda for the Council Meeting be approved as presented. CARRIED**

100

101 **.01B DECLARATIONS OF CONFLICTS OF INTEREST**

102 The President asked if any members of Council wished to declare a conflict of interest pertaining
103 to the items on the Agenda. No declarations were made however, Council recognized that as
104 item .03D FAC Policy Reviews related to Council and Committee per diems, this posed an
105 unavoidable conflict for all professional members. The President reminded Council members that
106 the potential for conflicts should be kept in mind throughout the meeting and declarations made
107 at any time, if appropriate.

108

109 **.01C MINUTES FROM THE COUNCIL MEETING 2022.01 MARCH 11, 2022**

110

111 **It was MOVED by D. Kurzman**

112 **That the Minutes from the Council Meeting 2022.01 of March 11, 2022, be approved as**
113 **presented. CARRIED**

114

115 **It was MOVED by M. Phillips**

116 **That the IN CAMERA Minutes from the Council Meeting 2022.01 of March 11, 2022, be approved**
117 **as presented. CARRIED**

118

119 **.01D REVIEW OF ACTION LIST**

120 The Council reviewed the Action List drawn from the minutes of the previous meeting and noted
121 items that were completed, outstanding or on the Agenda at today's meeting.

122

123 The Registrar discussed the following item from the Action List:

- 124 • Hire a project researcher to develop a report to further Council's decision to close master's
125 level registration.

126

127 The Registrar reported that Dr. Paula Garshowitz has agreed to take on this work as project
128 researcher. Dr. Garshowitz's background is in health College regulation, and she was the former
129 Registrar for the College of Optometrists of Ontario. She brings a strong understanding of
130 regulation to this role and has been working with the College as the Project Lead for the
131 implementation for ABA regulation.

132

133 **.01E COUNCIL MEETING EVALUATION REVIEW**

134 The Council reviewed the March 11, 2022, Council Meeting Evaluation results. There were no
135 questions or comments.

136

137 **2022.02.02 CONSENT AGENDA**

138 The Consent Agenda was received.

139

140 **2022.02.03 POLICY ISSUES**

141

142 **.03A POLICY II-4(II): SUPPORT TO WITNESSES AT HEARINGS**

143 The Deputy Registrar provided Council with a Briefing Note outlining recommended amendments
144 to *Policy II-4(iii): Support to Witnesses at Hearings*. The amendments remove redundancies with
145 other College policies but also recognized the need to avoid a perception of bias by moving
146 responsibility for consideration of an application for support for College witnesses from the
147 Discipline Committee. The Council reviewed and discussed the proposed amendments.

148

149 **It was MOVED by P. Stopciati**

150 **That amendments to *Policy II-4(iii): Support to Witnesses at Hearings* be approved. CARRIED**

151

152 **Action Item Office of the Registrar**

153 Amend *Policy II-4(iii): Support to Witnesses at Hearings* in the *Colleges Policies and Procedures*
154 *Manual*.

155

156 **.03B NEW POLICY III-F7: RATE SCHEDULE FOR AUTHORIZED PROFESSIONAL SERVICES**

157 The Deputy Registrar provided Council with a Briefing Note describing a proposed new policy;
158 *Policy III-F7: Rate Schedule for Authorized Professional Service*. In the spring 2022, the Board of
159 Directors of the Ontario Psychological Association (OPA) decided it would no longer establish a
160 rate schedule for the profession. It was noted that a number of College policies or processes
161 reference “the schedule of fees currently published for the profession” which has been adopted
162 as that set by the OPA. As the professional association is no longer setting this rate, the Executive
163 Committee recommended that the College establish a policy to set out a maximum rate as it
164 pertains to College contracted services. The Executive recommended the rate of \$225 per hour,
165 which was the most recent rate recommended by the professional association. The Council
166 reviewed and discussed the proposed policy.

167

168 It was clarified that this policy only pertains to College contracted services and is not related to
169 the fees a member may establish for their practice as the College does set the fee rates for
170 members. This is addressed in College’s *Standards of Professional Conduct, 2017* section 11.1 *Fees*
171 *and Billing Arrangements*:

172

173 “Members must reach an agreement with an individual, group or organization concerning
174 the psychological services to be provided, the fees to be charged and the billing
175 arrangements prior to providing psychological services. Any changes in the services to be
176 provided must be agreed to by the client before service is delivered or fees are
177 changed. Fees must be based on amount of time spent and complexity of the services
178 rendered.”

178

179 In recommending the rate of \$225, the Executive Committee noted that this was the last rate set
180 by the association and is the rate the College currently uses. Concern was expressed that this rate
181 may be viewed as too low and therefore result in difficulty attracting members to undertake
182 necessary work. The Registrar reported that to date no issues have been encountered in using

183 this rate to obtain the services of members to act as experts, for example. Similar to other College
 184 policies, this policy, including the rate of \$225, will be reviewed every three years but can be
 185 reviewed sooner if it is seen to be necessary.

186
 187 In response to a suggestion that the College not set a maximum rate, it was explained that this
 188 would have significant consequences especially within the area of ICRC. For example, using a set
 189 rate the College is able to inform a member who is required to undertake coaching or remediation
 190 of their cost. As well, having a set rate removes the need for the College to enter into fee
 191 negotiations each time a service is required. It was also noted that the maximum rate is per hour
 192 and that if an expert was reviewing a difficult and complex case, there is no maximum set on the
 193 number of hours this may take which will be billed. Following this discussion, Council agreed that
 194 it is better to establish a maximum rate rather than to leave it open-ended.

195
 196 As a point of process, it was noted that should the professional association decide to set a rate in
 197 future, this policy could go back to the Finance and Audit Committee for their consideration.
 198

199 **It was MOVED by S. Warnock**
 200 **That *Policy III-F7: Rate Schedule for Authorized Professional Services* be approved with the**
 201 **amendment that the next review date be changed:**
 202 **From: 2025/2026**
 203 **To: 2025/2026 or earlier as required. CARRIED**

204
 205 **Action Item Office of the Registrar**
 206 *Amend Policy III-F7: Rate Schedule for Authorized Professional Services in the Colleges Policies and*
 207 *Procedures Manual.*

208
 209 **.03C FINANCE AND AUDIT COMMITTEE POLICIES FOR REVIEW**

210 The Registrar provided Council with a Briefing Note outlining the recommended amendments to
 211 several Finance and Audit Committee policies that were due for review.
 212

213 **It was MOVED by P. Stopciati**
 214 **That the following policy amendments be approved:**
 215 • ***Policy III F – 1: Budget Development***
 216 • ***Policy III F – 3: Financial Reporting***
 217 • ***Policy III F – 4: Per Diems & Council and Committee Compensation***
 218 • ***Policy III F – 5: Expense Reimbursement***
 219 • ***Policy III F – 6: Registrar’s Expense Approval***
 220 • ***Policy III P – 1: Employee Compensation and Benefits***
 221 • ***Policy III P – 2: Presentation Honoraria and Expenses*** **CARRIED**

222
 223 **Action Item Office of the Registrar**
 224 *Amend the following policies in the Colleges Policies and Procedures Manual:*
 225 • *Policy III F – 1: Budget Development*
 226 • *Policy III F – 3: Financial Reporting*
 227 • *Policy III F – 4: Per Diems & Council and Committee Compensation*
 228 • *Policy III F – 5: Expense Reimbursement*

- 229 • *Policy III F – 6: Registrar’s Expense Approval*
- 230 • *Policy III P – 1: Employee Compensation and Benefits*
- 231 • *Policy III P – 2: Presentation Honoraria and Expenses*

232
233 **.03D EXECUTIVE COMMITTEE POLICIES FOR REVIEW**

234 The Registrar provided Council with a Briefing Note outlining the recommended amendments to
235 several Executive Committee policies that were due for review.

237 **It was MOVED by P. Conforti**

238 **That the following policy amendments be approved:**

- 239 • *Policy I - 2: Council & Committee Orientation and Training*
- 240 • *Policy I – 2a: Code of Conduct*
- 241 • *Policy I – 4: Observers and Guests at Council Meetings Procedures and Policy*
- 242 • *Policy I – 13: Non-voting Psychological Associate Council Member* **CARRIED**

244 **Action Item Office of the Registrar**

245 Amend the following policies in the Colleges *Policies and Procedures Manual*:

- 246 • *Policy I - 2: Council & Committee Orientation and Training*
- 247 • *Policy I – 2a: Code of Conduct*
- 248 • *Policy I – 4: Observers and Guests at Council Meetings Procedures and Policy*
- 249 • *Policy I – 13: Non-voting Psychological Associate Council Member*

251 **.03E NEW POLICY 1-14: SUCCESSION PLAN FOR THE POSITION OF REGISTRAR & EXECUTIVE**
252 **DIRECTOR**

253 The Registrar provided Council with a Briefing Note describing proposed *Policy I-14: Succession*
254 *Plan for the Position of Registrar & Executive Director*. In 2015, the College Council approved the
255 *Succession Plan for the Position of Registrar & Executive Director*. At that time, a working group
256 was established to consider the steps to be taken in the event that the position of Registrar &
257 Executive Director became vacant. The approved Plan addressed both planned and emergency
258 vacancies. The *Plan* has remained as a standalone document since its development although, as
259 required, it has been updated every year following the June Council meeting. The Executive
260 Committee is recommending the standalone document be moved into official College policy.

262 **It was MOVED by C. Parker**

263 **That draft *Policy I-14: Succession Plan for the Position of Registrar & Executive Director* be**
264 **approved.** **CARRIED**

266 **Action Item Office of the Registrar**

267 Add *Policy I-14: Succession Plan for the Position of Registrar & Executive Director* in the Colleges
268 *Policies and Procedures Manual*.

270 **.03F SUBMISSION ON BILL 106 – REGISTRATION BARRIERS**

271 On April 14, 2022, Bill 106, [Pandemic and Emergency Preparedness Act, 2022](#) received Royal
272 Assent. This statute contains a number of provisions related to emergency preparedness with
273 [Schedule 6](#) of particular interest to the health Colleges. As noted in a memo from Mr. Sean Court,

274 Assistant Deputy Minister, Ministry of Health, the Schedule amends the *Regulated Health*
275 *Professions Act, 1991* to:

- 276 • Prohibit health regulatory Colleges from requiring applicants to have Canadian experience
- 277 unless an exception is provided in the regulations;
- 278 • Require timely registration decisions;
- 279 • Streamline requirements for demonstrating language proficiency;
- 280 • Require health regulatory Colleges to have emergency classes of registration to enable
- 281 expedited registration where necessary; and
- 282 • Provide regulation making power to operationalize these changes.

283
284 The proposed regulation was posted on the Ontario Regulatory Registry with requests for
285 consultation submissions by June 10, 2022. The proposed regulation was discussed at the
286 Executive Committee meeting of May 6, 2022, and the Registrar & Executive Director was directed
287 to prepare a submission on behalf of the College. Given the June 10, 2022 deadline, it was not
288 possible for the proposed submission to be approved by Council. The Executive Committee
289 reviewed the proposed submission and approved it on behalf of the Council. This submission is
290 consistent with the information provided to Mr. Court regarding *Governance Reform and*
291 *Regulatory Modernization* on February 22, 2022.

292

293 **2022.02.04 BUSINESS ISSUES**

294

295 **.04A PRESIDENT'S REPORT**

296 The Council reviewed the President's Report for the fourth quarter. There were no questions or
297 comments.

298

299 **.04B REGISTRAR & EXECUTIVE DIRECTOR'S REPORT**

300 The Council reviewed the Registrar's Report for the fourth quarter. There were no questions or
301 comments.

302

303 **.04C REGISTRATION COMMITTEE QUARTERLY REPORT**

304 The Council reviewed the fourth quarter report and there were no questions or comments. Dr.
305 Phillips reported that the Supervision Resource Manual revision has been distributed to the
306 membership for consultation and that the Registration Committee will be undertaking a review
307 of the Oral Examination process.

308

309 **.04D INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE QUARTERLY REPORT**

310 The Council reviewed the fourth quarter report and there were no questions or comments.

311

312 **.04E DIRECTORS OF CLINICAL TRAINING PROGRAMS MEETING REPORT**

313 An oral report was provided regarding the meeting of the Directors of Clinical Training and the
314 Internship Directors held on May 5, 2022. Topics included:

- 315 • CPA Accreditation Standards changes and implementation of EDI practices
- 316 • Impacts of Covid 19 on clinical training
- 317 • Emerging gaps in training
- 318 • Masking; teletherapy: Impact on training
- 319 • Self-care

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.04F SIGNING OFFICERS

As Dr. Wanda Towers has been re-elected President and Dr. Marjory Phillips re-elected as Vice-President their names will continue to be on list of signing officers. As well, since the President resides outside of the GTA, Ms. Paula Conforti will continue to be on the list of signing officers as per section 9.8.5 of *By-law 9: Banking and Finance*.

2022.02.05 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 March 11, 2022, were shown in **Bold**.

2022.02.06 OTHER BUSINESS

.06A NEXT COUNCIL MEETINGS:

- o September 23, 2022
- o December 16, 2022

Council discussed the future of in person meetings. The September meeting will be virtual. Executive is discussing have the spring meeting be in person and combined with a training day.

2022.02.07 ADJOURNMENT

There being no further business,

**It was MOVED by S. Warnock
That the Council Meeting be adjourned. CARRIED**

The Council Meeting was adjourned at 11:03AM.

Wanda Towers, Ph.D., C.Psych., President

Marjory Phillips, Ph.D., C.Psych., Vice-President

Minutes approved at the Council Meeting on September 23, 2022.

ACTION LIST

2022.03.01D

COUNCIL MEETING 2022.02 June 17, 2022

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
2020.04.03A	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; undertaken in conjunction with Oral Examination review
2022.02.03A	Office of the Registrar	Amend <i>Policy II-4(iii): Support to Witnesses at Hearings</i> in the <i>Colleges Policies and Procedures Manual</i> .	Completed
2022.02.03B	Office of the Registrar	Amend <i>Policy III-F7: Rate Schedule for Authorized Professional Services</i> in the <i>Colleges Policies and Procedures Manual</i> .	Completed
2022.02.03C	Office of the Registrar	Amend the following policies in the <i>Colleges Policies and Procedures Manual</i> : <ul style="list-style-type: none"> • <i>Policy III F – 1: Budget Development</i> • <i>Policy III F – 3: Financial Reporting</i> • <i>Policy III F – 4: Per Diems & Council and Committee Compensation</i> • <i>Policy III F – 5: Expense Reimbursement</i> • <i>Policy III F – 6: Registrar's Expense Approval</i> • <i>Policy III P – 1: Employee Compensation and Benefits</i> • <i>Policy III P – 2: Presentation Honoraria and Expenses</i> 	Completed
2022.02.03D	Office of the Registrar	Amend the following policies in the <i>Colleges Policies and Procedures Manual</i> : <ul style="list-style-type: none"> • <i>Policy I - 2: Council & Committee Orientation and Training</i> • <i>Policy I – 2a: Code of Conduct</i> • <i>Policy I – 4: Observers and Guests at Council Meetings Procedures and Policy</i> 	Completed

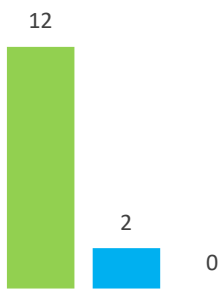
Item:	Responsibility:	Action:	Status:
		<ul style="list-style-type: none"> • <i>Policy I – 13: Non-voting Psychological Associate Council Member</i> 	
2022.02.03E	Office of the Registrar	<p><i>Add Policy I-15: Succession Plan for the Position of Registrar & Executive Director to the Colleges Policies and Procedures Manual.</i></p>	Completed

COUNCIL MEETING EVALUATION SUMMARY

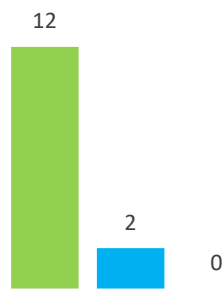
COUNCIL MEETING JUNE 17, 2022

14/15 COUNCIL MEMBERS PRESENT COMPLETED EVALUATIONS

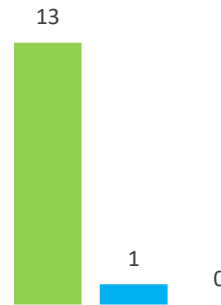
■ Very Good/Excellent ■ Good/OK ■ Needs Improvement



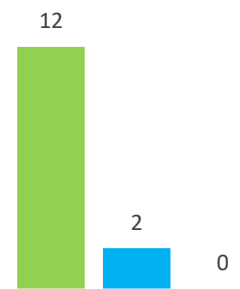
Q1: The Council meeting materials were received in a timely manner.



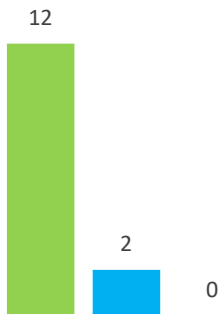
Q2: The materials were sufficient to assist me in forming an opinion on decisions to be made by Council. Briefing Notes and Reports were clear and contained needed information.



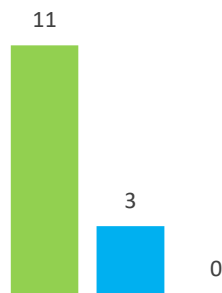
Q3: Agenda items were appropriate for Council discussions. Topics were relevant to the mandate and strategic direction of the College.



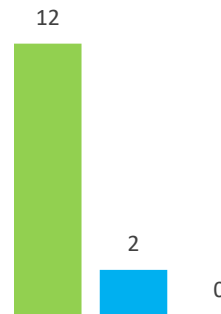
Q4: The public interest was described in Briefing Notes and considered in all discussions.



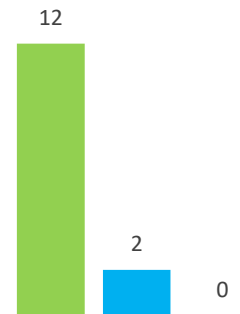
Q5: Time was used effectively. Questions and discussions remained on topic.



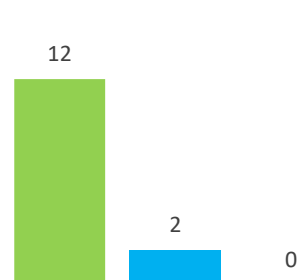
Q6: Council avoided getting into operational, administrative and/or management areas of responsibility.



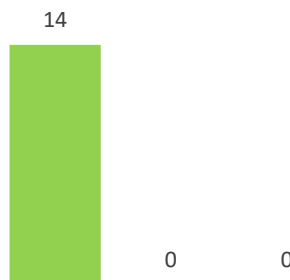
Q7: There was opportunity for me to be actively engaged in all discussions and I felt comfortable participating in the Council discussions.



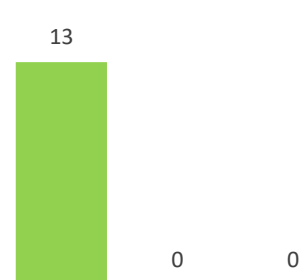
Q8: I was satisfied with the way in which other members of Council contributed to discussions and debate. There was a positive climate of trust and respect. Disagreements were handled openly, honestly, and directly.



Q9: Where appropriate, Next Steps and Action Items were clearly identified.



Q10: In general, Council Members appeared prepared for the meeting.



Q11: The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

ADDITIONAL COMMENTS

Q1	<ul style="list-style-type: none"> • Excellent timing
Q2	<ul style="list-style-type: none"> • Appreciated the reports regarding the policy issues. • Clear and helpful.
Q3	<ul style="list-style-type: none"> • Good discussion today about new policy re: fees
Q4	No comments
Q5	<ul style="list-style-type: none"> • With several policy issues and the discussion around fees we could have been meeting all day. We were done before noon. • Efficient review of policies and business.
Q6	<ul style="list-style-type: none"> • Some overlap with administrative/management today in fees discussion.
Q7	<ul style="list-style-type: none"> • Hot button issue around fees was handled professionally. Everyone that commented had their opinions appreciated.
Q8	<ul style="list-style-type: none"> • Disagreements were present today and each member could voice their opinions.
Q9	<ul style="list-style-type: none"> • Motions included amendments as required.
Q10	<ul style="list-style-type: none"> • I am assuming so because very few questions were asked.
Q11	No comments
Additional Comments	<ul style="list-style-type: none"> • Excellent and informative meeting • Clear concise reminder of the public interest aspect for each key item, provided by the chair as she introduced the items. Thank you



REPORT TO COUNCIL

2022.03.02B(1)

FIRST QUARTER, JUNE 1, 2022 – AUGUST 31, 2022

EXECUTIVE COMMITTEE

COMMITTEE MEMBERS:

Wanda Towers, Chair, Professional Member of Council
Paula Conforti, Professional Member of Council
Ian Nicholson, Professional Member of Council
Marjory Phillips, Professional Member of Council
Paul Stopciati, Public Member of Council
Scott Warnock, Public Member of Council

STAFF

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

MEETINGS

The Executive Committee met on:

- June 17, 2022
- July 28, 2022
- August 25, 2022

ITEMS TO COUNCIL FOR DECISION

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

- Transfers from the Investigations and Hearings and the Fee Stabilization Reserve Funds.
- Proposed amendments to the regulations in the *Psychology Act, 1991* to include the profession of Applied Behaviour Analysis, for distribution for consultation

ACTIONS

The Executive Committee took the following actions:

- Made Committee appointments for the 2022-2023 year.
- Approved a training day for the College Council to occur in conjunction with the Spring Council meeting
- Reviewed draft Audited Financial Statements 2021-2022 and Auditor’s report. Recommended that these be presented to Council for approval.

FOR INFORMATION

The Executive Committee undertook its quarterly review of continuing the provisions for telepsychology services for out-of-province practitioners during COVID-19 which 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.

SUBMITTED BY

Wanda Towers, Ph.D., C. Psych., Chair



REPORT TO COUNCIL

2022.03.02A(2)

FIRST QUARTER, JUNE 1, 2022 – AUGUST 31, 2022

DISCIPLINE COMMITTEE

COMMITTEE MEMBERS:

Marilyn Keyes, Council Member, Chair
 Janice Currie, College Member, Co-Vice-Chair
 Gilles Boulais, College Member
 Deirde Boyle, College Member
 Paula Conforti, Council Member
 Lisa Couperthwaite, College Member
 Lynette Eulette, College Member
 Robert Gauthier, College Member
 Michael Grand, Council Member
 Sara Hagstrom, College Member
 Anthony Hopley, College Member
 Sandra Jackson, College Member
 Carolyn Kolers, Public Member
 Archie Kwan, Council Member
 David Kurzman, Council Member

Ilia Maor, Public Member
 Nadia Mocan, Public Member
 Melanie Morrow, College Member
 Ian Nicholson, Council Member
 Cenobar Parker, Public Member
 Adrienne Perry, Council Member
 Marjory Phillips, Council Member
 Philip Ricciardi, College Member
 Fred Schmidt, Council Member
 Paul Stopciati, Public Member
 Wanda Towers, Council Member
 Ester Vlessing, Public Member
 Scott Warnock, Public Member
 Pamela Wilansky, College Member

STAFF SUPPORT:

Zimra Yetnikoff, Director, Investigations & Hearings
 Hélène Théberge, Senior Administrative Assistant

REFERRALS TO DISCIPLINE

There was one referral to the Discipline Committee in the 1st quarter:

Dr. Ian Shields: https://members.cpo.on.ca/public_register/show/1380

A referral was made to the Discipline Committee with the ICRC Decision sent to Dr. Shields on August 3, 2022. This matter is currently at the Pre-Hearing Conference stage.

PRE-HEARINGS

Dr. Romeo Vitelli: https://members.cpo.on.ca/public_register/show/1461

A Pre-Hearing Conference is scheduled to take place on September 16, 2022.

HEARINGS

No hearings were held during this quarter.

ONGOING MATTERS

Dr. André Dessaulles: https://members.cpo.on.ca/public_register/show/2530

This matter was referred to the Discipline Committee on February 17, 2021. A Motion in this matter was heard on June 20 and 23, 2022, and is scheduled to continue on November 7 and 8, 2022. The Hearing has not yet been scheduled.

Dr. Darren Schmidt: https://members.cpo.on.ca/public_register/show/21702

This matter was referred to the Discipline Committee on December 2, 2021. The Hearing is scheduled for October 3, 4, 6 and 7, 2022.

SUBMITTED BY

Marilyn Keyes, Ph.D., C.Psych., Chair



REPORT TO COUNCIL

2022.03.02A(3)

FIRST QUARTER, JUNE 1, 2022 – AUGUST 31, 2022

QUALITY ASSURANCE COMMITTEE

COMMITTEE MEMBERS

Michael Minden, College Member, Chair
Ilia Maor, Public Member, Vice-Chair
Paula Conforti, Council Member
Sabrina Hassan, College Member
David Howard, College Member

Carolyn Kolers, Public Member
David Kurzman, Council Member
Bruno Losier, College Member
Nadia Mocan, Public Member

STAFF

Barry Gang, Deputy Registrar & Director, Professional Affairs
Madeleine Lee, Quality Assurance Coordinator
David Fierro, Administrative Assistant, Member Services

COMMITTEE ACTIVITY

The Panel of the Committee met on July 15, 2022 to review member specific matters.

MEMBER MATTERS

SELF ASSESSMENT GUIDE (SAG) REVIEWS

Overview

SAG Reviews Arising from failure to Declare Completion in 2022	9
SAG Reviews Carried Over from Previous Cycles	1
Total SAG Reviews Pending*	10

* The number of SAG reviews required may change if 3 members who received deferrals do not provide their Declarations by the extended deadline provided to them.

PEER ASSISTED REVIEW (PAR)

Overview

Reviews Carried Over from Previous Years (due largely to the COVID-19 Pandemic)	61
Referred Due to Failure to Comply with 2022 Self-Assessment Requirements	TBD
Random Selection	TBD
Stratified Random Selection	TBD

Total reviews planned for 2022/2023**	TBD
---------------------------------------	------------

	Q1	YTD
Completed Peer Assisted Reviews	3	3
Exemption Granted following Resignation/Retirement	0	0
Deferral Granted	1	1

* * The total number of reviews will depend upon the number of members who, following deferral of the extended deadline for Self-Assessment Guidelines Declarations, fail to meet those deadlines

Review of all three PAR reports indicated that the members appear to have met all requirements.

CONTINUING PROFESSIONAL DEVELOPMENT AUDITS

Overview

Non-Compliance Audits	7
Random Selection	43
Total Audits Planned for 2022-2023	50*
Total Audits Completed by Committee	0
Audits Ongoing/Outstanding for 2022-2023	50

* The number of CPD audits required may change if 3 members who received extensions to the deadline for making Declarations of Completion do not provide their Declarations by the extended deadline provided to them.

A Committee Orientation and planning meeting occurred during the second quarter, on September 7, 2022. At that meeting Ilia Maor was acclaimed as Vice Chair of the Committee.

SUBMITTED BY

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



REPORT TO COUNCIL

2022.03.02A(4)

FIRST QUARTER, JUNE 1, 2022 – AUGUST 31, 2022

CLIENT RELATIONS COMMITTEE

COMMITTEE MEMBERS

Archie Kwan, Council Member, Chair
Fred Schmidt, Council Member
Esther Vlessing, Public Member
Cenobar Parker, Public Member
Melanie Morrow, College Member
Rosemary Barnes, College Member
Kirsten Barr, College Member
Diana Mandeleew, College Member

STAFF

Barry Gang, Deputy Registrar & Director, Professional Affairs
Julie Hahn, Practice Support & Client Relations Coordinator

COMMITTEE ACTIVITIES

Funding for Therapy for Clients Sexually Abused by Members, or Individuals Supervised by Members

Panels of the Committee met on August 8th and September 9th, 2022. Two applications for funding were reviewed and approved. There are currently 10 individuals whose therapy or counselling is being funded by the College.

The full Committee is to meet on October 24, 2022.

SUBMITTED BY

Archie Kwan, Ph.D., C. Psych., Chair



REPORT TO COUNCIL

2022.03.02A(5)

FIRST QUARTER, JUNE 1, 2022 – AUGUST 31, 2022

FITNESS TO PRACTICE COMMITTEE

COMMITTEE MEMBERS:

Ian Nicholson, Chair, Council Member

Marilyn Keyes Council Member

Melanie Morrow, College Member

Esther Vlessing, Public Member

Mark Watson, College Member

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



REPORT TO COUNCIL

2022.03.02A(6)

FIRST QUARTER, JUNE 1, 2022 – AUGUST 31, 2022

FINANCE AND AUDIT COMMITTEE

COMMITTEE MEMBERS

Wanda Towers, Chair, Council Member
David Kurzman, Council Member
Cenobar Parker, Public Member
Paul Stopciati, Public Member
Alana Holmes, College Member

STAFF

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

COMMITTEE ACTIVITIES

The Finance and Audit Committee (FAC) met by videoconference on August 25, 2022. The primary purpose of this meeting was to discuss the draft *Audited Financial Statements* for the year ending May 31, 2022, with the College’s Auditors. After reviewing these statements with the Auditor, the Committee agreed that the College is in good financial health. The FAC agreed to recommend that Council accept the draft *Audited Financial Statements* as presented. The Auditor will attend the Council meeting to review and discuss the *Statements*. The Committee also considered the College membership fees. It recommends that the Fee Stabilization Reserve Fund, together with the Investigations and Hearings Reserve Fund, be used to cover the operating deficit and for membership fees to remain at their current level for the upcoming 2023/2024 year. This is presented separately in Agenda item 2202.03.04F.

The FAC also reviewed the *Unaudited Financial Statements* and *Variance Report* all to May 31, 2022; the end of the fourth 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 March 1, 2022 to May 31, 2022 was received.

ATTACHMENTS

1. Statement of Revenue and Expenses to May 31, 2022
2. Balance Sheet to May 31, 2022 (unaudited)

SUBMITTED BY

Wanda Towers, Ph.D., C.Psych., Chair

THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
STATEMENT OF REVENUE & EXPENSES

June 2021 - May 2022

	Annual Budget	Budget	YTD Actual	YTD \$ Variance	2021-2022 % YTD	Expected % YTD	% Variance YTD
REVENUE	3,663,872.50	3,663,872.50	3,721,941.29	58,068.79	102%	100%	2%
COST OF SALES	258,490.00	258,490.00	257,740.24	-749.76	100%	100%	0%
GROSS MARGIN	3,405,382.50	3,405,382.50	3,464,201.05	58,818.55	102%	100%	2%
EXPENDITURES							
Governance	102,200.00	102,200.00	60,817.98	-41,382.02	60%	100%	-40%
Registration	101,000.00	101,000.00	95,501.26	-5,498.74	95%	100%	-5%
Client Relations, Communications & Education	21,770.00	21,770.00	29,530.25	7,760.25	136%	100%	36%
Quality assurance	49,600.00	49,600.00	17,296.30	-32,303.70	35%	100%	-65%
Investigations and resolutions	131,000.00	131,000.00	146,996.70	15,996.70	112%	100%	12%
Hearings	332,950.00	332,950.00	350,337.48	17,387.48	105%	100%	5%
Liaison (Professional Organizations)	30,950.00	30,950.00	24,117.46	-6,832.54	78%	100%	-22%
Administration	3,052,299.95	3,052,299.95	3,114,069.37	61,769.42	102%	100%	2%
Total Expenditures	3,821,769.95	3,821,769.95	3,838,666.80	16,896.85	100%	100%	0%
EXCESS OF REVENUE OVER EXPENDITURES	-416,387.45	-416,387.45	-374,465.75	41,921.70	90%	100%	-10%

The College of Psychologists of Ontario
Balance Sheet Comparison
As of May 31, 2022

	Total		
	As of May 31, 2022	As of May 31, 2021 (PY)	Change
Assets			
Current Assets			
Cash and Cash Equivalent			
10000 Petty Cash	200.00	200.00	0.00
10100 Bank	394,409.31	515,887.10	-121,477.79
10199 Telpay Clearing	0.00	0.00	0.00
10250 Cash Equivalents	7,077,053.90	4,338,922.64	2,738,131.26
12001 Undeposited Funds	0.00	0.00	0.00
Total Cash and Cash Equivalent	\$ 7,471,663.21	\$ 4,855,009.74	\$ 2,616,653.47
Accounts Receivable (A/R)			
10400 Accounts Receivable - Control	-2,952,193.75	-2,888,944.81	-63,248.94
Total Accounts Receivable (A/R)	-\$ 2,952,193.75	-\$ 2,888,944.81	-\$ 63,248.94
10300 Short Term Investments	0.00	2,961,734.50	-2,961,734.50
10410 Accounts Receivable - Other	2,971,095.70	2,899,148.84	71,946.86
10550 Interest Receivable	1,264.04	1,264.03	0.01
10600 Prepaid Expenses	71,526.46	34,314.05	37,212.41
10800 Government Funding-ABA	1,960.98		1,960.98
Total Current Assets	\$ 7,565,316.64	\$ 7,862,526.35	-\$ 297,209.71
Non-current Assets			
Property, plant and equipment			
12000 Furniture & Equipment			0.00
12010 Furniture & Equipment - Cost	177,107.75	52,815.39	124,292.36
13000 Accum Amort Furniture & Equip	-74,379.24	-47,753.68	-26,625.56
Total 12000 Furniture & Equipment	\$ 102,728.51	\$ 5,061.71	\$ 97,666.80
12100 Computer Equipment			0.00
12110 Computer Equipment - Cost	143,342.76	140,958.46	2,384.30
13100 Accum Amort Computer Equipment	-139,276.88	-122,224.39	-17,052.49
Total 12100 Computer Equipment	\$ 4,065.88	\$ 18,734.07	-\$ 14,668.19
12200 Leasehold Improvements			0.00
12210 Leasehold Improvements - Cost	1,331,174.87	1,331,174.87	0.00
13200 Accum Amort Leaseholds	-361,630.91	-248,742.80	-112,888.11
Total 12200 Leasehold Improvements	\$ 969,543.96	\$ 1,082,432.07	-\$ 112,888.11
12300 Website Development			0.00
12310 Website Development - Cost	0.00	0.00	0.00
13300 Accum Amort Website Devt	0.00	0.00	0.00
Total 12300 Website Development	\$ 0.00	\$ 0.00	\$ 0.00
Total Property, plant and equipment	\$ 1,076,338.35	\$ 1,106,227.85	-\$ 29,889.50
10302 Long Term Investment	35,382.40	40,262.40	-4,880.00
Total Non Current Assets	\$ 1,111,720.75	\$ 1,146,490.25	-\$ 34,769.50
Total Assets	\$ 8,677,037.39	\$ 9,009,016.60	-\$ 331,979.21

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.

	Total		
	As of May 31, 2022	As of May 31, 2021 (PY)	Change
Liabilities and Equity			
Liabilities			
Current Liabilities			
Accounts Payable (A/P)			
21000 Accounts Payable - Control	61,285.93	107,026.53	-45,740.60
Total Accounts Payable (A/P)	\$ 61,285.93	\$ 107,026.53	-\$ 45,740.60
21100 Accounts Payable - Other	343,238.81	302,237.73	41,001.08
22000 Employee Tax Deductions Payable	32,280.05	29,094.12	3,185.93
22100 Payroll Clearing	0.00	0.00	0.00
23000 Prepaid Fees	2,999,145.70	2,929,643.84	69,501.86
24000 Peer Mentorship - Clearing	0.00	0.00	0.00
25500 GST/HST Payable	0.00	0.00	0.00
Direct Deposit Payable	0.00		0.00
Payroll Liabilities			0.00
Life Insurance Premium	0.00		0.00
LTD	0.00		0.00
RRSP	0.00		0.00
Vacation Pay	0.00		0.00
Total Payroll Liabilities	\$ 0.00	\$ 0.00	\$ 0.00
Total Current Liabilities	\$ 3,435,950.49	\$ 3,368,002.22	\$ 67,948.27
Non-current Liabilities			
27000 Deferred Leasehold Inducement	244,008.28	269,470.01	-25,461.73
Total Non-current Liabilities	\$ 244,008.28	\$ 269,470.01	-\$ 25,461.73
Total Liabilities	\$ 3,679,958.77	\$ 3,637,472.23	\$ 42,486.54
Equity			
30000 Opening Balance Equity	0.00	0.00	0.00
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	820,000.44	1,000,000.44	-180,000.00
31400 Website&DatabaseDevtReserveFund	165,872.02	165,872.02	0.00
31500 Premises Reserve Fund	227,742.00	227,742.00	0.00
31600 FairRegn Practices Reserve Fund	80,000.00	80,000.00	0.00
Retained Earnings	2,227,929.91	2,228,163.49	-233.58
Profit for the year	-374,465.75	-180,233.58	-194,232.17
Total Equity	\$ 4,997,078.62	\$ 5,371,544.37	-\$ 374,465.75
Total Liabilities and Equity	\$ 8,677,037.39	\$ 9,009,016.60	-\$ 331,979.21



REPORT TO COUNCIL

2022.03.02A(7)

FIRST QUARTER, JUNE 1, 2022 – AUGUST 31, 2022

EQUITY, DIVERSITY, AND INCLUSION WORKING GROUP

COMMITTEE MEMBERS:

Donna Ferguson, Chair, College Member
Wanda Towers, Vice-Chair, Council Member
Kofi Belfon, College Member
Michael Grand, College Member
Tae Hart, College Member
Chris Mushquash, College Member

STAFF SUPPORT:

Rick Morris, Registrar & Executive Director
Caitlin O’Kelly, Assistant to the Registrar

MEETINGS

The Equity, Diversity, and Inclusion (EDI) Working Group met on:

- June 20, 2022
- August 18, 2022

FOR INFORMATION

The focus of the Working Group discussions was on the member survey undertaken earlier in the spring. The results have yielded a vast amount of information and the Working Group is exploring how it can be considered most appropriately and effectively. The Client Relations Committee has asked the Working Group to review the public facing documents related to funding for therapy and others created by that Committee. This request was discussed, and a plan put in place for this review.

SUBMITTED BY

Donna Ferguson, Ph.D., C.Psych., Chair



REPORT TO COUNCIL

2022.03.02A(8)

SEPTEMBER 2022 COUNCIL MEETING

ABA WORKING GROUP

WORKING GROUP MEMBERS

Jennifer Cunningham, M.ADS., BCBA

Nancy Marchese, Ph.D., C.Psych., BCBA-D, President, Ontario Association for Behaviour Analysis (ONTABA)

Nicole Neil, Ph.D., BCBA-D, Western University, ABA Program Coordinator

Adrienne Perry, Ph.D., C.Psych., BCBA-D, Registration Committee Co-Chair

Kendra Thomson, Ph.D., BCBA-D, Brock University ABA Faculty

Wanda Towers, Ph.D., C.Psych., College President

Scott Warnock, Public Member

STAFF

Paula Garshowitz, OD, ABA Regulation-Project Lead

Rick Morris, Ph.D., C.Psych., Registrar & Executive Director

Caitlin O'Kelly, Assistant to the Registrar

MEETINGS

The ABA Working Group will have met seven times between the June and September Council meetings and continues to hold regular two-hour meetings on alternate Wednesdays.

FOR INFORMATION

The ABA Working Group discussed the following:

- Details of the proposed registration process and resulting amendments to the Registration Regulation.
- Details of the transitional routes for registration of experienced Behaviour Analysts; in particular, the details of evidence of current practice and competence of those who are not hold BCBA or BCBA-D certification.
- An online self-screening tool to assist those currently practicing in the field of behaviour analysis to determine if they should consider applying for registration with the College if they meet the registration requirements.
- The steps and resources necessary to develop an Ontario examination of knowledge or competence for registration purposes.
- Meetings held over the summer with stakeholders, including representatives of the Ministry of Health, Ministry of Children, Community and Social Services, ONTABA Board of Directors and Ontario ABA educational program coordinators.
- A professional designation to be used by members of the College registered as Behaviour Analysts; and
- A jurisprudence and ethics module for registration purposes.

RECOMMENDATION TO COUNCIL

The ABA Working Group has now completed its deliberation on the relevant regulations related to the profession of Applied Behaviour Analysis. A briefing note and consultation documents, which include a proposed Registration Regulation, accompanying Explanatory Table, and proposed amendments to the

General and Professional Misconduct Regulations, have been prepared for Council's consideration (Agenda item .03B).

Council will be asked to approve these documents for circulation to members and stakeholders for the legislated 60-day period. Following the 60-day consultation period, the ABA Working Group will consider all feedback it receives and will make final recommendations to Council at its December meeting.

CONTACT FOR QUESTIONS

Rick Morris, Registrar & Executive Director

SUBMITTED BY

Paula Garshowitz, OD
ABA Regulation-Project Lead

BRIEFING NOTE

2022.03.03A

SEPTEMBER 2022 COUNCIL MEETING

SUPERVISION RESOURCE MANUAL FOR REGISTRATION, THIRD EDITION, 2022

STRATEGIC DIRECTION REFLECTION

Developing, establishing and maintaining standards of qualifications for individuals seeking registration

MOTION FOR CONSIDERATION

That the *Supervision Resource Manual for Registration, Third Edition, 2022* be received.

Moved By Dr. Marjory Phillips

PUBLIC INTEREST RATIONALE

The *Supervision Resource Manual For Registration, 2022* was developed to provide guidance for members and those seeking registration with the College. It provides practical information to help members of the College who agree to be supervisors for supervised practice members and/or who agree to provide supervision to members seeking to expand their authorized areas of practice. The *Manual* offers direction in an effort to ensure effective supervision and consistency in the services provided to clients.

BACKGROUND

In September 2020, the College Council approved the formation of a Supervision Resource Manual Working Group. This group was tasked to review the *Supervision Resource Manual (2009)* to ensure it aligns with the *Standards of Professional Conduct, 2017* and best practices in supervision, and to support candidates entering the profession and the supervisors who give of their time and dedication to the growth of their supervisees. The scope of work included:

- Identification of content in the current Supervision Resource Manual needing to be revised/updated;
- Reviewing relevant source material such as the *Standards of Professional Conduct, 2017* and the Ontario Psychological Association's Supervision Guidelines;
- Proposing draft wording and a revised structure for a new Supervision Resource Manual; and
- Making recommendations for revisions to the Supervision Standards within the *Standards of Professional Conduct, 2017* should the need for changes be identified.

The members of the Supervision Resource Manual Working Group were Dr. Marjory Philips, Dr. Jane Ledingham, Dr. Paolo Pires, Mr. Barry Gang, and Ms. Lesia Mackanyn.

After many months of work the Supervision Resource Manual Working Group prepared a draft of the new *Supervision Resource Manual For Registration, 2022* to replace the *Supervision Resource Manual* in place since 2009. In the course of development, the Working Group consulted with the College's Equity, Diversity, and Inclusion (EDI) Working Group. In the summer 2022, the College circulated the draft *Manual* to members for feedback, receiving 27 very helpful responses. The results of this consultation were considered when preparing the final *Manual*.

Changes made reflect the evolution of the Registration Guidelines, standards of the profession, and the academic literature regarding supervision over the past decade.

This revised *Supervision Resource Manual for Registration, 2022* supplements and augments the information provided by the College's Registration Guidelines and the *Standards of Professional Conduct, 2017* and integrates information from several sources based on best practices in supervision, available at this time. It reflects many hours of discussion and review and is anticipated to serve as a useful and practical tool for members and those seeking registration with the College.

NEXT STEPS

Supervision Resource Manual for Registration, Third Edition, 2022 to be posted to the College website to replace the *Supervision Resource Manual (2009)*, currently available.

ATTACHMENTS

1. *Supervision Resource Manual for Registration, Third Edition, 2022*

CONTACT FOR QUESTIONS

Dr. Marjory Phillips, Registration Committee Co-Chair



COLLEGE OF
PSYCHOLOGISTS
OF ONTARIO

SUPERVISION RESOURCE MANUAL FOR REGISTRATION

THIRD EDITION, SEPTEMBER 2022

PREAMBLE

The information in the *Supervision Resource Manual For Registration, Third Edition 2022* is intended as a practical aid for those in the process of registering with the College, autonomous members who are expanding their authorized areas of practice and their supervisors.

Members are encouraged to consult the College’s Registration Guidelines for Supervised Practice Members and the Standards of Professional Conduct for additional guidance.

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FOREWORD

a. Application

This Third Edition of the *Supervision Resource Manual For Registration* replaces the Second Edition, published in 2009. Changes made reflect the evolution of the Registration Guidelines, *Standards of Professional Conduct, 2017*, and the academic literature regarding supervision during the intervening period.

A Subcommittee of the College's Registration Committee was struck to develop this resource to clarify expectations and enhance the supervision experience of the College's membership. In the hopes of enhancing the provision of psychological services to the Ontario community, this resource supports candidates entering the profession and the supervisors who give of their time and who are dedicated to the growth of their supervisees.

This *Supervision Resource Manual For Registration* supplements and augments the information provided by the College's Registration Guidelines and *Standards of Professional Conduct, 2017* and integrates information from several sources based on best practices in supervision at the time of publication. While members are already familiar with the *Standards of Professional Conduct, 2017*, candidates and College members are encouraged to read the Registration Guidelines which outline the requirements for entering the profession and for the period of authorized supervised practice.

The *Supervision Resource Manual for Registration* is meant to provide tips and guidance for members and those seeking registration with the College. It provides practical information to help members who agree to be supervisors for supervised practice members and/or who agree to provide supervision to members seeking to expand their authorized areas of practice.

b. Relationship to other supervision documents

The *Supervision Resource Manual For Registration* augments or is meant as a companion document to the following College resources/documents:

- *Standards of Professional Conduct (2017)* – Section 4 speaks specifically to Supervision
 - https://cpo.on.ca/cpo_resources/standards-of-professional-conduct/
- Registration Regulation (Ontario Regulation 74/15, Registration)
 - <https://www.ontario.ca/laws/regulation/150074>
- Registration Guidelines (which includes a section titled *Duties and Responsibilities of Supervisors and Supervised Members*)
 - <https://cpo.on.ca/applicants/how-to-apply/supervised-practice-psychological-associate/>
 - <https://cpo.on.ca/applicants/how-to-apply/supervised-practice-psychologist/>
- Primary/Alternative Supervisor's Agreement Form
 - https://cpo.on.ca/cpo_resources/primary-supervisor-agreement-form/
 - https://cpo.on.ca/cpo_resources/alternate-supervisor-agreement-form/
- Confirmation of Private Practice Arrangements Form
 - https://cpo.on.ca/cpo_resources/confirmation-of-private-practice-arrangements/

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- Primary and Alternate Supervisor’s Work Appraisal Forms:
 - https://cpo.on.ca/cpo_resources/supervisors-work-appraisal-form-primary/
 - https://cpo.on.ca/cpo_resources/supervisors-work-appraisal-form-alternate/
- Registration Guidelines which include the Guidelines for Completing the Declaration of Competence
 - https://cpo.on.ca/cpo_resources/registration-guidelines-psychologist-i-guidelines-for-completing-the-declaration-of-competence/
 - https://cpo.on.ca/cpo_resources/psychological-associate-section-j-guidelines-for-completing-the-declaration-of-competence/
- The College’s Equity, Diversity, and Inclusion webpage
 - <https://cpo.on.ca/about-cpo/equity-diversity-and-inclusion/>

Guidelines produced by professional associations, outlining best practices in supervision, were also reviewed. Relevant elements have been included or cited in this *Supervision Resource Manual For Registration*, based upon the following documents:

- American Psychological Association Guidelines for Clinical Supervision in Health Service Psychology (2014)
 - <https://www.apa.org/about/policy/guidelines-supervision.pdf>
- Canadian Psychological Association Ethical Guidelines for Supervision in Psychology: Teaching, Research, Practice, and Administration (2009; updated 2017)
 - https://cpa.ca/docs/File/Ethics/CoEGuidelines_Supervision2017_final.pdf
- Ontario Psychological Association Self-Assessment Tool for Best Practices in Clinical Supervision
 - <https://www.psych.on.ca/OPA/media/opa-main/Board-Members/Quality-Assurance-Self-AssessmentFinal.pdf?ext=.pdf>

Finally, the academic literature on supervision practices is also referenced in the following section. A full list of references is available at the end of this manual.

GLOSSARY OF TERMS

“**applicant**” refers to someone who has applied for registration but has not yet had their application evaluated;

“**authorized supervised practice**” refers to the required supervised practice undertaken by holders of the certificate for supervised practice;

“**autonomous member**” refers to a holder of a certificate authorizing autonomous practice;

“**candidate**” refers to someone who, at a minimum, has met the academic requirements for registration and is in the process of meeting the remaining requirements;

“**College**” refers to the College of Psychologists of Ontario;

“**member**” refers to a psychologist or psychological associate, registered by the College to practise autonomously or under supervision;

“**Registration Regulation**” refers to [Ontario Regulation 74/15, Registration](#);

“**supervised member**” refers to a holder of a certificate of registration authorizing supervised practice;

“**Standards**” refers to the [Standards of Professional Conduct \(2017\)](#)

“**Supervision Record**” refers to the record of the interaction between the supervisor and supervisee and focus on the supervisor’s evaluation, direction, and support of the supervisee, as well as the supervisee’s response to the input of the supervisor

“**Supervision Log**” refers to the log of supervision included in the Primary and Alternate Supervisor’s [Work Appraisal Form](#)

1. SUPERVISION FUNDAMENTALS

a. Definition of Supervision

Academics and researchers have developed a variety of definitions of supervision (Bernard & Goodyear, 2019; Borders, 2014; Falender & Shafranske, 2004; Milne, 2007). Common components among all definitions include: (1) a hierarchical relationship requiring evaluation and feedback; (2) professional development for the supervisee; and (3) accountability to the profession and public.

According to Falendar and Shafranske (2004):

Clinical Supervision is a distinct professional practice that requires balancing the inherent power differential within a collaborative relationship while utilizing both facilitative and evaluative components. It has the multiple goals of:

1. *Monitoring the quality of services provided to clients;*
2. *Protecting the public and gatekeeping for the profession;*
3. *Enhancing the professional competence and professionalism of the supervisee, including developing skill in the use of science-informed assessment procedures, empirically-supported treatments, and evidence-based practices.*

Definition of Supervision according to current College Standards:

Supervision means an ongoing educational, evaluative, and hierarchical relationship, where the supervisee is required to comply with the direction of the supervisor, and the supervisor is responsible for the actions of the supervisee.

b. Purpose of Supervision for Registration

Candidates who have met academic requirements for registration and are in the process of completing the remaining requirements for registration with the College for autonomous practice must undergo a period of authorized supervised practice before registration can be completed.

The purpose of authorized supervised practice (SP) is to:

- Serve the public interest by ensuring that psychological services provided by those who have not yet completed all requirements for autonomous practice meet ethical and professional standards and that services promote the public interest;
- Foster professional development and self-reflection by means of teaching, mentoring, and supporting the supervised member. This may include enhancing the development of clinical skills and ethical decision-making, refining interpersonal effectiveness, and deepening self-awareness and an understanding of the impact of providing psychological services for clients, organizations, and communities;
- Provide formative and summative evaluation of the supervised member, to assist the College in the determination of readiness for autonomous practice.

c. Evidence-Based Practices in Supervision

Supervision is a valued professional activity for all practitioners of psychology to promote continuous learning beyond a training model (Johnson, 2019). By having an 'objective' outsider

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perspective and a person to challenge, ask questions, and support reflective and deliberate practice, supervision improves clinical practice and counters blind spots (Bernard & Goodyear, 2019; Bienert, 2014; Borders, 2014; Falender & Shafranske, 2017). Supervision supports the application of knowledge to practice and fosters supervisee competence (Wrape et al., 2015).

Supervision researchers posit several considerations for ‘best practice’ in supervision which are also informed by experience (i.e., practice-based evidence). As described below, these considerations reflect different approaches including:

- Theoretical understanding of core competencies;
- Conclusions drawn from empirical outcome studies;
- Observations distilled from literature reviews.

Best Practices as Core Competencies

Falender and Shafranske (2017) delineated core competencies in the ‘best practices’ of supervision, organized into three components:

- Attitudes and Values: supervision requires the maintenance of integrity, an ethical and values-based practice that is informed by science, and an appreciation of diversity;
- Knowledge: supervisors should engage in continual professional development and self-reflection;
- Skills: supervisors are encouraged to develop competencies in relationship skills (communication, attention to power differentials, warmth, genuineness, and respect); inquiry skills (to elicit sufficient information to ensure adequate clinical oversight); and educational skills (to promote active learning and professional development).

Best Practices from Supervision Outcome Research

A review of supervision outcome research suggests that improvements in supervisee competence in the areas of enhanced self-awareness, skill acquisition and implementation, and treatment knowledge are associated with an effective supervisory working alliance (Mehr, Ladany & Caskie, 2015; Tsong & Goodyear, (2014). According to Bernard and Goodyear (2019), supervisors who follow best practices:

- Communicate expectations clearly;
- Provide regular feedback;
- Tailor supervision to the developmental level of the supervisee;
- Foster a safe and trusting supervisory relationship.

Best Practices Distilled from Literature Review

In a review of supervision literature, Johnson (2019) identified five best practices in supervision.

- Direct Observation: Supervisors have responsibility for overseeing the development of interpersonal common elements (i.e., warmth, empathy, responsiveness) and effective non-verbal communication, all of which are better identified by means of direct observation.
- Progress Monitoring: Systematic evaluation of client progress is associated with improved therapy outcomes (Tasca et al., 2019); however, according to Johnson (2019), only 12% of psychologists use progress monitoring as a regular clinical practice. Incorporating progress monitoring in supervision provides supervisee and supervisor with additional information about the client perspective.

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- **Experiential Learning:** Supervision is enhanced through the practice of experiential learning, incorporating elements such as role plays and modelling of new skills and techniques.
- **Evaluation:** supervisors should make every effort to provide ongoing feedback that is timely, specific, nonjudgmental, actionable, and collaborative (Bernard & Goodyear, 2019).
- **Adopting a Diversity Focus:** Supervisors are encouraged to adopt a practice of cultural curiosity and cultural humility in supervision, which includes fostering self-awareness, cultural humility, the development of “diversity relevant” skills, and avoidance of microaggressions (Hook et al, 2016; Johnson, 2019; Patallo (2019); Upshaw, Lewis & Nelson, 2020; Watkins et al., 2019).

d. Equity, Diversity, and Inclusion in Supervision

Best practices in supervision reflect self-awareness (i.e., developing an understanding of one’s own cultural background and the ways in which it influences personal attitudes, values, and beliefs); knowledge (i.e., learning about the worldviews of individuals from diverse cultural backgrounds); and skills (i.e., utilizing culturally appropriate interventions) (Hook et al, 2018). Supervisors are encouraged to adopt an appreciation of the intersection among the assumptions, values, biases, expectations, and world-views among the supervisee, supervisor, and client, in addition to consideration of the historical and societal contexts (Falender & Shafranske, 2004).

This includes fostering and modeling a position of cultural humility, defined by Mosher et al (2017) as “Others-oriented stance that seeks to develop mutual partnerships that address power imbalances with interpersonal respect, as well as a lifelong commitment to openness to new cultural information, critical self-examination of cultural awareness, and motivation to learn from others”. “Humble acknowledge of unfamiliarity or bias is a strength, rather than a failure of the clinician” (Patallo, 2019) and supervisors are encouraged to seek consultation and to continue to educate, modelling this ongoing approach for their supervisees.

Additional resources, including equity, diversity, and inclusion (EDI) readings and practice guidelines, are listed on the College’s EDI webpage: <https://cpo.on.ca/about-cpo/equity-diversity-and-inclusion/>

Tips for practicing equity, diversity and inclusion in supervision include the following (Bautista-Biddle et al, 2020; Johnson 2019; Williams & Raney 2020):

- Supervisors should initiate a conversation with the supervisee at the beginning of a supervisory working relationship to consider the intersectionality of identities, respectfully recognizing differences and similarities among diverse factors such as age, race, gender, culture, religion, disability, etc.
- Supervisor and supervisee are encouraged to practice self-reflection, being mindful of unconscious bias and stereotypic assumptions about the supervisee, supervisor, or the client.
- The inherent power imbalance within a supervisory relationship may be amplified by inattention to privilege and diversity. Supervisors are expected to model cultural curiosity and cultural humility for the supervisee.
- Supervisors and supervisees are expected to avoid microaggressions.

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- Supervision should reflect a safe environment for discussion of the impact of systemic racism or of colonialism and residential schools for the client or supervisee, and implications for psychological services, including case conceptualization and considerations for intervention.

Summary of Best Practices in Supervision

Taken together, the research and the literature suggest that supervision is optimized by:

- Establishing clear expectations for style or model of supervision, communication between supervisor and supervisee, and method of feedback (including any opportunities for the supervisor to observe the work);
- Tailoring supervision to the developmental level and needs of the supervisee;
- Fostering an effective supervisory working alliance to encourage supervisee disclosures and feedback;
- Encouraging supervisee skill acquisition and implementation, and professional development by providing time for supervisee self-reflection and active learning (role plays, modelling, resources) for skills development;
- Attending to issues of diversity, equity and inclusion which include recognizing and valuing difference, understanding systems of power and privilege, attending to unconscious bias, and avoiding micro-aggressions.

Providing supervision is an activity which requires specific competence and, as such, continued professional development and learning in this field is encouraged.

2. ROLES AND RESPONSIBILITIES OF SUPERVISION

a. Responsibilities of Supervisors (Primary and Alternate)

The supervisor functions as a teacher, mentor and professional role model who fosters the development of clinical skills and professional identity for the supervised member. Supervisors are key in ensuring that candidates seeking Autonomous Practice with the College will provide quality (competent and ethical) care that is in the best interests of clients and the broader community. Supervisors for supervised practice members have common responsibilities, regardless of whether they are Primary or Alternate supervisors. Supervisors must sign the [Primary Supervisor's Agreement Form](#) and [Alternate Supervisor's Agreement Form](#) when a candidate submits an application for Supervised Practice which outlines some of the responsibilities the Supervisor is assuming. This section expands on the responsibilities of supervisors.

Both Primary and Alternate supervisors have an equal role in assessing readiness for Autonomous Practice. Both Primary and Alternate supervisors share the following responsibilities:

- They are fully responsible for the provision of psychological services by the supervised member;
- They uphold the *Standards* of the College and ensure that the provision of psychological care by the supervised member meets those standards;
- They counsel supervisees on examinations and other tasks during Supervised Practice;
- They are attentive to the development of the supervised member approaching Autonomous Practice, taking into account, and tailoring expectations based on, the

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- supervisee’s knowledge and skills, and fostering the supervisee’s stance of cultural humility and cultural curiosity;
- They provide feedback and formal evaluations during supervised practice;
- They record the dates, duration, and content of each supervisory session (i.e., maintain supervision records – Standard 4.1.1 and Standard 9.1.2) and safeguard those records for the duration of their life cycle;
- They co-sign all reports and formal correspondence (Standard 4.1.2);
- They seek their own professional development to further develop supervision-specific competence.

Primary and Alternate supervisors also have different, specific responsibilities depending on the area of practice, client population, and “division of work” that Primary and Alternate supervisors agree on between themselves and with the supervised member. In agreeing to be a Primary or Alternate supervisor, the member must review the Supervisee’s Declaration of Competence. Supervisors should communicate to ensure that between them they are able to provide the supervisory experiences necessary for the supervised member to fulfill competency requirements, taking into account which authorized areas of practice the supervised member is seeking upon registration. When there are changes to the supervised member’s Declaration of Competence, the supervised member and their supervisors must advise the College in advance in keeping with the [Guidelines for Completing the Declaration of Competence](#), with which supervisors are encouraged to familiarize themselves. A change in the Declaration of Competence should be explicitly considered in the supervisor’s subsequent appraisal(s) of the supervised member.

Primary supervisors must provide *at least* one hour of supervision *weekly* (or 4 hours per month) and Alternate supervisors must do so on a *biweekly* basis (or 2 hours per month). Both supervisors require time to provide individual synchronous supervision meetings as well as time for indirect activities (i.e., to review documentation). They often orient the supervised member to the work setting and are available to the supervised member as needed. Clinical supervision contains an administrative component, but within the context of supervision leading to autonomous practice, this component is secondary. Supervisor judgment, the clinical setting, and the contract with the supervised member, will tailor the amount and types of supervision required.

A supervised member’s learning needs will change throughout the supervision period and supervisors must continuously monitor and evaluate these changing needs and tailor their supervision to ensure optimal skill and knowledge development. When not available, especially for an extended period (e.g., supervisor vacation), supervisor coverage should be arranged with the supervised member’s other supervisor and/or with another autonomous member of the College. Primary and Alternate supervisors should have points of contact over the Supervised Practice period to ensure that the supervised member is progressing and that all the required activities during the Supervised Practice period are supported.

The supervisors accept ultimate responsibility for the psychological services provided by the supervised member. By actively overseeing the psychological services provided, supervisors ensure that the supervised member develops skills consistent with science-informed assessment procedures, empirically-supported interventions, and other evidence-based practices. The supervisor assesses and develops the supervised member’s knowledge and skills through instruction, modelling, collaborative problem solving, and on-going evaluation (including

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deliberate review of professional work), and facilitates consideration of equity, diversity, and inclusion. Supervisors should be aware of the supervised member's professional activities during Supervised Practice (e.g., professional development activities), and foster in the supervised member the need for ongoing professional developmental and continuous quality improvement.

b. Completing the Supervisor's Work Appraisal Form

Work appraisal forms are a record of what happened during the period of authorized supervised practice. Since the purpose of registration is public protection, supervisors are reminded that ratings on Supervisor's Work Appraisal Forms carry considerable weight in considering the supervised member's readiness for Autonomous practice. In assessing readiness for Autonomous Practice, it is important that the supervisor consider not only clinical competence, but also ethical conduct, maturity, confidence, and emotional readiness. Of note, the following competencies reflect current *Standards* of the College and may be revised in future to align with future changes to the accreditation standards issued by the Canadian Psychological Association.

As indicated in the Supervisor's Work Appraisal forms, supervisors will evaluate the supervised member on the following dimensions to determine readiness for Autonomous Practice, regardless of practice area or client population:

(A) Ratings of Professional Performance

- Overall awareness/knowledge of Ontario jurisprudence;
- Competence in declared area(s) of competence (see candidate's Declaration of Competence form);
- Competence in formulating and communicating a diagnosis;
- Awareness of limits of competence;
- General maturity of professional attitude.

(B) Core Competencies for Professional Practice

- Interpersonal relationships;
- Ethics and Standards;
- Assessment and evaluation;
- Intervention and consultation;
- Research (rated only if this is an activity declared by the candidate in the Declaration of Competence).

Unanimous supervisor's ratings of "R" (Ready for Autonomous Practice) indicating readiness for Autonomous Practice in all rating categories are a pre-requisite for being invited to attend the College's Oral Examination. Supervisor feedback to the supervised member should be ongoing and provided on a regular basis over the course of their period of Authorized Supervised Practice. In order to facilitate readiness, Primary and Alternate supervisors must ensure that the supervised member has had exposure to a relevant range of client populations and presenting problems in relation to the practice area(s) and client population(s) indicated on their Declaration of Competence, during the period of authorized supervised practice.

On the second page of the Supervisor's Work Appraisal Form, supervisors and supervised members are prompted to jointly rate the progress of supervision and identify needs by indicating

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whether, and how fully, the following topics were addressed with the supervised member during the particular reporting period:

- Detailed feedback and discussion regarding assessment/evaluation, intervention/consultation, and reports;
- Discussion of diagnostic issues;
- Discussion of ethical and professional issues;
- Discussion of jurisprudence in relation to practice;
- Discussion to identify candidate’s strengths and areas that need improvement;
- Preparation for the required examinations [Jurisprudence and Ethics Examination (JEE), Examination for Professional Practice in Psychology (EPPP), Oral Examination];
- Development of/progress in a Registration Committee mandated training plan (if applicable).

Supervisors are entrusted with submitting detailed and accurate Work Appraisal Forms to the College. The appraisal forms should be submitted to the College in a timely manner, and preferably via email. Supervisors and supervised members should retain a copy of each Work Appraisal Form for their own records.

The following suggestions will help to create a clear record of the learning activities of supervised members and the nature and outcome of supervision:

- The supervised member should keep daily records of their professional activities (e.g. number and nature of assessments, consultations/interventions, counselling/therapy sessions, professional development activities, ethical issues, research activities);
- Using the Supervisor’s Work Appraisal Form, the supervised member and supervisor should keep a record at each meeting of the dates of supervision sessions, amount of time spent and a description of the topics that were discussed. Including the number of clients seen, their presenting problems and the type of intervention offered, as well as any ethical and EDI issues which arose helps to show the reader what actually happened during supervision and documents the quality of the training a supervised member is obtaining. At no time should personally identifiable information, including personally identifiable health information, be included. Any other substantive contact (e.g. consultation regarding a professional issue) should also be documented in the form.
- Avoid a “boilerplate” approach (i.e. repeating the same wording on a succession of Work Appraisal Forms) as it tends to give the impression that either the supervised member has not progressed or that the supervisor is taking an overly casual approach to supervision.
- Although difficult to do, honestly record a supervised member’s limitations. If there are concerns about readiness for autonomous practice, say so. Ultimately, extending the period of authorized supervised practice with a clearly defined remediation plan will serve both the supervised member and their clients.

c. Evaluating Readiness for Autonomous Practice

During the period of authorized supervised practice, the supervisor evaluates the supervised member’s level of competence on a range of dimensions and completes formal work appraisals on a regular basis. In order to be invited to attend the Oral Examination, supervised members are required to have attained an “R” rating (Ready for autonomous practice) from both the Primary and Alternate Supervisors on all of the rating categories.

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Different competencies are acquired at different rates, and the level of these competencies can be characterized as ranging from “novice” through “advanced beginner”, “competent”, and “proficient”, and on to “expert”. From the College’s perspective, supervised members are rated as “Unacceptable, remedial action required”, “Acceptable level for supervised practice”, “Almost ready for autonomous practice” and “Ready for autonomous practice”. As the individual progresses along the continuum from novice to competent, decisions and actions become more automatic, integrated, efficient and skilled, and the flexibility of planning and implementation increases.

By the end of the period of authorized supervised practice, supervised members are expected to attain a level that is competent for entry level autonomous practice but not necessarily proficient or expert. In general, functioning at a competent level (ready for autonomous practice) means that the supervised member can generate a plan of action for assessment or intervention with a long-term focus that is based on a comprehensive evaluation of the problem, is informed by scientific evidence, and takes into account additional evidence over time as to whether or not the client’s response to the plan is as anticipated. There is an emerging ability to recognize overall patterns in the conceptualization of service delivery rather than having a narrow focus on individual elements. A competent supervised member has a feeling of mastery and the ability to deal with common contingencies that arise in the activities and client groups specified on their Declaration of Competence but is also aware of the limits of their competence.

To assist supervisors and supervised members in understanding what is meant by “Ready for autonomous practice”, which can also be conceptualized as “competent” or “entry level autonomous practice”, the following indicators of competence have been developed:

(A) Ratings of Professional Performance:

1. Overall awareness/knowledge of Ontario jurisprudence

To attain a rating of **R** in this area, the candidate must consistently:

- Demonstrate a good knowledge of Ontario jurisprudence and apply this knowledge appropriately, seeking consultation when needed.

2. Competence in the declared area(s) of practice

To attain a rating of **R** in this area, the candidate must consistently:

- Demonstrate a sufficient breadth of knowledge and skills to deal with the typical presenting conditions found within their declared area(s) of practice and client group(s) (without limiting themselves so narrowly that they can only offer services to clients with very few conditions).

3. Competence in formulating and communicating a diagnosis

(Except for candidates whose sole area is Industrial/Organizational Psychology) In order to attain a rating of **R** in this area, the candidate must consistently:

- Demonstrate the ability to combine psychological assessment data with clinical impressions, historical information, current life status and symptoms to generate diagnoses for groups of clients that the candidate might be expected to encounter in the area(s) of practice they have declared. This includes ruling in and ruling out various diagnostic possibilities and identifying co-morbidity.

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- Demonstrate the ability to sensitively communicate diagnostic information; including providing information about prognosis, treatment possibilities and answering common questions clients are likely to ask.

4. Awareness of limits of competence

In order to attain a rating of **R** in this area, the candidate must consistently:

- Demonstrate an awareness of when the candidate needs to consult with others with regard to client groups, client issues, or client complexity.
- Demonstrate sufficient knowledge to recognize disorders with which they do not work themselves, and sufficient knowledge about other resources to make an appropriate referral.

5. General maturity of professional attitude

In order to attain a rating of **R** in this area, the candidate must consistently:

- Demonstrate positive coping strategies with personal and professional stressors and challenges.
- Maintain complete records of all patient contacts that include pertinent information. Notes are clear, concise, and timely.
- Demonstrate efficiency in accomplishing tasks without prompting or reminders.
- Demonstrate excellent time management skills regarding appointments, meetings, and leave.

(B) Core Competencies for Professional Practice:

1. Interpersonal relationships

In order to attain a rating of **R** in this area, the supervised member must:

- Consistently demonstrate effective communication skills by establishing and maintaining rapport with clients and colleagues;
- Consistently demonstrate the ability to establish and maintain trust and respect in the professional relationship;
- Consistently demonstrate professional and appropriate interactions with treatment teams, peers, and supervisors;
- Consistently demonstrate the ability to handle differences openly, tactfully, and effectively;
- Reliably identify potentially challenging clients and seek supervision/consultation;
- Demonstrate knowledge of self, such as motivation, personal resources, values, personal biases, and other factors that may influence the professional relationship (e.g. boundary issues);
- Acknowledge and respect differences that exist between self, clients, and colleagues in terms of race, ethnicity, culture, and other individual difference variables.

2. Ethics and Standards

In order to attain a rating of **R** in this area, the supervised member must:

- Consistently demonstrate knowledge and skills in an ethical decision-making process;
- Identify potential ethical and legal issues and address them proactively;
- Actively seek consultation when treating complex cases and when working with individuals who present with unfamiliar symptoms;

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- Demonstrate knowledge and skills in dealing with informed consent and confidentiality in a specific situation (i.e. taking into account family members, third parties such as insurance companies and mandatory reporting obligations);
- Demonstrate knowledge and the ability to apply standards for psychological tests and measurements;
- Demonstrate an understanding of one's responsibilities to client, public, profession, and colleagues.

3. Assessment and Evaluation

In order to attain a rating of **R** in this area, the supervised member must consistently:

- Demonstrate proficiency administering commonly used tests in the candidates declared area(s) of practice;
- Demonstrate ability to formulate a referral question;
- Demonstrate the ability to appropriately choose the tests to be administered to answer the referral question;
- Demonstrate the ability to develop a systematic assessment or evaluation plan which includes formal psychometric testing in areas of practice where this is standard;
- Demonstrate the ability to accurately interpret the results of psychological tests used and to integrate results;
- Make accurate diagnostic formulations for a variety of disorders;
- Demonstrate knowledge and skill in the formulation of diagnostic hypotheses and demonstrate making a diagnosis when appropriate;
- Write a well-organized psychological report that answers the referral question clearly, integrates assessment information, provides a reasoned case formulation, and provides the referral sources with appropriate and specific recommendations;
- Demonstrate the ability to collect appropriate information during an intake interview to formulate and test hypotheses about what the client's problem may be.

4. Intervention and Consultation

In order to attain a rating of **R** in this area, the supervised member must consistently:

- Gather information about the nature and severity of client problems, analyze this information to formulate hypotheses about the factors that are contributing to these problems through qualitative and quantitative means, and select appropriate intervention methods;
- Develop a conceptual framework, and communicate this to the client;
- Produce good case conceptualization within own preferred theoretical orientation; and be able to also draw some insights into case from other orientations;
- Set realistic goals with clients;
- Conduct interventions that are well-timed, effective, and consistent with empirically supported treatments.

5. Research

In order to attain a rating of **R** in this area, the supervised member must consistently:

- Demonstrate knowledge and skills in standards for conducting psychological research;
- Demonstrate the ability to effectively convey research results in writing.

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Along with the awareness of the supervised member's early stage of professional development, best practices in supervision facilitate a context that deepens a supervised member's self-awareness and allows for the supervised member to reflect on their areas of strength and areas for further development (including limits of competence). Genuine feedback to the supervised member and to the College's [Registration Committee](#) is an important part of protecting the public and ensuring quality psychological services. Providing ongoing support and constructive feedback is an important part of the supervisory relationship.

Creating and maintaining a supervisory relationship in which the supervised member feels safe and supported is important in addressing areas that may require remediation. Being aware of the inherent hierarchy in the relationship, the supervisor endeavors to foster an environment of respectful and open dialogue where feedback to the supervisor is encouraged. Such feedback to the supervisor will help the supervisor tailor the supervisory experience to foster optimal growth of the supervised member.

Supervision is an important skill in the professional practice of psychology. Supervisors must consciously monitor and develop their own supervisory skills so that their supervisees are able to gain the full benefit of the supervisory experience. Supervisors serve as important models of supervision for the supervised members who will one day become supervisors themselves.

d. Expectations for Communication between Supervisors

Each supervisor will bring different skills, styles, and knowledge to the supervisory experience. Each will also have a unique relationship with the supervised member and will obtain information about the supervised member that will likely be valuable to both the Primary and Alternate supervisors.

Communication between supervisors is important for setting goals and confirming plans for the period of supervised practice. It is important that this includes a joint meeting between the Primary and Alternate supervisors and the supervised member at the start of authorized supervised practice. This can serve to define a specific learning plan that outlines the areas that each supervisor will emphasize. This can include specifying content areas and the development of certain competencies, as well as more general professional objectives for each supervisor.

Supervisors must communicate with each other at regular intervals regarding the developmental goals and progress of the supervised member until the end of the supervision period. Supervisors must meet together with the supervised member, no less often than at the required evaluation periods. Supervisors complete their own Supervision Records and Supervisor's Work Appraisal Forms and ensure that the information they contribute is shared with the other supervisor. The supervised member benefits from a coordinated supervision approach that keeps all participants "on the same page" and allows supervision goals to be modified as needed with each supervisor having knowledge of the other's areas of focus. All meetings must be documented in the supervision records.

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e. Responsibilities of Supervised Members

1. Familiarity with and Adherence to Standards

Before beginning to provide client services, supervised members must review the [Registration Guidelines](#), [Standards of Professional Conduct 2017](#), [Professional Misconduct Regulation](#), CPA [Code of Ethics for Psychologists](#) and the [relevant legislation and other guidelines relevant to the provision of psychological services](#). They are encouraged to dialogue with their supervisors about these professional guidance materials and should seek clarification directly from their supervisors as needed.

2. Adherence to Directions of the Supervisor

Because supervisors are fully responsible for the services provided to their clients, supervised members are required to adhere to all directions of the supervisors. The hope is that supervisors will create the conditions in which a supervised member will be welcome to raise questions or even respectfully challenge the feedback or direction of a supervisor, as this may provide a valuable opportunity for productive discussion. If a disagreement cannot be resolved, the supervisor's direction must be adhered to. Holding a Certificate of Registration for Supervised Practice provides the time to "practice" having responsibility for the client care, without fully having it, and the opportunity to enjoy the reassurance that the supervisor is monitoring and directing the care provided to a client.

3. Inclusion of Supervisors in Communications with College

It is critical that supervisors are aware of any challenges experienced by their supervisees. The supervisor provides guidance appropriate to the needs of the supervised member. It is understood that supervisors may have their own questions about the Legislation, *Standards*, and other relevant Guidelines and may require some assistance with respect to these, as all members do from time to time. Supervised members are welcome to contact the College's Practice Advisory service for consultation after they have discussed the issues of concern with their supervisors. When communicating with the Practice Advisory service, supervised members must identify themselves as such; when communicating in writing, they must copy their supervisors, and when communicating by telephone, the supervisor is expected to join the discussion. However, in the rare event that a supervised member wishes to receive confidential guidance from the College with respect to issues they are having difficulty resolving in consultation with a supervisor, the supervised member may contact the College without the supervisor's involvement.

4. Fulfillment of College Quality Assurance Requirements

The [Quality Assurance](#) regulations require that individuals holding a Certificate of Registration for Supervised Practice fulfill the Quality Assurance requirements for all members as set out in Regulation. Currently, all supervised members must participate in Self-Assessment and Continuing Professional Development. Supervised members may also be required to participate in an Assessment or Peer Assisted Review if the Quality Assurance Committee deems it necessary.

f. Supervision Agreements

The supervisory relationship begins with the supervisor providing clear information regarding the expectations and parameters of supervision, communicated both verbally and in the form of a written contract (Bernard & Goodyear, 2014; Osborn & Davis, 2009; Thomas, 2007, 2010).

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“The supervision contract is an informed consent document, describing the expectations, goals, requirements, and parameters of supervision; roles and responsibilities of supervisee and supervisor(s); specific limits of confidentiality in supervision (e.g., normative reporting/disclosures to graduate programs, licensing boards, training teams); and liability, direct and vicarious, of the supervisor(s), by virtue of their relationship with the supervisee” (APA, 2014).”

For the College, the supervision contract is referred to as an “individual supervision agreement”. As detailed in [Standard 4.1.1. of the College’s Standards of Professional Conduct, 2017](#), “the supervising member must ensure that there is an individual supervision agreement, signed by both supervisor and supervisee, for each supervisory relationship.” The individual supervision agreement is different from the Primary/Alternate Supervisor’s Agreement Form provided to the College when an applicant submits an application for supervised practice, and it is one of the first tasks in the initiation of the supervisory relationship.

Although the Standards require the use of a supervision agreement containing all of the elements listed in Standard 4.1.1 5), supervisors and supervisees are free to augment these agreements with additional features. For example, a supervision agreement may be enhanced by considering elements suggested by the American Psychological Association (<https://www.apa.org/about/policy/guidelines-supervision.pdf>).

g. Documentation and Record Keeping

Responsible supervision entails adequate documentation and record keeping. Supervisors are required to complete and maintain supervision records and also to complete Supervisor’s Work Appraisal Forms in monitoring satisfaction of the registration requirements and the degree of the supervised member’s readiness for Autonomous practice. Supervision records are for the use of the supervisor and need not be shared with the College unless specifically requested, while the Supervisor’s Work Appraisal Forms must always be provided to the College.

- Supervisors are responsible for ensuring that supervisees’ involvement in clinical record keeping meets the *Standards of Professional Conduct, 2017* (e.g., client files).
- Supervision agreements and supervision records need not be shared with the College, but supervisor and supervisee should each have a copy.
- Supervisors are encouraged to share Work Appraisal Forms with each other when supervising the same supervisee (e.g., Primary Supervisor shares with Alternate Supervisor and vice-versa).
- Supervisor’s [Work Appraisal Forms](#) and [Supervisor’s Training Plan Evaluation Form](#) include a log of supervision meetings which are provided to the College.

Each **supervision record** must include, at a minimum:

- a) the date and length of time of each supervision meeting;
- b) information that will permit the identification of each client discussed at each supervision meeting;
- c) a summary of discussions regarding each assessment and intervention matter occurring at each supervision meeting, while maintaining confidentiality of personally identifiable information;

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- d) a summary of discussions regarding any relevant ethical, professional, and jurisprudence issues discussed at each supervision meeting;
- e) a notation of any directives provided to the supervisee at each supervision meeting; and
- f) a notation of any of the supervisee's strengths and needs for further development identified at each supervision meeting;
- g) Formal documents must be signed by the supervisor, except in the case where the supervised services that are provided by an autonomous practice member, in which case the client record must indicate that the supervisor has reviewed and endorsed the contents of the document.

The supervising member's name, clearly identified as the supervising member, and their contact information, must be clearly identified on all documents, including those related to billing and payment, regardless of whether they require signature. A good practice may be for the supervised member to state in any documentation that contains information about a client "Supervised by AUTONOMOUS MEMBER NAME".

Each **supervision log** must include, at a minimum:

- a) the date and length of time of each supervision meeting;
- b) a summary of the content discussed in supervision, which may include discussions of client(s), any relevant ethical, professional, and jurisprudence issues, and any directives provided to the supervisee;
- c) signatures of both supervisee and supervisor to indicate agreement on log entries.

Of note, a good practice may be for the supervised member to complete the supervision logs, reviewed and signed by the supervisor. The supervisor has responsibility for the supervision record.

3. DECISION TO ENTER INTO A SUPERVISORY RELATIONSHIP

a. Choosing Primary and Alternate Supervisors

One of the first important tasks facing a candidate for supervised practice is to choose both Primary and Alternate supervisors. Supervisors should be chosen on the basis of whether their areas of practice are those for which the candidates have been prepared by their training and in which they wish to work in the long term. To identify potentially appropriate supervisors, candidates may use the College's [Public Register of Members](#) site to search for geographical location, practice areas, client groups, and language of practice for Ontario psychologists.

Under some circumstances, an employer may assign supervisors. While this may relieve candidates of the somewhat daunting task of finding their own supervisors, there may be some potential drawbacks to this approach. For example, supervisory relationships mandated by the employer can remove the element of choice from the control of the supervisee or supervisor. This can lead to challenges if there are unresolvable differences in personal style or expectations, or if one member of the supervisory relationship has reservations about the suitability of the other to fulfil the role assigned. In addition, even if the employer does not assign the supervisor, there may be limited options for choosing a supervisor within a given organization. A discussion at the time of hiring about options for choosing a supervisor as opposed to having one assigned may be useful from the perspective of the candidate for supervised practice.

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Increasingly in recent years, many candidates have had to search for a supervisor in private practice settings rather than in institutional settings due to reductions in positions for psychologists in institutional settings. Private practice settings have the potential to provide candidates with important experience in business aspects of the practice of psychology and to prepare them in their turn to work in private practice. However, the need to find work and to receive adequate financial compensation during the period of supervised practice may lead to candidates seeking to work with client groups or in areas of practice for which they have not been adequately prepared in their prior training. It is important to note that recent changes to supervised practice guidelines by the Registration Committee now mean that candidates will not be permitted to take on new client groups or areas of practice for which they do not have the requisite training during the supervised practice period.

Candidates who are beginning the search for Primary and Alternate supervisors need to consider the following issues during discussions with potential supervisors:

- Will the proposed supervisors have sufficient time available to provide thorough supervision?
- Will the supervisor be able to ensure continuity of services if the supervisee is unable to continue service provision?
- How many clients will the supervisors be able to assign to the supervisees?
- Will there be a wide enough range of presenting problems in all of the areas of declared competence to ensure supervisees' competence when they eventually move to autonomous practice?
- In the context of a private practice, supervisees may experience financial pressures and supervisors should be mindful to provide a supportive environment that ensures that supervisees receive a fair rate of compensation.
- Will the supervised member have sufficient time to prepare for exams and have enough supervision time for each case assigned?
- Have the proposed supervisors had previous experience supervising candidates in supervised practice? If so, is it possible to speak with these supervisees to find about their experiences with these supervisors before finalizing supervision arrangements?
- Is the supervisor currently supervising any other candidates for registration? If so, could this provide an opportunity for peer support and peer mentoring?
- What are the proposed supervisors' models of supervision and what expectations do they hold for supervisees?
- Is there a possible dual relationship or perceived conflict of interest? If so, what steps can be taken to address concerns related to evaluation, power imbalance, confidentiality, etc.?

b. Choosing to Become a Supervisor

Many members of the College enjoy opportunities to provide supervision to members in supervised practice and welcome the opportunity to mentor a colleague who is joining the profession. Supervisors are encouraged to reflect upon implicit biases and unconscious assumptions when presented with opportunities to supervise candidates whose identities may reflect diversity. Working with those for whom there may be differing points of intersectionality can represent an opportunity for growth and learning.

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Supervisors considering taking on a candidate for supervised practice will need to consider several factors:

- Are the supervisor's areas of practice / client population aligned with the supervised member's proposed areas?
- If the supervisor is considering supervising a supervised member for the first time, is there another member of the profession who could act as a mentor or has the supervisor had recent experience with the important components of the year of supervised practice (for example, by having participated in the Oral examination process in Ontario either as a supervised member or as an Oral examiner)? Participating in College activities such as Oral examinations is a way for supervisors to gain more familiarity with current registration requirements.
- Is it intended that the supervisor will be the Primary or Alternate Supervisor? Do they know the other proposed supervisor? Between the two of them do they have sufficient competence to meet the supervisee's needs?
- Does the supervisor have a sufficient flow of referrals and sufficient time for supervisory activities to allow for the development of the supervisee's competence to the point where they will be ready for autonomous practice?
- What will the remuneration arrangements be?
- What are the plans for after the supervisee is authorized for autonomous practice?

When supervision takes place in a private practice, the College requires both supervisor and supervisee to confirm, in writing to the College, that the arrangements for supervised practice meet standards with regard to contact with clients, method of remuneration, billing, and public announcements.

In rare cases, supervisees will be hired by an organization which does not have any psychologists or psychological associates on staff or none who are qualified to supervise a particular candidate. In this case, to meet its mandate of protection of the public as well as ensuring adequate supervision and training of the candidate, the College will require that, as the professional with responsibility for the client's care, the primary supervisor be given permission to come on site to review files and meet with clients as required. The organization will be expected to indicate to the College, in writing, that these conditions have been met.

Overall, it is important for potential supervisors to remember that the supervisory relationship is necessarily hierarchical, that supervisors have full responsibility for clients seen by the supervisees, and that an essential part of the supervisor's role is to ensure the protection of the public - a task not to be taken lightly.

A supervisee could potentially choose a supervisor who is not within the setting that provides cases for the supervisee to see. Nevertheless, the supervisor must assume ultimate responsibility for these cases, must approve the assignment of all cases to the supervisee, and becomes either the custodian of the personal health information records or an agent of the organization (e.g. hospital) with full access to the client records for the supervisee.

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c. Completing the Declaration of Competence Form

The [Declaration of Competence Form](#) is the document that tells the College what services prospective supervised members believe they are competent to provide in supervised practice. It requires candidates to specify in what areas of psychology practice (e.g., clinical, school, rehabilitation) they will be practicing, with which client groups (e.g., children, adults, families), and what kinds of professional activities they will be performing (e.g., assessment, intervention, research). It forms part of the application for a certificate of supervised practice and its congruence with supervisees' training and experience is carefully reviewed by the College prior to issuing certificates of registration authorizing supervised practice. It will also eventually inform the Oral examining team's decision about what questions to ask candidates. The Declaration of Competence indicates the intentions that supervised members have about the areas of practice in which they eventually hope to be authorized to practice.

It is important to keep in mind that areas of practice and populations or client groups are only authorized for an individual after the Oral Examination. It is possible that, based on the findings of the Oral Examination, an individual's authorized area of practice may be narrower than their original Declaration of Competence, if the Oral Examiners have major concerns about the individual's competence in some areas of practice.

Candidates and each of their proposed supervisors must carefully outline an appropriate Declaration of Competence taking into account the prior training candidates have had (including both academic preparation and prior clinical experience) and the nature of the proposed supervised practice. If the Declaration of Competence is submitted prior to the identification and approval of proposed supervisors, candidates must review its appropriateness again with the supervisors and, if necessary, make changes.

At times, candidates may feel some pressure from an organization or supervisor to check off areas, activities, or client groups for which they do not feel that they have adequate preparation. While this is understandably difficult to address, it is critical that candidates try to resolve such issues as early as possible to avoid later problems.

Typically, newly graduated candidates are not expected to check off more than two areas of practice. Both Assessment/Evaluation and Intervention/Consultation must be checked off for all chosen areas of practice, while activities of research and teaching are only included in the Declaration of Competence if they will form an important part of the member's year of supervised practice. While some candidates may not engage in extensive psychometric testing, they still will need to demonstrate that they can adequately evaluate new clients and develop an appropriate conceptual formulation for the controlled act of diagnosis.

Only areas of practice in which candidates will actually be working during the period of supervised practice and will gain sufficient exposure to reach readiness for autonomous practice should be checked off. Only client populations for whom past academic coursework and training have prepared the candidates and with whom supervisees will receive sufficient experience to establish entry-level competence during the period of supervised practice should be checked off as stated in the [Guidelines for Completing the Declaration of Competence](#).

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At least one of the two supervisors must themselves be authorized to practice in each of the areas, and client groups checked off by the candidate. For example, this means that the candidate cannot check off health psychology if neither supervisor is authorized to work in that area.

When the College reviews the candidate's application, there may seem to be a lack of congruence between the candidate's training and the areas and client groups checked off on the Declaration of Competence. This will typically lead to a Declaration of Competence that does not match the foundational training. In this case, several things may happen. First, the candidate will be asked to provide information about what training they have had other than course work that may justify the inclusion of the areas of practice and client groups. Second, the Registration Committee may advise a candidate to change the Declaration of Competence. If the Registration Committee continues to be convinced that the proposed Declaration of Competence includes more areas of practice and/or client groups than is reflected by the candidate's training, issuance of the certificate for supervised practice may be held up until the issue is resolved.

During the period of supervised practice, the candidate may have to make changes to the Declaration of Competence as the result of a change in employment or in the type of work available. Under these circumstances, any change should be discussed with both supervisors. Once agreement is reached, the College must be notified.

In general, the College will not accept expansion of the Declaration of Competence in the six months prior to the Oral examination since supervisors will not have adequate time to evaluate the expanded areas.

d. Financial Compensation and Private Practice Arrangements

There are two issues of compensation that need to be addressed when supervision takes place in a private practice:

- How the supervisee will be compensated for the clients they see;
- How the supervisor will be compensated for providing supervision.

These arrangements should be established in writing prior to the beginning of supervision, as transparency and fairness or reasonableness with regard to these matters is important both for the supervisee and for the supervisor. Provision of supervision should not be exploitative and should not be related to the volume of client revenues generated by the supervised member for the supervisor. The supervisor still has to meet expectations for competent supervision regardless of the level of financial compensation provided for supervision by the supervised member.

In accordance with the [College Standard 4.1.1](#), the supervising member must ensure that billing and receipts for services are in the name of the supervising member, psychology professional corporation or employer and clearly identify the name of the supervising member and the name, relevant degrees, and professional designations of the supervised psychological service provider.

4. NAVIGATING CHALLENGES IN SUPERVISION

a. Changing the supervisory arrangement

Occasionally, a supervisee may need to change supervisors during the supervised practice year. This may reflect a change in employment setting for supervisor or supervisee, leave of absence, or other circumstances.

The supervisee must notify the College and request approval of the intended change at the earliest convenience. The College's Registration department will ensure that all affected parties are informed of the change.

It is the responsibility of the supervisee to find a new supervisor who holds the requisite areas of declared competence and is available to take on supervisory responsibilities. The supervisee must propose the new supervision arrangement to the College for approval. It is possible that the change in supervisors may require a request for extension to the period of supervised practice. Of note, one cannot continue in supervised practice for any length of time without approved Primary and Alternate supervisors.

Where possible, the supervisee should facilitate communication between the outgoing and incoming supervisors. This may include sharing Supervisor's Work Appraisal documents and supervision logs.

In the event of a planned leave of absence, the supervisee must contact the College to request that their period of supervised practice be temporarily suspended during this leave.

Clients are the responsibility of the supervisor. If a supervisee leaves a work setting, it is the responsibility of the supervisor to ensure that client service is continued or terminated in a manner which would not constitute professional misconduct, in accordance with section 1.8 of the Professional Misconduct Regulation (<https://www.ontario.ca/laws/regulation/930801>).

b. Challenges in the Supervisory Arrangement

Infrequently, there may be difficulties in the supervisory arrangement. This may reflect: (1) poor 'fit' in the supervisory working alliance; (2) supervisor appraisal that the supervisee is unable to meet training goals despite effort and supervisory support; or (3) supervisee concerns about inadequate or harmful supervision.

1. Importance of Attending to the Supervisory Working Alliance

The supervisory working alliance reflects an agreement on the goals and tasks of supervision, as determined within the supervisory relationship (Bernard & Goodyear, 2021). Positive ratings of the supervisory working alliance are associated with higher satisfaction with supervision and improved ratings of self-efficacy among supervisees (DePue et al., 2020).

From time to time, there may be ruptures to the supervisory working alliance. This may result from various issues or challenges such as:

- Mismatched expectations between supervisor and supervisee

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- Supervisee over-confidence or under-confidence
- Miscommunication between supervisor and supervisee
- Interpersonal dynamics
- Cultural ruptures & microaggressions

Friedlander (2015) provides tips for fostering responsive supervision and for repairing ruptures. Notably, given the inherent power imbalance in a supervisory relationship, it is the responsibility of the supervisor to initiate steps to address or repair a rupture.

Supervisors are encouraged to:

- Take responsibility for engagement and initiative
- Earn trust (take responsibility for mistakes, unfair assumptions)
- Identify and make efforts to resolve conflict
- Adapt supervisory style as needed (e.g., invitations vs. dictums)
- Respond with sensitivity to the supervisee's needs
- Consult with colleagues and self-reflect on unconscious bias and assumptions

2. Professional Gate-Keeping Role of Supervisor in Ensuring Supervisee Meets Minimum Standards

Challenges in the supervisory relationship may sometimes reflect supervisor concerns about the supervisee's professional practice. Respecting the gate-keeping role of supervision for public interest, the supervisor has responsibility for evaluating the supervisee and for flagging serious concerns.

Supervisors may ask how to determine whether concerns about supervisee professional practice reflect a gap or lag in acquisition of skills or a more pervasive concern about professional standards.

Vacha-Haase et al. (2019) highlight 'red flags' for concern when any of the following issues are noted:

- Inability or unwillingness to integrate professional standards into professional behavior
- Inability to acquire professional skills to meet a basic level of competency
- Inability to manage personal factors that impact clinical service
- Supervisee doesn't acknowledge problem when it is identified
- Quality of services is substandard
- Requires a disproportionate amount of supervisor time/attention/training
- No improvements or changes despite the additional feedback/training

Supervisors should first try to address concerns about a supervisee by, for example, providing clear and direct feedback; addressing perceived skills or knowledge deficits directly by means of provision of readings, teaching skills, or engaging in role plays; consulting with the primary or alternate supervisor for the supervisee to determine if the issues occur across supervisors or across work settings; and carefully documenting concerns and remediation efforts in the supervision record.

Supervisors should apprise the Registration department of the College of the concerns as early as possible.

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3. Inadequate or Harmful Supervision

Challenges in the supervisory relationship may also reflect concerns by the supervisee about the quality of supervision. Sometimes, supervisees may experience supervision that does not promote their professional development, does not attend to factors of diversity, is inattentive to the power differential between supervisor and supervisee, or does not provide evaluative feedback that is fair, respectful, helpful, and transparent. Ellis and colleagues (2014) describe these type of supervisor behaviors as indicative of ‘inadequate supervision’. Inadequate supervision is associated with lower quality of training, higher supervisee stress and burn-out, and a reduced likelihood that the supervisee will use supervision to disclose difficulties and challenges in the client service (Hutman & Ellis, 2020).

Infrequently, supervisors may engage in harmful supervisory practices. Harmful supervision is defined as “supervisory practices that result in psychological, emotional, and/or physical harm or trauma to the supervisee” (Ellis et al, 2014). According to Ellis, a supervisor engages in “harmful supervision” by engaging in inappropriate action or inaction that causes genuine harm to the supervisee, or by engaging in unethical behavior that is known to cause harm to a supervisee. Harmful supervision may also result in harm to a client. Elements of harmful supervision may reflect acts of professional misconduct as outlined in the Ontario Psychology Act (1991) regulation (i.e., #5 Failing to supervise adequately a person who is under the professional responsibility of the member and who is providing a psychological service.).

Supervised members who have concerns about their experience with a supervisor should contact the College’s Registration Department. Registration staff may be able to assist in trouble-shooting problems of inadequate supervision or may facilitate a referral to the Registrar in the event of harmful supervision.

5. OTHER CIRCUMSTANCES INVOLVING SUPERVISION FOR REGISTRATION

a. Supervision for the purpose of expanding one’s authorized area(s) of practice

Autonomous Practice members of the College may propose a plan to expand their practice to add a new area or client group and have this plan approved by the Registration Committee. Such a plan will involve acquisition of theoretical knowledge, and acquisition of, which includes supervision of cases by at least one other autonomous practice member. However, in this case supervisors are not required to sign final drafts of reports and formal correspondence. Nevertheless, supervisors must approve reports and correspondence and document their approval.

The role of the supervisor in this circumstance mirrors that of supervisors of candidates in supervised practice in many ways (e.g., supervision meetings should include discussion of ethics and jurisprudence as it relates to the new area(s) as well as tricky issues, should address limits of competence, and should cover how theory is translated into practice).

At the conclusion of supervision, the Registration Committee may require attendance at an interview, and the supervisor should help prepare the member for this via supervision meetings and a mock interview.

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Current guidelines <https://cpo.on.ca/members/member-services/#Adding-A-New-Practice-Area-or-Client-Group>

If the candidate is undertaking College-mandated training, the supervisor and supervisee have shared responsibility for the development, implementation, and evaluation of supervised member training plans, which must be approved by the Registration Committee.

b. Supervision during Post-Masters Preparation for Registration as a Psychological Associate

Members providing supervision for the purpose of assisting those completing the required Post-Masters Work Experience for Registration as a psychological associate are encouraged to review the relevant section of the [Registration Guidelines](#) with the supervisee in order to ensure a clear and shared understanding of the requirements.

As with any service provided under the supervision of a member of the College, the services provided under supervision are considered psychological services and must be provided in accordance with the legislation, regulations, standards, and other guidelines relevant to the practice of the profession, regardless of any other professional requirements the supervisee may be subject to if they are already a member of another profession. In addition, all of the requirements for supervisors in the [Standards of Professional Conduct, 2017](#) which are relevant to the supervision of non-members apply to the supervision of these individuals.

Because these individuals are considered to be “in the process of satisfying the requirements to become a member of the College of Psychologists of Ontario”, they may be permitted to supervise other service providers, subject to the requirements of Standard 4.1.3. They may also be permitted to perform Controlled Acts which College members may perform, subject to the requirements of Standard 4.3.1.

Supervisors are also asked to review Standard 6.4 with supervisees to ensure that public announcements of psychological services and fees may only be offered in the name of an autonomous practice member of the College. Similarly, they are asked to review Standard 9.1.2 with the supervisee to ensure the understanding that the supervisor is responsible for the security, accessibility, maintenance, and retention of records.

Because these individuals are not yet supervised members of the College, many of the requirements in respect to those with a Certificate of Registration for Supervised Practice are not applicable; there is no requirement for an alternate supervisor or for completion of Supervisor’s Work Appraisal forms. There is, however, a requirement for the Supervisor to submit a [Post-Masters Work Confirmation Form](#) directly to the College.

c. Supervision of autonomous members of other regulated health professions

Supervisors who are engaged in the supervision of autonomous members of other regulated health professions should refer to the Supervision Standards within the [Standards of Professional Conduct, 2017](#).

6. PREPARING FOR EXAMINATIONS

a. Planning for the Examinations

Supervisors play an important role in assisting supervisees to prepare for the College's exams.

In some cases, it may have been some time since a supervisor completed the College's entry to practice examinations. For this reason, supervisors must ensure that they are aware of the College's exam resources, the number of permitted attempts for each exam, and the College's policy on examination accommodation.

The [Registration Guidelines](#) detail each of the required examinations including the number of attempts permitted for each exam. Because the number of attempts permitted for each examination are limited, it is important for candidates and their supervisors to discuss in advance preparation for the examinations, and supervisors should not rush candidates into attempting an exam if they do not feel prepared. In cases where a candidate is not ready to attempt an examination supervisors should discuss the possibility of the candidate requesting an extension of their certificate authorizing supervised practice if necessary.

The College's [Examination Accommodations Policy](#) provides information on how a candidate may request an accommodation for any of the College's required examinations. Supervisors should discuss accommodation needs with the candidate at the beginning of the supervised practice period.

Supervisors should discuss the supervisee's planned schedule for taking the examinations at the beginning of the supervision period. This can be revisited in later supervision sessions if the supervisor feels the supervisee is getting into difficulties, or if there is an upcoming change in workload or the supervisee's responsibilities that affect their ability to study. It is very important for the supervisee to think through their plan for taking an examination in light of their likely activities during the year of supervised practice and the planned date for taking the Oral Examination. For example, the Examination for Professional Practice in Psychology (EPPP) requires a substantial lead time in terms of booking an appointment to write and the results must reach the College a minimum of one month in advance of the Oral Examination session.

The Jurisprudence and Ethics Examination (JEE) is only offered twice a year and will need to be scheduled so as to allow study time which does not overlap with study time for the EPPP. In general, it is a good plan to start studying for the EPPP very soon after starting supervised practice. This allows the supervisee to attempt a practice examination and get a sense of how close their score is to the passing point and thus how much more study will be needed before scheduling an actual examination.

b. Jurisprudence and Ethics Examination (JEE)

This exam is offered twice per year, typically in Spring and Fall. [Upcoming examination dates are posted on the College's website in advance](#). Candidates should base their study and planning around these scheduled dates.

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It's important for candidates and their supervisors to recognize that the JEE is a scenario-based multiple-choice examination which requires the application of jurisprudence and ethics knowledge to situations that may present themselves in practice; supervisors can assist the candidate by regularly discussing ethical scenarios and tricky issues during supervision meetings and reviewing relevant legislation as it applies to client situations.

The JEE is a broad-based exam and will cover a broad range of areas. Therefore, even if a candidate works with adults only, they must still be aware of application of jurisprudence in cases that may involve children and adolescents, or seniors, for example.

For example, if a candidate works only with adults, they should be aware of how to recognize information they receive in the course of practicing the profession that a child is in need of protection and what the guiding legislation is in that situation. Additionally, if a candidate only works with children, they should be aware of how to recognize and report abuse in a long-term care facility or retirement home.

Importantly, candidates should not use the College's Practice Advisory Service as a resource for JEE preparation. Instead, candidates should approach their supervisor first for guidance and, if their supervisor needs support, then the supervisor should approach College's Practice Advisory for assistance.

The following references may be helpful in preparing for the JEE:

- Evans, D. R. & Dobson, K. S. (2021). *Law, standards, and ethics in the practice of psychology* (4th ed.). Toronto, ON: Carswell.
- Truscott, D., & Crook, K. H. (2021). *Ethics for the practice of psychology in Canada*. Edmonton (3rd ed.), AB: University of Alberta Press
- [The Canadian Psychological Association. \(2017\). *Canadian code of ethics for psychologists* \(4th ed.\). Ottawa, ON: The Canadian Psychological Association.](#)

Additional tips for JEE preparation:

- It is important to check for changes in legislation since the date of publication;
- Review material published by the College regarding legal and ethical issues (e.g. [JEE Preparation Document](#), College communications, Standards);
- Review the actual [legislation](#) which is available online on the Ontario and Canadian government [e-laws](#) website;
- Restate the legislation in your own words;
- Make diagrams, charts and other visual aids to assist with understanding and retaining legal and procedural information that is less familiar;
- Discuss legislation and ethical issues with supervisors; how do the procedures that used in daily practice relate to the legislation?
- Get clarification for information that is unclear (first from your supervisor and then from Practice Advisory if needed);
- Review test taking strategies for multiple choice examinations.

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c. Examination for Professional Practice in Psychology (EPPP)

Of note, the College requires successful completion of the EPPP Part I. The College does not require the EPPP Part II.

The following strategies are suggested when preparing for the EPPP:

- Review the information and resources found on the website of the [Association of State and Provincial Psychology Boards](#) (ASPPB) including the [EPPP Candidate Handbook](#), [EPPP FAQ's](#), and [other helpful information](#).
- If you are using study materials, ensure that they are current;
- Set a study plan and a schedule;
- Discuss the plan with supervisors;
- Complete the practice examinations in a manner that is similar to the actual examination (e.g., complete all the questions in one long session);
- Complete all the practice examinations (The ASPPB's [EPPP Practice Exams](#) may be helpful);
- Review the answers to the practice examinations; important information is incorporated in the answers that may not be available in the actual readings;
- Do not become discouraged if, at first, performance on the practice examinations improves slowly;
- Think about the information and, when appropriate, try to apply it to day-to-day practice;
- Do not complete any practice examinations the day before the actual examination. Use this time to review the material by responding to the questions that are included as part of each reading;
- Talk to supervisors or peers about any anxieties or insecurity about the exam. They will assist with problem-solving, reassurance, and strategies for reducing anxiety;
- Taking the EPPP can be stressful; practise good health habits leading up to and during the exam (e.g., try to get proper rest and nutrition); use relaxation techniques to help with managing stress and anxiety;
- Discuss test taking strategies with supervisors (e.g., read each question three times, pick a response; if unsure about the response, mark it as a question to come back to at the end, if there is time).

If a candidate does not pass an attempt at the EPPP, it is suggested that the candidate wait at least 90 days to re-take the exam in order to allow for sufficient time to review and prepare. It is important for supervisors and candidates to be aware of the number of maximum attempts permitted at the EPPP (4), and to not rush to re-take this examination after a failed attempt.

If a candidate finds that they do not feel well on the day of the examination, they should cancel the examination and re-schedule it for a later date.

d. Oral Examination

The purpose of the Oral Examination is to evaluate how well supervisees have been able to integrate their knowledge, skills, and experience in the provision of psychological services, including the application of jurisprudence and ethics knowledge to their practice. Once the supervisee has confirmation of attendance at an upcoming Oral Examination, it will be important

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for the supervisors or other members of the College to assist them by scheduling a “mock Oral Examination”. This should be a relatively formal occasion, to help the supervisee master their anxiety in this unfamiliar evaluation setting. If the supervisor or supervisee know of members of the College who have served as Oral examiners recently and thus are familiar with the process, these will be ideal people to ask to participate. Since the actual Oral Examinations involve a panel of three examiners, this is a good number for the mock Oral Examination also. Feedback from those who have recently taken the Oral Examination indicates that they found a mock Oral Examination one of the most helpful preparation tools.

Another useful strategy is to seek peer support, both from others attending the planned Oral Examination session and from those who have recently taken the examination, who can describe the process and the strategies that worked for them. However, it is very important to note that the content of the examination is confidential and revealing it may constitute an act of Professional Misconduct. Finally, we strongly suggest that candidates should read the instructions sent to them before each examination extremely carefully, and probably do so several times. Careful review of the information material provided will help to prevent surprises which can only increase stress levels. Below are some specific strategies which candidates have found helpful:

Review the [Registration Guidelines](#) to learn about each of the College’s required examinations, including the maximum number of attempts permitted for each examination.

Review the College’s [Examination Accommodation Policy](#) to understand how a candidate may request examination accommodations on the basis of a documented disability.

Tips for preparing for the Oral Examination:

- Discuss preparation for the Oral Examination with supervisors; ask them to arrange a mock Oral Examination for you, or if they don’t feel comfortable with this, approach other members of the College to see if they will do so;
- Be able to clearly articulate the procedures that are used in your practice; taking into account legal and ethical standards, be able to explain why you use them;
- Review the range of disorders most commonly seen in your practice;
- Pick (visualize) a typical case for each one of these disorders and go through the procedures and decision-making process in a step-by-step manner;
- Pick (visualize) unusual and difficult cases; review the procedures and decision-making processes for these cases;
- Review the diagnostic criteria for the range of disorders most commonly seen in your practice; review information pertaining to differential diagnosis; review decision making process when a client’s symptoms differ from those that are expected;
- Review assessment tools that used for the range of disorders most commonly encountered; are there any other instruments that used in situations that are not straightforward? Are there EDI considerations associated with the use or interpretation of measures or of intervention approaches?
- Review possible treatment plans/interventions and alternatives that are related to various client profiles;
- Review the application of jurisprudence and ethical standards to the type of issues most frequently encountered in practice;

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- Think about limits of competence; which cases are suitable, and which need to be referred?
- And most importantly, think about the conceptual/theoretical framework upon which decision-making is based, both in assessment and treatment.

7. CONTROLLED ACTS

It is likely that during a person's period of Supervised Practice, and possibly while they are engaged in satisfying the requirements to become eligible for registration with the College, those who are preparing to become psychologists or psychological associates will be trained to perform Controlled Acts which are set out in section 27 (1) of the [Regulated Health Professions Act \(RHPA\)](#). The Act contains 14 Controlled Acts which, due to their potential to cause harm if performed improperly, may only be performed by those specifically authorized in legislation to do so.

Members of the College are permitted by legislation to perform the following three of the 14 Controlled Acts:

- *Communicating to the individual or his or her personal representative a diagnosis identifying a disease or disorder as the cause of symptoms of the individual in circumstances in which it is reasonably foreseeable that the individual or his or her personal representative will rely on the diagnosis.*
- *Treating, 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.*
- *Applying or ordering the application of a form of energy prescribed by the regulations under this Act. The Regulations permit members of the College to apply or order the application of one of the 10 forms of energy set out in the Regulations:*
 - *A member of the College of Psychologists of Ontario is exempt from subsection 27 (1) of the Act for the purpose of applying, or ordering the application of, electricity for aversive conditioning.*

Individuals who are in the course of fulfilling the requirements to become a member of the College may perform a Controlled Act under the supervision or direction of a member of the profession as long as the supervisor determines that they demonstrate the required knowledge, skills and competencies.

Those who are not yet members of the College or fulfilling the requirements for eligibility to register may not perform a controlled act themselves. For example, for the communication of a diagnosis, only the supervising member may perform the controlled act of communication of a diagnosis, either in person or through 'real time' communication such as by telephone, teleconferencing or videoconferencing.

In all cases, the supervising member must determine the process for the performance of the controlled acts taking into consideration the knowledge, skills and competence of the supervisee.

APPENDIX A
References

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PRIMARY SUPERVISOR'S WORK APPRAISAL FORM

Due Date: April 30, 2022

SUPERVISED MEMBER INFORMATION

Name of Supervised Member:

Pixel Panifer, Ph.D., C.Psych. (Supervised Practice)

Name of Supervisor:

August Avery, Ph.D., C.Psych.

This report is based on the period from:

February 1, 2022

to

April 30, 2022

(start date)

(end date)

SUPERVISED MEMBER HOURS

During the period covered by this report, the **total number of hours** worked by the supervised member under supervision of the primary supervisor were:

450 Hours

(Note: list the total number of hours worked in this reporting period. Do not list number of hours worked per week)

SUPERVISION INTERRUPTIONS

Explain if supervision of the supervised member was interrupted at any time during this reporting period (e.g. sick leave, vacation, etc.):

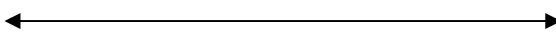
Vacation from March 21-25, 2022

**SUPERVISED MEMBERS AND SUPERVISORS SHOULD RETAIN A COPY
OF THIS REPORT FOR THEIR RECORDS**

Email the completed form to: workappraisals@cpo.on.ca

AREAS TO BE ADDRESSED

The supervisor and supervised member should jointly rate the extent to which each of these areas has been addressed by indicating whether, and how fully, the following topics were addressed during this particular reporting period. It is recognized that the focus of discussion within supervision meetings may vary each week; however, over the course of supervised practice, supervisors and supervised members are encouraged to ensure that all topics are covered. Use this rating tool to guide the progress of supervision and identify future supervision needs and goals.

Supervisor and supervised member have:	Not Addressed Fully Addressed 				
	1	2	3	4	5
Engaged in detailed feedback/discussion regarding assessment and reports	<input type="radio"/>	<input type="radio"/>	<input checked="checked" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Engaged in discussion of diagnostic issues	<input type="radio"/>	<input type="radio"/>	<input checked="checked" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Engaged in discussion of ethical and professional issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="checked" type="radio"/>	<input type="radio"/>
Engaged in discussion of jurisprudence in relation to practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="checked" type="radio"/>	<input type="radio"/>
Ensured that the supervised member has had exposure to a relevant range of client populations	<input type="radio"/>	<input type="radio"/>	<input checked="checked" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ensured that the supervised member has had exposure to a wide range of problems	<input type="radio"/>	<input type="radio"/>	<input checked="checked" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Engaged in discussion to identify supervised member's strengths and areas that need improvement	<input type="radio"/>	<input type="radio"/>	<input checked="checked" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Engaged in discussion of development/progress on Training Plan* (<i>*leave this specific rating blank if the supervised member is not undertaking a Training Plan</i>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>

DESCRIPTION OF RATING CATEGORIES IN PROFESSIONAL PERFORMANCE

The following is a description of the supervisor’s ratings to be used by the primary and alternate supervisors when completing the work appraisal form.

U: Unacceptable, remedial action required
 A rating of **U** during this reporting period means that the supervised member has never or has rarely demonstrated knowledge and skills in this area.

NOTE: If any professional dimensions have been rated U, or any significant liabilities are reported, indicate any corrective or remedial steps being taken by the supervised member, or recommended to the supervised member by the supervisor.

A: Acceptable level for supervised practice
 A rating of **A** during this reporting period means that the supervised member has demonstrated a beginning awareness of knowledge and skills in this area.

AR: Almost ready for autonomous (unsupervised) practice
 A rating of **AR** during this reporting period means that the supervised member regularly demonstrates knowledge and skills in this area.

R: Ready for autonomous practice
 A rating of **R** during this reporting period means that the supervised member consistently demonstrates knowledge and skills in this area and is competent at an entry level for autonomous (unsupervised practice) practice.*

**A supervised member must attain the “R” rating in all categories on the final work appraisal forms from their primary and alternate supervisors at the conclusion of their period of authorized supervised practice in order to be invited to attend an oral examination.*

RATING PROFESSIONAL PERFORMANCE

<i>Dimensions of the supervised members professional performance to be rated (see descriptions below)</i>	<i>Supervisor’s evaluation of the supervised members current level of functioning (see key above)</i>			
	U	A	AR	R
Overall awareness/knowledge of Ontario jurisprudence		✓		
Competence in declared area(s) of competence (see supervised member’s Declaration of Competence form)			✓	
Competence in formulating and communicating a diagnosis		✓		
Awareness of limits of competence		✓		
General maturity of professional attitude			✓	

DESCRIPTIONS OF DIMENSIONS OF PROFESSIONAL PERFORMANCE

To assist supervisors and supervised members in understanding what is meant by a rating of “R” or “Ready for autonomous practice”, which can also be conceptualized as “competent” or “entry level autonomous practice”, the following indicators of professional performance have been developed:

1. Overall awareness/knowledge of Ontario jurisprudence

To attain a rating of R in this area, the supervised member must consistently:

- Demonstrate a good knowledge of Ontario jurisprudence and apply this knowledge appropriately, seeking consultation when needed.

2. Competence in the declared area(s) of practice

To attain a rating of R in this area, the supervised member must consistently:

- Demonstrate a sufficient breadth of knowledge and skills to deal with the typical presenting conditions found within their declared area(s) of practice and client group(s) (without limiting themselves so narrowly that they can only offer services to clients with very few conditions).

3. Competence in formulating and communicating a diagnosis

(Except for supervised members whose sole area is Industrial/Organizational Psychology) In order to attain a rating of R in this area, the supervised member must consistently:

- Demonstrate the ability to combine psychological assessment data with clinical impressions, historical information, current life status and symptoms to generate diagnoses for groups of clients that the supervised member might be expected to encounter in the area(s) of practice they have declared. This includes ruling in and ruling out various diagnostic possibilities and identifying co-morbidity.
- Demonstrate the ability to sensitively communicate diagnostic information; including providing information about prognosis, treatment possibilities and answering common questions clients are likely to ask.

4. Awareness of limits of competence

In order to attain a rating of R in this area, the supervised member must consistently:

- Demonstrate an awareness of when the supervised member needs to consult with others with regard to client groups, client issues, or client complexity.
- Demonstrate sufficient knowledge to recognize disorders with which they do not work themselves, and sufficient knowledge about other resources to make an appropriate referral.

5. General maturity of professional attitude

In order to attain a rating of R in this area, the supervised member must consistently:

- Demonstrate positive coping strategies with personal and professional stressors and challenges.
- Maintain complete records of all patient contacts that include pertinent information. Notes are clear, concise, and timely.
- Demonstrate efficiency in accomplishing tasks without prompting or reminders.
- Demonstrate excellent time management skills regarding appointments, meetings, and leave.

RATING CORE COMPETENCIES FOR PROFESSIONAL PRACTICE

Core Competencies for Professional Practice (see descriptions below)	Supervisor's evaluation of supervised member's current level of functioning (see key on page 3)			
	U	A	AR	R
Interpersonal relationships			✓	
Ethics and standards			✓	
Assessment and evaluation		✓		
Intervention and consultation		✓		
Research (rate only if this is an activity declared by the supervised member in the Declaration of Competence)				

DEFINITIONS OF CORE COMPETENCIES FOR PROFESSIONAL PRACTICE

To assist supervisors and supervisees in understanding what is meant by a rating of “R” or “Ready for autonomous practice”, which can also be conceptualized as “competent” or “entry level autonomous practice”, the following indicators of competence have been developed:

1. Interpersonal relationships

In order to attain a rating of R in this area, the supervised member must:

- Consistently demonstrate effective communication skills by establishing and maintaining rapport with clients and colleagues;
- Consistently demonstrate the ability to establish and maintain trust and respect in the professional relationship;
- Consistently demonstrate professional and appropriate interactions with treatment teams, peers, and supervisors;
- Consistently demonstrate the ability to handle differences openly, tactfully, and effectively;
- Reliably identify potentially challenging clients and seek supervision/consultation;
- Demonstrate knowledge of self, such as motivation, personal resources, values, personal biases, and other factors that may influence the professional relationship (e.g. boundary issues);
- Acknowledge and respect differences that exist between self, clients, and colleagues in terms of race, ethnicity, culture and other individual difference variables.

2. Ethics and Standards

In order to attain a rating of R in this area, the supervised member must:

- Consistently demonstrate knowledge and skills in an ethical decision-making process;
- Identify potential ethical and legal issues and address them proactively;

- Actively seek consultation when treating complex cases and when working with individuals who present with unfamiliar symptoms;
- Demonstrate knowledge and skills in dealing with informed consent and confidentiality in a specific Situation (i.e. taking into account family members, third parties such as insurance companies and mandatory reporting obligations);
- Demonstrate knowledge and the ability to apply standards for psychological tests and measurements;
- Demonstrate an understanding of one's responsibilities to client, public, profession, and colleagues.

3. Assessment and Evaluation

In order to attain a rating of **R** in this area, the supervised member must consistently:

- Demonstrate proficiency administering commonly used tests in the supervised members declared area(s) of practice;
- Demonstrate ability to formulate a referral question;
- Demonstrate the ability to appropriately choose the tests to be administered to answer the referral question;
- Demonstrate the ability to develop a systematic assessment or evaluation plan which includes formal psychometric testing in areas of practice where this is standard;
- Demonstrate the ability to accurately interpret the results of psychological tests used and to integrate results;
- Make accurate diagnostic formulations for a variety of disorders;
- Demonstrate knowledge and skill in the formulation of diagnostic hypotheses and demonstrate making a diagnosis when appropriate;
- Write; a well-organized psychological report that answers the referral question clearly, integrates assessment information, provides a reasoned case formulation, and provides the referral sources with appropriate and specific recommendations;
- Demonstrate the ability to collect appropriate information during an intake interview to formulate and test hypotheses about what the client's problem may be.

4. Intervention and Consultation

In order to attain a rating of **R** in this area, the supervised member must consistently:

- Gather information about the nature and severity of client problems, analyze this information to formulate hypotheses about the factors that are contributing to these problems through qualitative and quantitative means, and select appropriate intervention methods;
- Develop a conceptual framework, and communicate this to the client;
- Produce good case conceptualization within own preferred theoretical orientation; and be able to also draw some insights into case from other orientations;
- Set realistic goals with clients;
- Conduct interventions that are well-timed, effective and consistent with empirically supported treatments.

5. Research

In order to attain a rating of **R** in this area, the supervised member must consistently:

- Demonstrate knowledge and skills in standards for conducting psychological research;
- Demonstrate the ability to effectively convey research results in writing.

GOALS OF SUPERVISION

Outline the main goals or objectives of supervision during this period:

(Use the Declaration of Competence and the various steps in the College’s registration process as a basis for defining the goals for the supervision period and developing a supervision/learning plan)

To set goals & objectives to ensure training in key dimensions of professional practice (e.g. cont'd development of Pixel's assessment skills, increasing Pixel's understanding & use of various assessment measures; ongoing discussion of differential dx, and intervention/consultation. Lastly, issues related to Pixel's preparations for taking the EPPP and JEE exams.

To what extent were these goals or objectives achieved?

The goals and objectives outlined above were well achieved during this reporting period.

Identify areas in which the supervised members growth is most evident:

Pixel's demonstrated growth in declared areas of practice, and in awareness of ethical knowledge, limits of competence, & general maturity & professional attitude. Pixel continues to gain experience in administering & interpreting a variety of measures, improving on developing formulations & making diagnoses & recommend interventions.

Supervised Member’s AREAS NEEDING FURTHER DEVELOPMENT

Areas (if any) in which the supervised member needs further development are:

Action being undertaken by supervised member in reference to the above (when required):

Identify future learning needs (if any):

TRAINING PLAN

Is the supervised member completing a Training Plan? Yes: No:

If **YES**, outline their progress here: (A separate evaluation of the Training Plan must be submitted to the Registration Committee when the plan has been completed).

The Registration Committee approved Pixel's proposal for a training plan in the subject of psychological intervention. I anticipate that Pixel's training plan will be completed by October 31, 2022.

REGISTRATION EXAMINATIONS

Supervised member has successfully completed the:

Jurisprudence and Ethics Examination (JEE):

Yes:

No:

Examination for Professional Practice in Psychology (EPPP):

Yes:

No:

Outline supervised member’s progress in preparing for the EPPP, JEE and/or Oral Examination:

Pixel's preparing to take the JEE in September 2022, & the EPPP in February 2023. Our weekly supervision meetings include a review of Pixel's progress in studying, and managing their time.

SUMMARY STATEMENT

Summarize in point form the supervised members supervised professional activities corresponding to this reporting period (for example, number and nature of psychotherapy cases, workshops attended by the supervised member, research activities, etc.).

22 cases involving psychological assessment of children and adolescents; recommended interventions at school and at home as well as referrals to agencies & other health care and academic professionals in the community where appropriate.

Cases involved issues pertaining to cognitive, academic, social-emotional adjustment, head injury, behaviour management, inattention, hyperactivity, self-esteem, depression, abuse & significant emphasis on differential diagnosis.

208 sessions involving consultation & remedial program planning & development with school administrators, teachers, parents, & other professionals. Cases involved issues pertaining to learning, ASD, ESL issues, cognitive issues, sensory issues, behavioural issues, reporting to CAS, and support for gifted students.

Pixel attended staff meetings dealing with professional issues, standards of practice, & issues in assessment and intervention. Pixel attended workshops and seminars related to administration of the ADOS

Supervisor Statement:	Supervised Member Statement:
I have shown the supervised member all my ratings and comments and discussed them with them:	My supervisor has shown me all of their ratings and comments and has discussed them fully with me.
Name (Please Print):	Name (Please Print):
August Avery, Ph.D., C.Psych.	Pixel Panifer, Ph.D., C.Psych. (Supervised Practice)
Signature:	Signature:
Date:	Date:
April 30, 2022	April 30, 2022

SUPERVISION LOG

For the period beginning:	February 1, 2022	And Ending:	April 30, 2022
Supervised Member:	Pixel Panifer, Ph.D., C.Psych. (Supervised Practice)	Name of Supervisor:	August Avery, Ph.D., C.Psych.

Supervisor Statement:	Supervised Member Statement:
I have reviewed all log entries with the supervised member:	I have reviewed all log entries with my supervisor:
Signature:	Signature:

Date:	Time Spent:	Nature of contact with supervisor (be specific):
Feb. 2, 2022	60 min	Reviewed active cases. Discussed supervision process & College requirements (record keeping), Reviewed supervised practice documents. EPPP exam, test taking strategies, and time management.
Feb. 10, 2022	60 min	Reviewed active cases. Discussed interpreting assessment info. variability in scores & implications for recommendations, incorporating social skills development into daily living activities for DD students. Discussed self-care during unprecedented times.
Feb 16, 2022	75 Min	Reviewed active cases. Discussed community resources for DD adolescents (especially in relation to sexuality issues). Reviewed plans for studying for EPPP and JEE. Discussed consulting with Children's Aid about a specific case. Discussed teletherapy options and considerations.
Feb 23, 2022	60 min	Reviewed active cases. Reviewed diagnostic criteria for LD, including LDAO definition. Discussed how to do a functional analysis of a problem behaviour, explanation given to parents about risk/benefits of an assessment, differential dx of ODD & CD, use of BASC and Connors rating scales.
Mar 3, 2022	70 Min	Reviewed active cases. Discussed ethical dilemma regarding dual relationships. Reviewed procedures for releasing information outside of school board. Discussed strategies for establishing/maintaining rapport w students w ASD, and in service and training for the ADOS.
Mar 9, 2022	60 min	Reviewed active cases. Discussed professional development activities, how to conduct a feedback meeting with parent & school staff re student w significant behavioural concerns.

SUPERVISION LOG CONTINUED

Date:	Time Spent:	Nature of contact with supervisor (be specific):
Mar 17, 2022	60 Min	Reviewed active cases. Discussed differential dx re high functioning ASD, communication disorders and Aspergers. Use of Social Communication checklist when assessing for autism. Discussed provision of services during school closure.
Mar 30, 2022	60 Min	Reviewed active cases. Discussed differential dx of Mild and Moderate DD; importance of adaptive checklists, classroom observation & parent and teacher anecdotal reports.
Apr 6, 2022	75 Min	Reviewed active cases. Discussed use of the WASI, behaviour logs and observation when assessing students with significant behaviour concerns. Initial learning session for Merrill-Palmer and Leiter-3.
Apr 13, 2022	60 Min	Reviewed active cases. Reviewed recommendation for remediation of working memory deficits, structuring attention, pro-social behaviours, concrete visual aids, hand-eye coordination and reading comprehension.
Apr 20, 2022	60 Min	Reviewed active cases. Discussed ethical dilemma around efficacious delivery of group intervention within school environment. Discussed professional challenges and environment within the school setting. Discussed dx of ADHD, ODD & other behavioural difficulties.
Apr 27, 2022	60 Min	Reviewed active cases. Discussed delivering assessment feedbacks over the phone and things to keep in mind. Consultation re: developmentally disabled student (informed consent), observations, assessment tools, meetings with teachers & parents).



BRIEFING NOTE

2022.03.03B

SEPTEMBER 2022 COUNCIL MEETING

APPROVAL, FOR CIRCULATION, OF DRAFT REGULATIONS REGARDING THE REGULATION OF BEHAVIOUR ANALYSTS

MOTION FOR CONSIDERATION

That the circulation document and the draft amended Regulations, updated to include the profession of Applied Behaviour Analysis, be approved for circulation to members and stakeholders for 60 days as required by the Health Professions Procedural Code being Schedule 2 of the [Regulated Health Professions Act, 1991](#). These include amendments to:

- O. Reg. 74/15 Registration
- O. Reg. 801/93 Professional Misconduct
- O. Reg. 209/94 General (Quality Assurance and Advertising)

Moved By TBD

PUBLIC INTEREST RATIONALE

To prepare for proclamation of the [Psychology and Applied Behaviour Analysis Act, 2021](#), the College must develop Regulations related to the regulation of Behaviour Analysts. To ensure that all draft proposals reflect the College's public interest mandate and to mitigate risk of harm to the public, the College engaged the profession of Applied Behaviour Analysis as well as members of the College and a public member of Council in the development of the draft Regulations.

BACKGROUND

The College of Psychologists of Ontario has been working towards welcoming Behaviour Analysts into what will be the new College of Psychologists and Behaviour Analysts of Ontario to be established under the yet to be proclaimed *Psychology and Applied Behaviour Analysis Act, 2021*. The Act creates the new health profession of Applied Behaviour Analysis (ABA) with its own distinct scope of practice.

In December 2020, the College struck the Applied Behaviour Analysis Working Group, which is made up of College Council members, Behaviour Analysts and ABA educators. Since December 2021, the group has met twice a month to develop the appropriate registration requirements for new Behaviour Analyst graduates entering practice for the first time, and for experienced Behaviour Analysts currently practicing in the province. The goal is to ensure that all registered Behaviour Analysts will have the necessary qualifications and competencies to deliver safe, effective, and quality care to the Ontario public. Out of these discussions, the draft amendments to the College's Registration Regulation have emerged. The Working Group has also reviewed the other existing College Regulations, including the General Regulation (Quality Assurance and Advertising), and Professional Misconduct Regulation noting required amendments to ensure the inclusion of Behaviour Analysts.

Consultation is an important and necessary part of the Regulation-making process. In developing the draft amendments, the College consulted with major stakeholders, most notably, the Ontario Association for Behaviour Analysis (ONTABA), the Ministry of Health, and the Ministry of Children, Community and Social Services.

Other College programs and policies, including quality assurance, client relations, and the professional standards of practice are being reviewed, and will be revised as needed, to incorporate the practice of ABA. Recognizing that ONTABA had already produced versions of some of these documents, the College has capitalized on this excellent work. In addition, the College By-laws, including *By-law 20: Elections to Council, Qualifications, Terms of Office and Conditions for Disqualification* and *By-law 21: Committee Composition* are being reviewed to incorporate the addition of members of the ABA profession.

Regulation development follows a formal process set out in section 95(1) (1.4) of the Health Professions Procedural Code being Schedule 2 of the *Regulated Health Professions Act, 1991*. This section of the Code requires the College to circulate proposed Regulations or Regulation amendments to its members, the public and stakeholders for a minimum of 60 days. At the conclusion of the circulation period, the College Council considers the feedback received, makes any changes deemed appropriate, and approves the final draft Regulations for submission to the government for its review, approval, and ultimate proclamation on a date of its choosing.

Council is being asked to approve the draft Regulation amendments, for circulation, for the required 60 days. As required by the Ministry of Health, the Council vote will be recorded with professional and public member votes noted separately.

The proposed documents to be circulated, including the draft Regulations and explanatory tables are attached.

BUDGETARY IMPLICATIONS

Circulation of the proposed Regulation amendments will be done electronically (i.e., posting on the College website, and other, relevant websites, e-mail blasts, etc.). Accordingly, the cost of circulation is negligible. The costs to the College are realized through meetings of the ABA Working Group to consider the feedback received and any legal costs that may be incurred but cannot be estimated at this time.

NEXT STEPS

Upon approval, the documents will be circulated for the required 60 days.

ATTACHMENTS

1. Circulation Documents, including Draft Regulations

CONTACT FOR QUESTIONS

Rick Morris, Ph.D., C.Psych.
Registrar & Executive Director

Paula Garshowitz, OD
ABA Regulation-Project Lead



CONSULTATION

PROPOSED REGULATIONS AMENDING THE REGISTRATION
REGULATION, PROFESSIONAL MISCONDUCT REGULATION AND
GENERAL REGULATION UNDER *THE PSYCHOLOGY ACT, 1991*

CIRCULATION DATE TBD

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DRAFT

BACKGROUND

The College of Psychologists of Ontario has been working towards welcoming Behaviour Analysts to what will become the new **College of Psychologists and Behaviour Analysts of Ontario** to be established under the yet to be proclaimed [Psychology and Applied Behaviour Analysis Act, 2021](#). The Act establishes the regulatory framework for the profession of Applied Behaviour Analysis (ABA) as a new regulated health profession in Ontario. It defines the distinct scope of practice of the profession, restricts the use of the title “Behaviour Analyst”, prohibits non-members from “holding out” as qualified to practice as Behaviour Analysts, and makes necessary changes to the composition of the College Council to include ABA professionals. In doing so, the legislation makes no changes related to the practice of psychology.

Scope of Practice of the Profession is defined in the *Psychology and Applied Behaviour Analysis Act, 2021* as: *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.*

WHO MUST REGISTER WITH THE COLLEGE?

The activities that form the scope of practice of Applied Behaviour Analysis are not Controlled Acts within the definition in the [Regulated Health Professions Act, 1991](#). Under the restrictions of the new Act however, only those registered with the College will be permitted to use the title ‘Behaviour Analyst’, a variation or abbreviation or an equivalent in another language or “hold themselves out as a person who is qualified to practise in Ontario as a Behaviour Analyst or in a specialty of Applied Behaviour Analysis”.

This would include referring to any earned certification they may have that would lead the public to believe that they are a qualified Behaviour Analyst registered with the College. Unauthorized use of the title or ‘holding out’ could be considered a violation of the *Psychology and Applied Behaviour Analysis Act, 2021*.

Once the legislation comes into force, only those who are registered with the College may use the title “Behaviour Analyst”.

The College recognizes that many professionals registered with other regulatory Colleges, including social workers, occupational therapists, speech language pathologists, educators, and nurses, may use behavioural techniques in their practice. These techniques, while also used by Behaviour Analysts, are within the public domain as they are not designated Controlled Acts and therefore, are not restricted. If, however, a professional wishes to identify as a “Behaviour Analyst”, they must register with the College of Psychologists and Behaviour Analysts of Ontario regardless of any other concurrent registrations they may hold.

HOW WERE THESE REGULATIONS DEVELOPED?

The College established an Applied Behaviour Analysis Working Group made up of College Council members, Behaviour Analysts and ABA educators. The Working Group met twice monthly over the past year to develop the tools necessary to regulate the profession and established appropriate registration requirements for Behaviour Analysts. The Working Group based its consideration on the principle that Applied Behaviour Analysis is a separate and distinct profession from Psychology and developed entry level requirements appropriate for the ABA profession recognizing these are different from entry-level

requirements for the profession of Psychology. The goal was to ensure that all registered Behaviour Analysts have the qualifications and competencies necessary to deliver safe, effective, and quality care to the Ontario public. Out of the Working Group's deliberations, a draft Registration Regulation was developed. The Working Group also prepared necessary amendments to other existing College Regulations, including the Professional Misconduct Regulation and the General Regulation (Quality Assurance and Advertising) to ensure the inclusion of Behaviour Analysts.

PURPOSE OF THE CONSULTATION

Regulation development follows a formal process set out in section 95(1) (1.4) of the Health Professions Procedural Code being Schedule 2 of the *Regulated Health Professions Act, 1991*. This section of the Code requires the College to circulate proposed Regulations to its members, the public and stakeholders for a minimum of 60 days. Prior to finalizing the proposed amendments for submission to the Ministry of Health, Council will carefully consider all comments, keeping in mind the College's mandate to protect the public interest.

At its September 23, 2022 meeting, the College Council approved, for circulation and comment, proposed Regulation amendments, which will enable the College to regulate the profession of Applied Behaviour Analysis. These include amendments to O.Reg. 74/15 Registration, which sets out registration requirements for applicants entering practice for the first time, as well as time-limited transitional (or grandparenting) provisions, to allow qualified practising Behaviour Analysts to apply for registration with the College. Amendments to O.Reg. 801/93 Professional Misconduct and O.Reg 209/94 General (Quality Assurance and Advertising) were also approved for circulation. The consultation is related solely to the regulation of the profession of Applied Behaviour Analysis.

YOUR FEEDBACK AND COMMENTS ARE IMPORTANT!

You are invited to review the summary of the proposed Regulation amendments found below, and provide your comments using this [survey link](#) or by e-mailing the College at **TBD**.

Please share this consultation information with your colleagues in the field of Applied Behaviour Analysis. The deadline for receipt of comments on the proposed Regulation amendments is **Friday, December 2, 2022**.

SUMMARY OF PROPOSED AMENDMENTS

A. REGISTRATION REGULATION

The following summary describes the proposed requirements to register as a Behaviour Analyst with the College. Flowcharts are attached which provide a visual representation of the three routes to registration.

Amendments will be made to the [current Registration Regulation](#) under the *Psychology Act, 1991*. In doing so, additional sections related to the profession of Applied Behaviour Analysis have been added and no changes have been made to registration provisions related to the profession of Psychology.

O.Reg 75/14 Registration showing the proposed amendments (**highlighted**) as well as a Table explaining the various sections, are attached.

1. Registration Requirements During the Transitional (Grandparenting) Period

A transitional period of 24 months following proclamation of the new *Act* will provide an opportunity for registration for qualified individuals who are currently practising the profession of Applied Behaviour Analysis.

Two Transitional Registration Routes (Flow Charts 1 and 2)

Route #1

An applicant must provide evidence that they are certified, with active status and in good standing, with the Behavior Analyst Certification Board (BACB) with either a BCBA or BCBA-D certification, prior to the date the Registration Regulation comes into force.

OR

Route #2

- i. An applicant must have engaged in practice in Canada within the statutory scope of practice of the profession of Applied Behaviour Analysis within the three years prior to the Registration Regulation coming into force and must have engaged in practice for at least 1500 hours prior to applying for registration, and
- ii. An applicant must provide satisfactory evidence of their competence to practice ABA. Evidence must be provided in the form and manner required by the College. In addition, individuals wishing to be registered through Route 2 must pass an examination of knowledge or competence approved by Council for that purpose.

All transitional applicants using Route #1 or #2 will be required to complete the Jurisprudence and Ethics Module and, in addition, provide the following to the College:

- Evidence of language fluency in English or French;
- Evidence of standing in any jurisdiction or other profession in which they are or were previously regulated;
- Evidence of good character, including criminal record check; and
- Payment of the appropriate fees.

2. Ongoing Registration Requirements (Flow Chart 3)

The following registration requirements will apply to:

- a) Individuals entering the profession for the first time or who do not qualify under either of the two transitional registration routes; and,
- b) Individuals applying for registration following the close of the 24-month transitional period.

An applicant must:

- i. Have obtained a post-graduate degree from a Canadian university and completed recognized coursework in behaviour analysis or have completed an accredited post-graduate program in behaviour analysis.

Applicants who have not successfully completed a program as described above, must satisfy the Registration Committee that their education and training is substantially similar to a described program and that the applicant is competent to practice ABA.

- ii. Successfully complete a minimum of 1500 hours of supervised practice in ABA while holding a certificate of registration with the College authorizing supervised practice and while under the supervision of a member of the College authorized to practice ABA.
- iii. Pass the examination of knowledge or competence approved by Council.

All applicants will be required to complete the Jurisprudence and Ethics Module and in addition, must also provide the following to the College:

- Evidence of language fluency in English or French;
- Evidence of standing in any jurisdiction or other profession in which they are, or were previously, regulated;
- Evidence of good character, including criminal record check; and
- Payment of the appropriate fees.

3. Behaviour Analysts Practising in Other Jurisdictions:

A Behaviour Analyst currently practising outside Ontario and who is:

- i. currently registered/licensed, in good standing, in a jurisdiction with registration requirements equivalent to those of Ontario; or
- ii. certified with active status and in good standing, with the Behavior Analyst Certification Board (BACB) with either a BCBA or BCBA-D type certification,

will not be required to complete supervised practice or pass the examination of knowledge or competence. These applicants will, however, be required to attend an interview with a panel of the Registration Committee, in addition to fulfilling all other registration requirements.

4. Two Certificates of Registration Permitted

Under the current Regulation, a member of the College is permitted to hold only one certificate of registration at a time. The proposed Regulation will permit members of the College, who meet the registration requirements, to hold two certificates of registration: one authorizing the practice of Psychology, and one authorizing the practice of Applied Behaviour Analysis.

B. PROFESSIONAL MISCONDUCT AND GENERAL REGULATIONS

Minor changes are being proposed to these two Regulations in order to ensure they encompass Behaviour Analysts and the profession of Applied Behaviour Analysis.

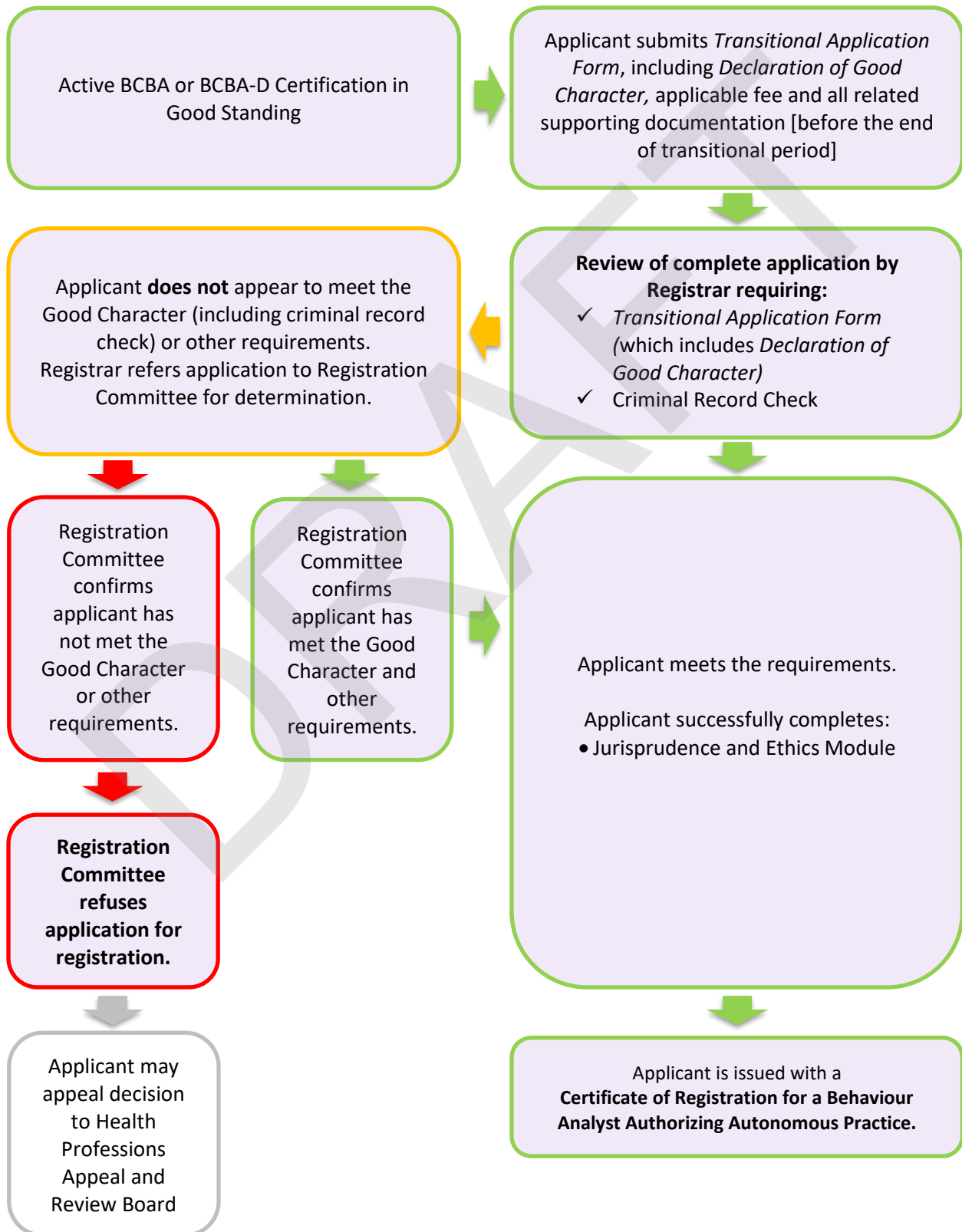
Professional Misconduct Regulation: The provisions of the Professional Misconduct Regulation will remain unchanged. The rules that currently apply to the practice of Psychology with respect to ethical, competent practice, will also apply to the practice of Applied Behaviour Analysis.

General Regulation: The General Regulation describes the details of the Quality Assurance program and the Advertising provisions. The College's Quality Assurance Program, as outlined in the Regulation, includes Continuing Professional Development and Self, Peer, and Practice Assessment components. A Quality Assurance Program is being developed for Behaviour Analysts that is based on the model currently in place for Psychologists and Psychological Associates. The program will consider distinct aspects of the practice of Applied Behaviour Analysis to ensure quality care is provided to clients. Advertising provisions that apply to the practice of Psychology will also apply to the practice of Applied Behaviour Analysis.

Proposed changes to these two documents are shown in "Track Changes" in the attached documents.

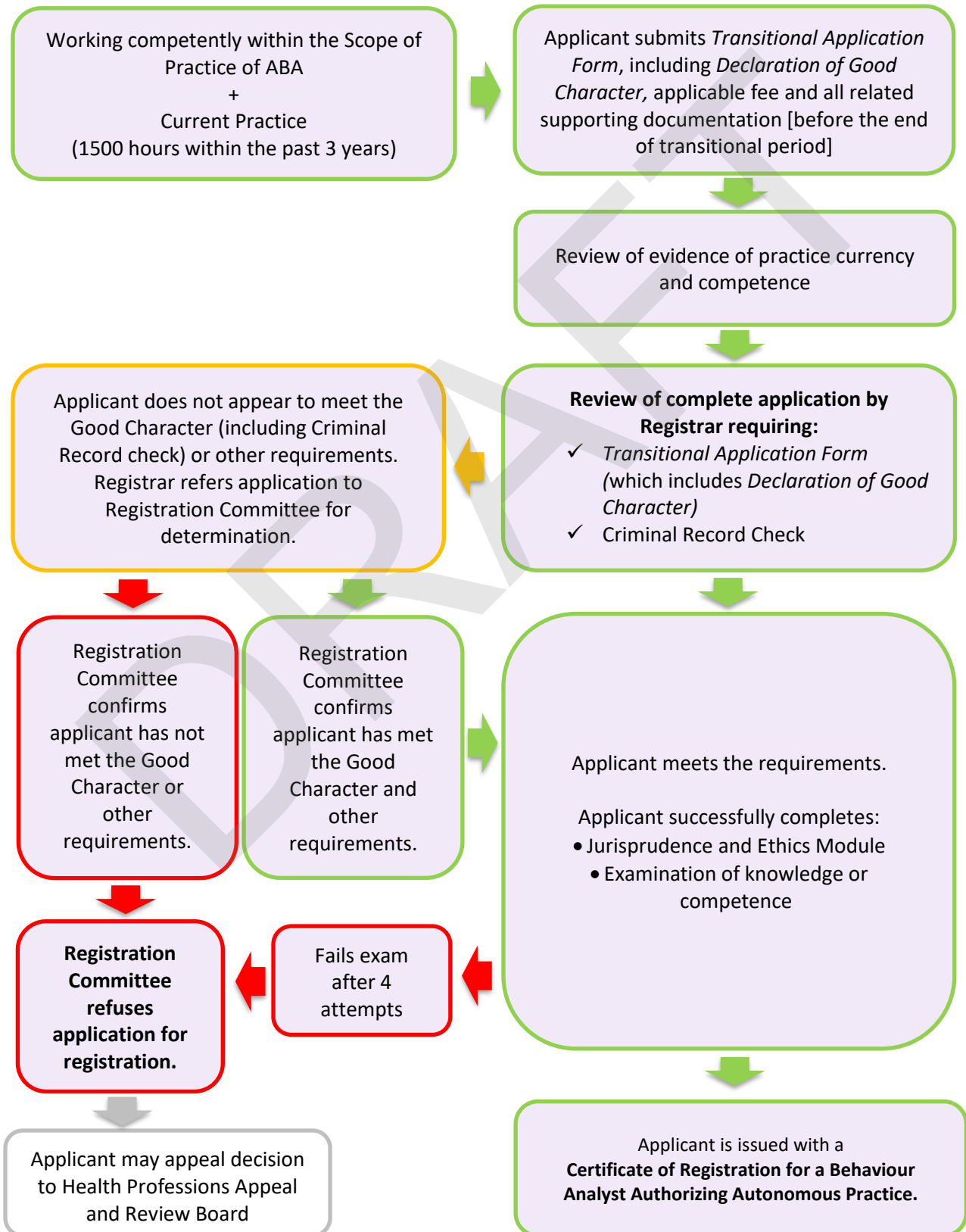


**ROUTE TO REGISTRATION: TRANSITIONAL ROUTE 1
(BCBA or BCBA-D Certified Behaviour Analyst)**



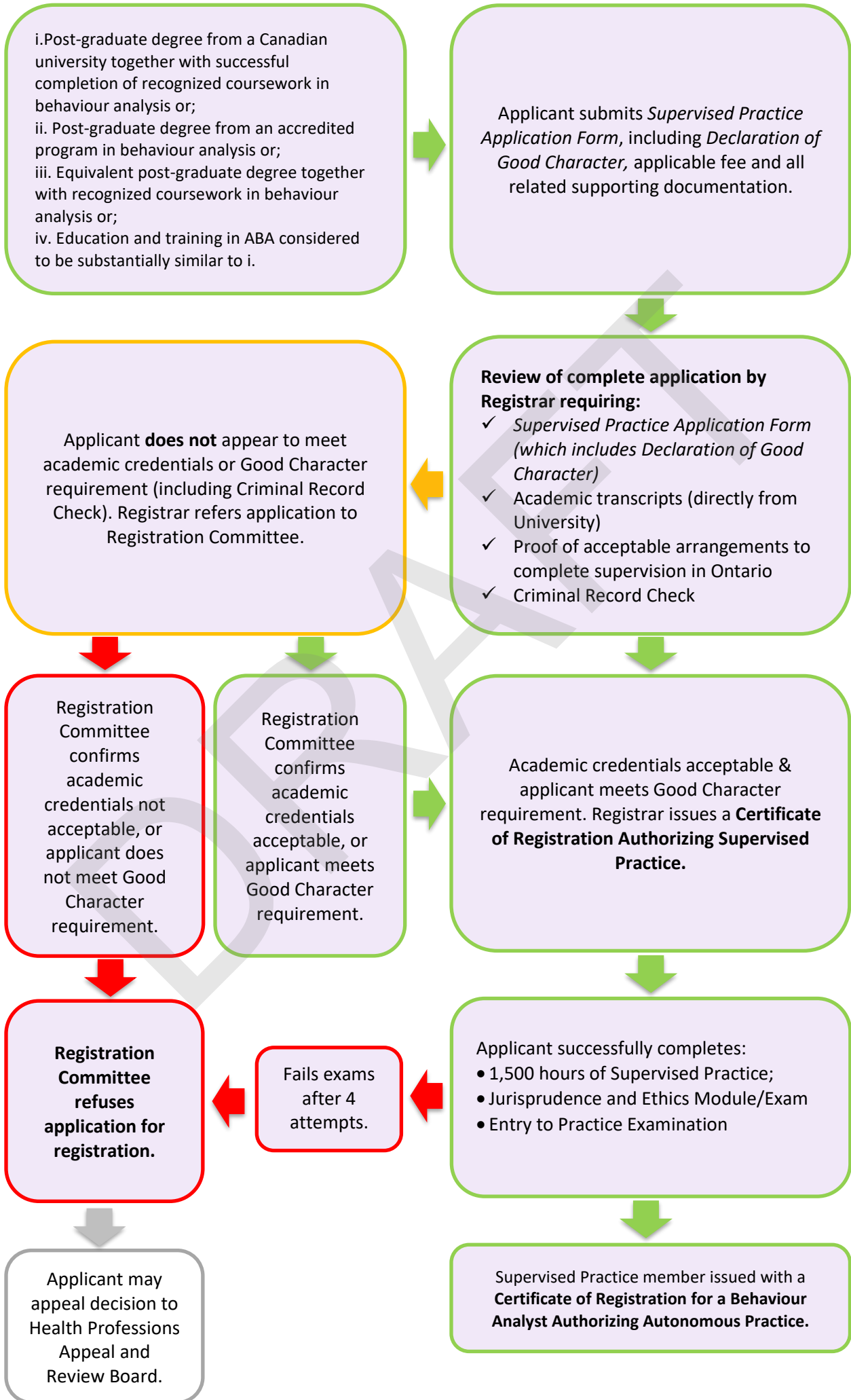


ROUTE TO REGISTRATION: TRANSITIONAL ROUTE 2 (Non-BCBA or BCBA-D Certified Behaviour Analysts)





ROUTE TO REGISTRATION: BEHAVIOUR ANALYSTS – ENTRY LEVEL



Psychology and Applied Behaviour Analysis Act, 2021

**PROPOSED AMENDMENTS TO CURRENT ONTARIO REGULATION 74/15
REGISTRATION**

UNDER THE *PSYCHOLOGY ACT, 1991*

RELATED TO THE REGULATION OF BEHAVIOUR ANALYSTS

PROPOSED NEW SECTIONS AND WORDING ARE HIGHLIGHTED

Consolidation Period: From June 10, 2019 to the [e-Laws currency date](#).

Last Amendment: 183/19.

Legislative History: 183/19.

This is the English version of a bilingual regulation.

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	GENERAL

Classes of certificate

1. The following are prescribed as classes of certificates of registration:
 1. Certificate of registration for a psychologist authorizing autonomous practice.
 2. Certificate of registration for a psychologist authorizing interim autonomous practice.
 3. Certificate of registration for a psychologist authorizing supervised practice.
 4. Certificate of registration for a psychological associate authorizing autonomous practice.
 5. Certificate of registration for a psychological associate authorizing interim autonomous practice.
 6. Certificate of registration for a psychological associate authorizing supervised practice.
 7. [Certificate of registration for a behaviour analyst authorizing autonomous practice](#)
 8. [Certificate of registration for a behaviour analyst authorizing supervised practice](#)
 9. Academic certificate of registration.
 10. Inactive certificate of registration.
 11. Retired certificate of registration.

Application

2. A person may apply for the issue of a certificate of registration by submitting an application to the Registrar together with the application fee required under the by-laws.

Requirements for issuance

3. The following are registration requirements for all certificates of registration:
 1. The applicant must provide details of any of the following that relate to the applicant:
 - i. A conviction for a criminal offence or an offence related to the regulation of the practice of the profession.
 - ii. A finding of professional misconduct, incompetency or incapacity, in Ontario in relation to another health profession or in another jurisdiction in relation to the profession or another health profession.
 - iii. A current proceeding for professional misconduct, incompetency or incapacity, in Ontario in relation to another health profession or in another jurisdiction in relation to the profession or another health profession.
 2. The applicant must be able with reasonable fluency to speak and write either English or French.
 3. The applicant must be a Canadian citizen or a permanent resident of Canada or authorized under the *Immigration and Refugee Protection Act* (Canada) to engage in the practice of the profession.

Terms, etc., of every certificate

4. It is a condition of a certificate of registration that the member provide the College with details of any of the following that relate to the member and that occur or arise after the registration of the member:

1. A conviction for any offence.
2. A finding of professional misconduct, incompetency or incapacity, in Ontario in relation to another health profession or in another jurisdiction in relation to the profession or another health profession.
3. A proceeding for professional misconduct, incompetency or incapacity, in Ontario in relation to another health profession or in another jurisdiction in relation to the profession or another health profession.
4. A finding of professional negligence or malpractice in any jurisdiction.
5. A proceeding in any jurisdiction in which the member is alleged to have committed professional negligence or malpractice that is in relation to the practice of a health profession.

SECTIONS 5-26 RELATING TO THE PROFESSION OF PSYCHOLOGY REMAIN UNCHANGED

NEW SECTIONS 27-34

CERTIFICATE OF REGISTRATION FOR A BEHAVIOUR ANALYST AUTHORIZING AUTONOMOUS PRACTICE

27. (1) Subject to subsections (2) to (5), to qualify for a certificate of registration for a behaviour analyst authorizing autonomous practice, an applicant must comply with the following non-exemptible registration requirements:

1. The applicant must have obtained:
 - i. a post-graduate degree from a Canadian institution that is legally authorized to grant the degree and have successfully completed coursework in behaviour analysis recognized by a body approved by Council for that purpose, or
 - ii. a post-graduate degree that is considered by a panel of the Registration Committee to be equivalent to a degree described in subparagraph i., and have successfully completed coursework in behaviour analysis recognized by a body approved by Council for that purpose, or
 - iii. a post-graduate degree from a program in behaviour analysis accredited by a body, and at an accreditation level, approved by Council for that purpose; or
 - iv. Education and training in behaviour analysis outside of Canada that is considered by a panel of the Registration Committee to be substantially similar to the requirements described in subparagraph i.
2. The applicant must have completed a minimum of 1,500 hours of post-graduate supervised practice in applied behaviour analysis approved by the Registrar or a panel of the Registration Committee and performed while being a member holding a certificate of registration for a behaviour analyst authorizing supervised practice and while under the supervision of a member who meets the requirements in subsection 31. (3).
3. The applicant must have passed the examination of knowledge or competence set or approved by the Council or by a body that is approved by the Council for that purpose.
4. The applicant must have demonstrated successful completion of an assessment of Jurisprudence and Ethics knowledge in a manner or form approved by Council.
5. The applicant must have completed all further professional training or experience that, in the opinion of a panel of the Registration Committee, is required to ensure the competence of the applicant for autonomous practice as a behaviour analyst.

(2) An applicant who has obtained a degree from a program described in subparagraph 1 iv of subsection (1) shall not be considered to have met the requirements of paragraph 1 of subsection (1) unless the applicant has successfully completed such further assessment, training or supervised experience, if any, which in the opinion of a panel of the Registration Committee is required to ensure that the applicant has competencies equivalent to those of an applicant who has obtained a post-graduate degree and completed required coursework in behaviour analysis as described in subparagraph 1 i of subsection (1).

(3) An applicant who, at the time of application, is registered, licensed, or certified to practise applied behaviour analysis outside of Ontario, and where the applicant who made the application has been practising as a behaviour analyst at any point during the 24 months prior to submitting their application, is not required to meet the requirements in paragraphs 1, 2, 3 and 5 of subsection (1) if the following requirements are met:

1. i. The applicant must be registered as a behaviour analyst in good standing in a jurisdiction that is considered by a panel of the Registration Committee to have registration requirements equivalent to those of the College for the issuance of a certificate of registration for a behaviour analyst authorizing autonomous practice; or
 - ii. The applicant must be certified by a body that is approved by Council for that purpose with a certification type and status approved by Council and is in good standing with that body as of the date of the application.
2. i. It is a non-exemptible registration requirement that an applicant referred to in subsection (3) 1.i. provide one or more certificates, letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a behaviour analyst in every jurisdiction where the applicant holds an out-of-province certificate; or
 - ii. It is a non-exemptible registration requirement that an applicant referred to in subsection (3) 1.ii. provide one or more certificates, letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a behaviour analyst with the certification body approved by Council for that purpose.
3. The applicant must have attended an interview conducted by a panel of interviewers appointed by the Registrar and been assessed by that panel as being competent to practise the profession.
4. Where the applicant is unable to satisfy the Registrar or a panel of the Registration Committee that the applicant practised the profession of applied behaviour analysis to the extent that would be permitted by a certificate of registration for a behaviour analyst authorizing autonomous practice at any time during the 24-month period preceding their application, the applicant must meet any further requirement to undertake, obtain or undergo any additional training, experience, examinations or assessments that, in the opinion of a panel of the Registration Committee, is required to ensure the competence of the applicant for autonomous practice as a behaviour analyst.

(4) Where an applicant is a member in good standing holding an Academic certificate of registration, the Registrar shall issue that member a certificate of registration for a behaviour analyst authorizing autonomous practice if the member,

- (a) was, at the time of being issued their Academic certificate of registration, a member holding a certificate of registration for a behaviour analyst authorizing autonomous practice;
- (b) applies in writing to the Registrar for a certificate of registration for a behaviour analyst authorizing autonomous practice not less than 60 days before the applicant proposes to start practising as a member holding a certificate of registration for a behaviour analyst authorizing autonomous practice; and
- (c) has satisfied the conditions, if any, imposed by a panel of the Registration Committee which in the opinion of the panel are required to ensure current competence in the practice of applied behaviour analysis.

(5) Where an applicant is a member in good standing holding an Inactive certificate of registration, the Registrar shall issue that member a certificate of registration for a behaviour analyst authorizing autonomous practice if the member,

- (a) was, at the time of being issued their Inactive certificate of registration, a member holding a certificate of registration for a behaviour analyst authorizing autonomous practice;
- (b) applies in writing to the Registrar for a certificate of registration for a behaviour analyst authorizing autonomous practice not less than 60 days before the applicant proposes to start practising as a member holding a certificate of registration for a behaviour analyst authorizing autonomous practice; and
- (c) has satisfied the conditions, if any, imposed by a panel of the Registration Committee which in the opinion of the panel are required to ensure current competence in the practice of applied behaviour analysis.

(6) Where an applicant is a member in good standing holding a Retired certificate of registration, the Registrar shall issue that member a certificate of registration for a behaviour analyst authorizing autonomous practice if the member,

- (a) was, at the time of being issued their Retired certificate of registration, a member holding a certificate of registration for a behaviour analyst authorizing autonomous practice;
- (b) applies in writing to the Registrar for a certificate of registration for a behaviour analyst authorizing autonomous practice no more than 24 months after the member was issued a Retired certificate of registration and not less

than 60 days before the applicant proposes to start practising as a member holding a certificate of registration for a behaviour analyst authorizing autonomous practice; and

- (c) has satisfied the conditions, if any, imposed by a panel of the Registration Committee which in the opinion of the panel are required to ensure current competence in the practice of applied behaviour analysis

Labour mobility

28. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a certificate of registration for a behaviour analyst authorizing autonomous practice, the applicant is deemed to have met the requirements set out in paragraphs 1, 2, 3, and 5 of subsection 27 (1) of this Regulation.

(2) It is a non-exemptible registration requirement that an applicant referred to in subsection (1) provide one or more certificates or letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a behaviour analyst in every jurisdiction where the applicant holds an out-of-province certificate.

(3) If an applicant to whom subsection (1) applies is unable to satisfy the Registrar or a panel of the Registration Committee that the applicant practised the profession of applied behaviour analysis to the extent that would be permitted by a certificate of registration for a behaviour analyst authorizing autonomous practice at any time in the two years immediately before the date of the applicant's application, the applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments that may be specified by a panel of the Registration Committee.

(4) An applicant referred to in subsection (1) is deemed to have met the requirement of paragraph 2 of section 3 if the requirements for the issuance of the out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph.

(5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code.

Terms, conditions and limitations

29. It is a term, condition and limitation of every certificate of registration for a behaviour analyst authorizing autonomous practice that the member shall practise the profession only within the areas of applied behaviour analysis in which the member has knowledge, skill and judgement.

Transitional

30. The following apply for the first 24 months after the day this Regulation comes into force,

(1) Paragraphs 1, 2, and 3 of subsection 27 (1) do not apply in respect of an application for a certificate of registration for a behaviour analyst authorizing autonomous practice where the applicant was certified by a body that is approved by Council for that purpose with a certification type and status approved by Council by the date this Regulation comes into force and is in good standing with that body, or

(2) Paragraphs 1 and 2 of subsection 27 (1) do not apply in respect of an application for certificate of registration for a behaviour analyst authorizing autonomous practice where the applicant who made the application had been practising as a behaviour analyst at any point within or during the three (3) years prior to this Regulation coming into force and meets the following additional non-exemptible requirements:

1. The applicant must have engaged in practice in Canada within the scope of practice of applied behaviour analysis for at least 1500 hours during the three-year period that immediately preceded the date that the applicant submitted their application; and
2. The applicant must provide evidence satisfactory to the Registrar or the Registration Committee of competence to practise as a behaviour analyst.

CERTIFICATES OF REGISTRATION FOR A BEHAVIOUR ANALYST AUTHORIZING SUPERVISED PRACTICE

31. (1) To qualify for a certificate of registration for a behaviour analyst authorizing supervised practice, an applicant must comply with the following non-exemptible registration requirements:

1. The applicant meets the requirements set out in subsection 27 (1) 1.
2. The applicant must provide to the College a signed undertaking from a supervisor in which the supervisor undertakes to train the proposed member and supervise and evaluate the proposed member's practice and to provide reports in the form and manner as specified by the Registrar or a panel of the Registration Committee.

(2) An applicant who has obtained a degree from a program described in subparagraph 1 iv of subsection 27. (1) shall not be considered to have met the requirements of paragraph 1 of subsection (1) unless the applicant has successfully completed such further assessment, training or supervised experience, if any, which in the opinion of a panel of the Registration Committee is required to ensure that the applicant has competencies equivalent to those of an applicant who has obtained a degree from a program described in subparagraph 1 i of subsection 27. (1).

(3) A signed undertaking shall not be considered as satisfying the requirement in paragraph 2 of subsection (1) unless the proposed supervisor who signed the undertaking met all of the following requirements:

1. They must be a member holding either a certificate of registration for a behaviour analyst authorizing autonomous practice or for the first 24 months after this Regulation comes into force, provides evidence, satisfactory to the Registration Committee that they meet the requirements for a certificate of registration authorizing autonomous practice.
2. Their certificate of registration must not be subject to any term, condition or limitation that was imposed as a result of a disciplinary proceeding or a fitness to practise proceeding.
3. They must not be the subject of any ongoing disciplinary proceeding or fitness to practise proceeding.

Labour mobility

32. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a certificate of registration for a behaviour analyst authorizing supervised practice, the applicant is deemed to have met the requirements set out in paragraph 1 of subsection 31 (1) of this Regulation.

(2) It is a non-exemptible registration requirement that an applicant referred to in subsection (1) provide one or more certificates or letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a behaviour analyst in every jurisdiction where the applicant holds an out-of-province certificate.

(3) If an applicant to whom subsection (1) applies is unable to satisfy the Registrar or a panel of the Registration Committee that the applicant practised the profession of applied behaviour analysis to the extent that would be permitted by a certificate of registration for a behaviour analyst authorizing supervised practice at any time in the two years immediately before the date of the applicant's application, the applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments that may be specified by a panel of the Registration Committee.

(4) An applicant referred to in subsection (1) is deemed to have met the requirement of paragraph 2 of section 3 if the requirements for the issuance of the out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph.

(5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code.

Terms, conditions and limitations

33. It is a term, condition and limitation of every certificate of registration for a behaviour analyst authorizing supervised practice that the member shall practise the profession only under the supervision of a supervisor who is approved for that purpose by the Registrar or a panel of the Registration Committee.

Expiry

34. A certificate of registration for a behaviour analyst authorizing supervised practice expires on the date set out on the certificate, which date shall be no earlier than 12 months after the date the certificate of registration was issued and no more than 24 months after the date the certificate of registration was issued.

RENUMBERED SECTIONS 35-44

(CURRENT SECTIONS 27-36)

Addition of Terminology to Include Applied Behaviour Analysis/Behaviour Analysts (highlighted)

ACADEMIC CLASS OF CERTIFICATES OF REGISTRATION

Academic class of certificates of registration

35. To qualify for an Academic certificate of registration, an applicant must comply with the following non-exemptible registration requirements:

1. The applicant must occupy a full-time or regular academic position on the faculty of an Ontario university.

2. The applicant must be a member in good standing who holds a certificate of registration for a psychologist authorizing autonomous practice or a certificate of registration for a psychological associate authorizing autonomous practice or a certificate of registration for a behaviour analyst authorizing autonomous practice and,
 - i. whose certificate of registration is not subject to any term, condition or limitation that was imposed as a result of a disciplinary proceeding or a fitness to practise proceeding,
 - ii. who is not in default of any obligation to the College, including payment of the annual membership fee, and
 - iii. who is not the subject of any ongoing disciplinary or fitness to practise proceeding.

Labour mobility

36. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for an Academic certificate of registration, the applicant is deemed to have met the requirements set out in paragraph 2 of section 27 of this Regulation.

(2) It is a non-exemptible registration requirement that an applicant referred to in subsection (1) provide one or more certificates or letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a psychologist or behaviour analyst in every jurisdiction where the applicant holds an out-of-province certificate.

(3) If an applicant to whom subsection (1) applies is unable to satisfy the Registrar or a panel of the Registration Committee that the applicant practised the profession of psychology or applied behaviour analysis to the extent that would be permitted by an Academic certificate of registration at any time in the two years immediately before the date of the applicant's application, the applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments that may be specified by a panel of the Registration Committee.

(4) An applicant referred to in subsection (1) is deemed to have met the requirement of paragraph 2 of section 3 if the requirements for the issuance of the out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph.

(5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code.

Terms, conditions and limitations

37. It is a term, condition and limitation of every Academic certificate of registration that the member not provide intervention, assessment or consultation services, or, in the case of a behaviour analyst, applied behaviour analysis services, to individual clients, groups of clients, or organizations and not supervise persons in providing those services.

INACTIVE CLASS OF CERTIFICATES OF REGISTRATION

Inactive class of certificates of registration

38. To qualify for an Inactive certificate of registration, an applicant must comply with the following non-exemptible registration requirements:

1. The applicant must submit his or her application to the Registrar not less than 60 days before the applicant intends to cease practising the profession.
2. The applicant must be a member in good standing who holds a certificate of registration for a psychologist authorizing autonomous practice or a certificate of registration for a psychological associate authorizing autonomous practice or a certificate of registration for a behaviour analyst authorizing autonomous practice and,
 - i. whose certificate of registration is not subject to any term, condition or limitation that was imposed as a result of a disciplinary proceeding or a fitness to practise proceeding,
 - ii. who is not in default of any obligation to the College, including payment of the annual membership fee, and
 - iii. who is not the subject of any ongoing disciplinary or fitness to practise proceeding.

Terms, conditions and limitations

39. It is a term, condition and limitation of every Inactive certificate of registration that the member shall not practise the profession.

RETIRED CLASS OF CERTIFICATES OF REGISTRATION

Retired class of certificates of registration

40. To qualify for a Retired certificate of registration, an applicant must comply with the following non-exemptible registration requirements:

1. The applicant must submit his or her application to the Registrar not less than 60 days before the applicant intends to cease practising the profession.
2. The applicant must be a member in good standing who holds a certificate of registration for a psychologist authorizing autonomous practice or a certificate of registration for a psychological associate authorizing autonomous practice or a certificate of registration for a behaviour analyst authorizing autonomous practice and,
 - i. whose certificate of registration is not subject to any term, condition or limitation that was imposed as a result of a disciplinary proceeding or a fitness to practise proceeding,
 - ii. who is not in default of any obligation to the College, including payment of the annual membership fee, and
 - iii. who is not the subject of any ongoing disciplinary or fitness to practise proceeding.

Terms, conditions and limitations

41. It is a term, condition and limitation of every Retired certificate of registration that the member shall not practise the profession.

Expiry on issuance of new certificate

42 A person's certificate of registration expires immediately if the Registrar issues another certificate of registration to the person.

42.1 Despite section 42., a person may hold a certificate of registration in each of the professions regulated by the College if they meet the registration requirements to practice as a psychologist or psychological associate and meet the registration requirements to practice as a behaviour analyst.

Reinstatement

43. If the Registrar suspends a member's certificate of registration pursuant to section 24 of the Health Professions Procedural Code for failure to pay a fee, the Registrar may lift the suspension within two years from the date of suspension on the payment of,

- (a) the fee the member failed to pay; and
- (b) all applicable fees and penalties required under the by-laws.

TRANSITION

Transition

44. (1) Every certificate of registration that was in existence immediately before April 7, 2015 is continued as the equivalent certificate of registration with the same status under this Regulation until such time as it otherwise ceases to be effective and, for greater certainty,

- (a) every certificate of registration subject to a limitation of academic status is continued as an Academic certificate of registration;
- (b) every certificate of registration subject to a limitation of inactive status is continued as an Inactive certificate of registration; and
- (c) every certificate of registration subject to a limitation of retired status is continued as a Retired certificate of registration.

(2) Where an application for a certificate of registration had been made but not finally dealt with before April 7, 2015, the application shall be dealt with in accordance with this Regulation.

45. OMITTED (REVOKES OTHER REGULATIONS).

46. OMITTED (PROVIDES FOR COMING INTO FORCE OF PROVISIONS OF THIS REGULATION).

Psychology and Applied Behaviour Analysis Act, 2021

PROPOSED AMENDMENTS TO [ONTARIO REGULATION 74/15 REGISTRATION](#)

UNDER THE *PSYCHOLOGY ACT, 1991*

RELATED TO THE REGULATION OF BEHAVIOUR ANALYSTS

1. Section 2. Application, Section 3. Requirements of issuance and Section 4. Terms, etc., of every certificate, will all remain unchanged and relate to all applicants to the College
2. New sections 27-34 have been added to O. Reg. 74/15 to create two new Certificates of Registration for Behaviour Analysts.
 - i. Sections 27-30: Certificate of Registration for a Behaviour Analyst Authorizing Autonomous Practice
 - ii. Sections 31-34: Certificate of Registration for a Behaviour Analyst Authorizing Supervised Practice
3. Renumbered sections 35-44 (currently sections 27-36) to include terminology related to Applied Behaviour Analysis/Behaviour Analysts

Section/ Subsection	Proposed Regulation	Interpretation/Application
	Certificate of Registration for a Behaviour Analyst Authorizing Autonomous Practice	
27. (1)	Subject to subsections (2) to (5), to qualify for a certificate of registration for a behaviour analyst authorizing autonomous practice, an applicant must comply with the following non-exemptible registration requirements:	Non-exemptible registration requirements for Behaviour Analysts are described in Section 27. (1).
27. (1) 1.	The applicant must have obtained: i. a post-graduate degree from a Canadian institution that is legally authorized to grant the degree and have successfully completed coursework in behaviour analysis recognized by a body approved by Council for that purpose, or	i. ABA training currently available in Canada is at the post-graduate (master’s or PhD. Level) where the degree is combined with a sequence of courses in behaviour analysis (Verified Course Sequence or VCS) directly related to the practice of ABA. The course sequence is verified by the Association for Behavior Analysis International (ABAI) and is the recognized training for behaviour analysts in North America. In Ontario, ABA training is available at Brock University through the Faculty of Social Sciences and at Western University through the Faculty of Education. Training is also available in Manitoba and British Columbia.

	<p>ii. a post-graduate degree that is considered by a panel of the Registration Committee to be equivalent to a degree described in subparagraph i., and have successfully completed coursework in behaviour analysis recognized by a body approved by Council for that purpose, or</p> <p>iii. a post-graduate degree from a program in behaviour analysis accredited by a body, and at an accreditation level, approved by Council for that purpose; or</p> <p>iv. Education and training in behaviour analysis outside of Canada that is considered by a panel of the Registration Committee to be substantially similar to the requirements described in subparagraph i.</p>	<p>ii. A post-graduate degree obtained from an academic institution, other than a Canadian university, that is deemed to be equivalent to a Canadian degree and completion of a VCS in behaviour analysis. Equivalence of the degree would be determined by a third-party credential authentication and assessment.</p> <p>iii. Post-graduate programs in behaviour analysis, that are accredited by ABAI are currently only available in the US and Norway.</p> <p>iv. Where an applicant does not have formal training in ABA, as described in i., ii. or iii., their education and training would be assessed for substantial similarity to the requirements in i. Third party credential authentication and assessment would be used to assist the Registration Committee in making this determination.</p>
<p>27. (1) 2.</p>	<p>The applicant must have completed a minimum of 1,500 hours of post-graduate supervised practice in applied behaviour analysis approved by the Registrar or a panel of the Registration Committee and performed while being a member holding a certificate of registration for a behaviour analyst authorizing supervised practice and while under the supervision of a member who meets the requirements in subsection 31. (3).</p>	<p>1500 hours of supervised practice must be completed while under the jurisdiction of the College while holding a Certificate of Registration for a Behaviour Analyst Authorizing Supervised Practice. The equivalent of one year of full-time supervised practice is generally accepted to confirm readiness of a behaviour analyst to practise autonomously and mirrors the supervised practice hours required by other professions, including psychology. It is also similar to supervised fieldwork hours required by the Behavior Analyst Certification Board (BACB) to earn certification.</p> <p>Training in applied behaviour analysis may include a practicum or supervised fieldwork hours, however these hours are separate and would not be counted towards hours required to meet the registration requirements of the College.</p>
<p>27. (1) 3.</p>	<p>The applicant must have passed the examination of knowledge or competence set or approved by the Council or by a body that is approved by the Council for that purpose.</p>	<p>The College is developing an Ontario examination of knowledge or competence. This exam is expected to be available online with remote proctoring.</p>

		While an oral exam has been part of the registration process in Ontario and in several jurisdictions for many years for psychology, it is not regarded as necessary for the registration of Behaviour Analysts. The ABA profession will have no authorized controlled acts, nor will areas of practice or client populations be declared by Behaviour Analysts; which are two reasons for an oral examination being required for registration for the profession of Psychology.
27. (1) 4.	The applicant must have demonstrated successful completion of an assessment of Jurisprudence and Ethics knowledge in a manner or form approved by Council.	Applicants will be required to complete an online jurisprudence and ethics education course that also assesses their understanding of ethical issues and applicable jurisprudence and how these principles are applied in practice. The course, which will include an assessment component, ensures applicants possess knowledge of current jurisprudence and ethical principles, and may be completed by applicants, at their own pace. This online module ensures mastery of jurisprudence and ethical principles and is the norm for many professions, including Applied Behaviour Analysis. This contrasts with the high-stakes jurisprudence and ethics examination currently required by the College for the profession of Psychology.
27. (1) 5.	The applicant must have completed all further professional training or experience that, in the opinion of a panel of the Registration Committee, is required to ensure the competence of the applicant for autonomous practice as a behaviour analyst.	Provision is the same as the current subsection 5. (1) 6. This provides flexibility to the Registration Committee where it believes additional training or experience is necessary to ensure an applicant's competence.
27. (2)	An applicant who has obtained a degree from a program described in subparagraph 1 iv of subsection (1) shall not be considered to have met the requirements of paragraph 1 of subsection (1) unless the applicant has successfully completed such further assessment, training or supervised experience, if any, which in the opinion of a panel of the Registration Committee is required to ensure that the applicant has competencies equivalent to those of an applicant who has obtained a post-graduate degree and completed required coursework in applied behaviour analysis as described in subparagraph 1 i of subsection (1).	Provision is the same as the current subsection 5. (2) and provides the Registration Committee with the authority to require further assessment, training, or supervised experience to ensure the applicant has competencies equal to a graduate of a Canadian program. This provision would relate to internationally trained behaviour analysts who apply for registration under subsection 27. (1) 1. iv.
27. (3)	An applicant who, at the time of application, is registered, licensed, or certified to practise applied behaviour analysis outside of Ontario, and where the applicant who made the application has been practising as a behaviour analyst at any point during the 24 months prior to submitting	This provision provides an exemption, for applicants who qualify, from meeting the education, supervised practice, and entry to practice examination requirements for registration. These applicants must be behaviour analysts practising outside Ontario, who are currently

<p>their application, is not required to meet the requirements in paragraphs 1, 2, 3 and 5 of subsection (1) if the following requirements are met:</p> <ol style="list-style-type: none"> 1. i. The applicant must be registered as a behaviour analyst in good standing in a jurisdiction that is considered by a panel of the Registration Committee to have registration requirements equivalent to those of the College for the issuance of a certificate of registration for a behaviour analyst authorizing autonomous practice, or ii. The applicant must be certified by a body that is approved by Council for that purpose with a certification type and status approved by Council and is in good standing with that body as of the date of the application. 2. i. It is a non-exemptible registration requirement that an applicant referred to in subsection (3) 1. i. provide one or more certificates, letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a behaviour analyst in every jurisdiction where the applicant holds an out-of-province certificate, or ii. It is a non-exemptible registration requirement that an applicant referred to in subsection (3) 1.ii. provide one or more certificates, letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a behaviour analyst with the certification body approved by Council for that purpose. 3. The applicant must have attended an interview conducted by a panel of interviewers appointed by the Registrar and been assessed by that panel as being competent to practise the profession. 4. Where the applicant is unable to satisfy the Registrar or a panel of the Registration Committee that the applicant practised the profession of applied behaviour analysis to the extent that would be permitted by a certificate of registration for a behaviour analyst authorizing autonomous practice at any time during the 24-month period preceding their application, the applicant must meet any further requirement to undertake, obtain or undergo any additional training, experience, examinations or assessments that, in the opinion of a panel of the Registration Committee, is required to ensure the competence of the applicant for autonomous practice as a behaviour analyst. 	<p>registered or licensed in good standing in a jurisdiction considered to have equivalent registration requirements, or who are certified in good standing with BCBA or BCBA-D type certification with active status.</p> <p>In addition to providing evidence of good standing, applicants using this registration route must attend an interview conducted by a panel of interviewers appointed by the Registrar to assess competence to practice. As with labour mobility provisions under subsection 28., the Registration Committee can require additional training, experience, examinations, or assessments that are required to ensure competence of the applicant for autonomous practice as a behaviour analyst.</p>
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<p>27. (4)</p>	<p>Where an applicant is a member in good standing holding an Academic certificate of registration, the Registrar shall issue that member a certificate of registration for a behaviour analyst authorizing autonomous practice if the member,</p> <ul style="list-style-type: none"> (a) was, at the time of being issued their Academic certificate of registration, a member holding a certificate of registration for a behaviour analyst authorizing autonomous practice; (b) applies in writing to the Registrar for a certificate of registration for a behaviour analyst authorizing autonomous practice not less than 60 days before the applicant proposes to start practising as a member holding a certificate of registration for a behaviour analyst authorizing autonomous practice; and (c) has satisfied the conditions, if any, imposed by a panel of the Registration Committee which in the opinion of the panel are required to ensure current competence in the practice of applied behaviour analysis. 	<p>Provision mirrors the current subsection 5. (4) and provides a process for a Behaviour Analyst holding an Academic Certificate of Registration to return to autonomous practice.</p>
<p>27. (5)</p>	<p>Where an applicant is a member in good standing holding an Inactive certificate of registration, the Registrar shall issue that member a certificate of registration for a behaviour analyst authorizing autonomous practice if the member,</p> <ul style="list-style-type: none"> (a) was, at the time of being issued their Inactive certificate of registration, a member holding a certificate of registration for a behaviour analyst authorizing autonomous practice; (b) applies in writing to the Registrar for a certificate of registration for a behaviour analyst authorizing autonomous practice not less than 60 days before the applicant proposes to start practising as a member holding a certificate of registration for a behaviour analyst authorizing autonomous practice; and (c) has satisfied the conditions, if any, imposed by a panel of the Registration Committee which in the opinion of the panel are required to ensure current competence in the practice of applied behaviour analysis. 	<p>Provision mirrors the current subsection 5. (5) and provides a process for a behaviour analyst holding an Inactive certificate of registration to return to autonomous practice.</p>
<p>27. (6)</p>	<p>Where an applicant is a member in good standing holding a Retired certificate of registration, the Registrar shall issue that member a certificate of registration for a behaviour analyst authorizing autonomous practice if the member,</p>	<p>Provision mirrors the current subsection 5. (6) and provides a process for a behaviour analyst holding a Retired certificate of registration to return to autonomous practice within 24 months of the Retired certificate being issued.</p>

	<ul style="list-style-type: none"> (a) was, at the time of being issued their Retired certificate of registration, a member holding a certificate of registration for a behaviour analyst authorizing autonomous practice; (b) applies in writing to the Registrar for a certificate of registration for a behaviour analyst authorizing autonomous practice no more than 24 months after the member was issued a Retired certificate of registration and not less than 60 days before the applicant proposes to start practising as a member holding a certificate of registration for a behaviour analyst authorizing autonomous practice; and (c) has satisfied the conditions, if any, imposed by a panel of the Registration Committee which in the opinion of the panel are required to ensure current competence in the practice of applied behaviour analysis. 	
<p>28.</p>	<p>Labour Mobility</p> <ul style="list-style-type: none"> (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a certificate of registration for a behaviour analyst authorizing autonomous practice, the applicant is deemed to have met the requirements set out in paragraphs 1, 2, 3, and 5 of subsection 27 (1) of this Regulation. (2) It is a non-exemptible registration requirement that an applicant referred to in subsection (1) provide one or more certificates or letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a behaviour analyst in every jurisdiction where the applicant holds an out-of-province certificate. (3) If an applicant to whom subsection (1) applies is unable to satisfy the Registrar or a panel of the Registration Committee that the applicant practised the profession of applied behaviour analysis to the extent that would be permitted by a certificate of registration for a behaviour analyst authorizing autonomous practice at any time in the two years immediately before the date of the applicant's application, the applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments that may be specified by a panel of the Registration Committee. (4) An applicant referred to in subsection (1) is deemed to have met the requirement of paragraph 2 of section 3 if the requirements for the 	<p>Provision is the same as the current subsection 6. and provides a process for a behaviour analyst, practising in another province, to the extent that would be permitted by a certificate of registration for a behaviour analyst authorizing autonomous practice, to register in Ontario. Currently, there are no other provinces regulating the profession of Applied Behaviour Analysis.</p>

	<p>issuance of the out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph.</p> <p>(5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code.</p>	
<p>29.</p>	<p>Terms, Conditions and Limitations</p> <p>It is a term, condition and limitation of every certificate of registration for a behaviour analyst authorizing autonomous practice that the member shall practise the profession only within the areas of applied behaviour analysis in which the member has knowledge, skill and judgement.</p>	<p>Training in the profession of applied behaviour analysis is not specific to defined areas of practice as it may be in other professions (i.e., psychology). This provision for terms, conditions and limitations is added to ensure that a Behaviour Analyst will only practise within the area(s) in which they possess knowledge, skill, and judgement, and will only provide services to populations that they are competent to serve. A Behaviour Analyst may be found guilty of professional misconduct if they are found to have practised outside their scope of competence.</p>
<p>30.</p>	<p>Transitional</p> <p>The following apply for the first 24 months after the day this Regulation comes into force,</p>	<p>Transitional (or grandparenting) provisions provide an opportunity for experienced Behaviour Analysts to register with the College. The transitional period is time-limited (24 months after the Regulation comes into force) and requires the applicant to demonstrate that they were practising competently within the scope of practice of the profession prior to proclamation. The College's goal is to have a fair and objective process for assessing these applicants to register all qualified Behaviour Analysts. Applicants registering under these provisions will be required to meet all remaining registration requirements under subsection 27(1).</p>
<p>30. (1)</p>	<p>Paragraphs 1, 2, and 3 of subsection 27 (1) do not apply in respect of an application for a certificate of registration for a behaviour analyst authorizing autonomous practice where the applicant was certified by a body that is approved by Council for that purpose with a certification type and status approved by Council by the date the Regulation comes into force and is in good standing with that body, or</p>	<p>Applicants who were certified by the Behavior Analyst Certification Board (BACB) with BCBA or BCBA-D type certification prior to the date of proclamation and who hold active status, will not have to fulfill the education, supervised practice, and entry to practice examination requirements, and do not have to provide evidence of current practice. They will be required to fulfill all other registration requirements, including completion of the Jurisprudence and Ethics module, criminal record check, and evidence of standing in other jurisdictions (if applicable).</p>

<p>30. (2)</p>	<p>Paragraphs 1 and 2 of subsection 27 (1) do not apply in respect of an application for Certificate of Registration for A Behaviour Analyst Authorizing Autonomous Practice where the applicant who made the application had been practising as a behaviour analyst at any point within or during the three (3) years prior to this Regulation coming into force and meets the following additional non-exemptible requirements:</p> <ol style="list-style-type: none"> 1. The applicant must have engaged in practice in Canada within the scope of practice of applied behaviour analysis for at least 1500 hours during the three-year period that immediately preceded the date that the applicant submitted their application; and 2. The applicant must provide evidence satisfactory to the Registrar or the Registration Committee of competence to practise as a behaviour analyst. 	<p>Applicants who are experienced Behaviour Analysts and who do not hold BCBA or BCBA-D type certification with active status prior to proclamation must provide evidence of competence and current practice by completing an application form and providing supporting documentation in a form that is acceptable to the College. This may include verification of practice/employment, CV, or other proof acceptable to the College of having practised the profession of Applied Behaviour Analysis. Applicants assessed as having practised within the scope of practice of Applied Behaviour Analysis, will then be required to pass the examination of knowledge or competence.</p> <p>Applicants will have to demonstrate that they had practised within the three years immediately prior to the date of proclamation and must have practised a minimum of 1500 hours of practice within the 3 years prior to submitting their application. The transitional registration routes will be closed 24 months following proclamation, after which, all applicants must apply through the normal registration routes.</p>
<p>Certificate of Registration for a Behaviour Analyst Authorizing Supervised Practice</p>		
<p>31. (1)</p>	<p>To qualify for a certificate of registration for a behaviour analyst authorizing supervised practice, an applicant must comply with the following non-exemptible registration requirements:</p>	
<p>31. (1) 1.</p>	<p>The applicant meets the requirements set out in subsection 27. (1) 1.</p>	<p>The academic requirements for a certificate of registration authorizing supervised practice are the same as the academic requirements for a certificate of registration authorizing autonomous practice.</p>
<p>31. (1) 2.</p>	<p>The applicant must provide to the College a signed undertaking from a supervisor in which the supervisor undertakes to train the proposed member and supervise and evaluate the proposed member's practice and to provide reports in the form and manner as specified by the Registrar or a panel of the Registration Committee.</p>	<p>For a certificate of registration to be issued, the supervisor must sign an undertaking to train, supervise and evaluate the member's practice and provide reports as required by the College.</p>
<p>31. (2)</p>	<p>An applicant who has obtained a degree from a program described in subparagraph 1 iv of subsection 27. (1) shall not be considered to have met the requirements of paragraph 1 of subsection (1) unless the</p>	<p>This section is the same as subsection 27. (2) with respect to academic credentials and training obtained outside of Canada.</p>

	<p>applicant has successfully completed such further assessment, training or supervised experience, if any, which in the opinion of a panel of the Registration Committee is required to ensure that the applicant has competencies equivalent to those of an applicant who has obtained a degree from a program described in subparagraph 1 i of subsection 27. (1).</p>	
<p>31. (3)</p>	<p>A signed undertaking shall not be considered as satisfying the requirement in paragraph 2 of subsection (1) unless the proposed supervisor who signed the undertaking met all of the following requirements:</p> <ol style="list-style-type: none"> 1. They must be a member holding either a certificate of registration for a behaviour analyst authorizing autonomous practice or for the first 24 months after this Regulation comes into force, provides evidence, satisfactory to the Registration Committee that they meet the requirements for a certificate of registration authorizing autonomous practice. 2. Their certificate of registration must not be subject to any term, condition or limitation that was imposed as a result of a disciplinary proceeding or a fitness to practise proceeding. 3. They must not be the subject of any ongoing disciplinary proceeding or fitness to practise proceeding. 	<p>The supervisor must meet specific criteria to be acceptable to the College. To ensure capacity can be met for appropriate numbers of supervisors during the transition period, a provision has been added to allow a Behaviour Analyst, who meets the requirements for registration, but may not yet be registered, to provide supervision, with prior consent of the Registration Committee.</p>
<p>32.</p>	<p>Labour Mobility</p> <ol style="list-style-type: none"> (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a certificate of registration for a behaviour analyst authorizing supervised practice, the applicant is deemed to have met the requirements set out in paragraph 1 of subsection 31 (1) of this Regulation. (2) It is a non-exemptible registration requirement that an applicant referred to in subsection (1) provide one or more certificates or letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a behaviour analyst in every jurisdiction where the applicant holds an out-of-province certificate. (3) If an applicant to whom subsection (1) applies is unable to satisfy the Registrar or a panel of the Registration Committee that the 	<p>This provision is the same as subsection 28.</p>

	<p>applicant practised the profession of applied behaviour analysis to the extent that would be permitted by a certificate of registration for a behaviour analyst authorizing supervised practice at any time in the two years immediately before the date of the applicant's application, the applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments that may be specified by a panel of the Registration Committee.</p> <p>(4) An applicant referred to in subsection (1) is deemed to have met the requirement of paragraph 2 of section 3 if the requirements for the issuance of the out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph.</p> <p>(5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code.</p>	
<p>33.</p>	<p>Terms, Conditions and Limitations</p> <p>It is a term, condition and limitation of every certificate of registration for a behaviour analyst authorizing supervised practice that the member shall practise the profession only under the supervision of a supervisor who is approved for that purpose by the Registrar or a panel of the Registration Committee.</p>	<p>A member holding a certificate of registration authorizing supervised practice may only practice under the supervision of an approved supervisor.</p>
<p>34.</p>	<p>Expiry</p> <p>A certificate of registration for a behaviour analyst authorizing supervised practice expires on the date set out on the certificate, which date shall be no earlier than 12 months after the date the certificate of registration was issued and no more than 24 months after the date the certificate of registration was issued.</p>	<p>The timeline mirrors that of psychology, providing a minimum of a year of supervised practice. The Registrar can place a certificate on hold or extend the expiry of a certificate at the member's request under certain circumstances.</p>
<p>Renumbered Sections 35-44 (currently sections 27-36) with the Addition of Terminology Related to Applied Behaviour Analysis/Behaviour Analyst (highlighted)</p>		
<p>35.</p>	<p>Academic Class of Certificates of Registration</p> <p>To qualify for an Academic certificate of registration, an applicant must comply with the following non-exemptible registration requirements:</p>	<p>These provisions (subsections 35.-37.) for Academic Class of Certificates of Registration are unchanged (current subsections 27.-</p>

	<ol style="list-style-type: none"> 1. The applicant must occupy a full-time or regular academic position on the faculty of an Ontario university. 2. The applicant must be a member in good standing who holds a certificate of registration for a psychologist authorizing autonomous practice or a certificate of registration for a psychological associate authorizing autonomous practice or a certificate of registration for a behaviour analyst authorizing autonomous practice and, <ol style="list-style-type: none"> i. whose certificate of registration is not subject to any term, condition or limitation that was imposed as a result of a disciplinary proceeding or a fitness to practise proceeding, ii. who is not in default of any obligation to the College, including payment of the annual membership fee, and iii. who is not the subject of any ongoing disciplinary or fitness to practise proceeding. 	<p>29.) adding the profession of Applied Behaviour Analysis/Behaviour Analysts to the wording (highlights).</p>
<p>36.</p>	<p>Labour Mobility</p> <ol style="list-style-type: none"> (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for an Academic certificate of registration, the applicant is deemed to have met the requirements set out in paragraph 2 of section 27 of this Regulation. (2) It is a non-exemptible registration requirement that an applicant referred to in subsection (1) provide one or more certificates or letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a psychologist or behaviour analyst in every jurisdiction where the applicant holds an out-of-province certificate. (3) If an applicant to whom subsection (1) applies is unable to satisfy the Registrar or a panel of the Registration Committee that the applicant practised the profession of psychology or applied behaviour analysis to the extent that would be permitted by an Academic certificate of registration at any time in the two years immediately before the date of the applicant's application, the applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments that may be specified by a panel of the Registration Committee. (4) An applicant referred to in subsection (1) is deemed to have met the requirement of paragraph 2 of section 3 if the requirements for the issuance of the out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. 	

	<p>(5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code.</p>	
<p>37.</p>	<p>Terms Conditions and Limitations</p> <p>It is a term, condition and limitation of every Academic certificate of registration that the member not provide intervention, assessment or consultation services, or, in the case of a behaviour analyst, applied behaviour analysis services, to individual clients, groups of clients, or organizations and not supervise persons in providing those services</p>	
<p>38.</p>	<p>Inactive Class of Certificates of Registration</p> <p>To qualify for an Inactive certificate of registration, an applicant must comply with the following non-exemptible registration requirements:</p> <ol style="list-style-type: none"> 1. The applicant must submit his or her application to the Registrar not less than 60 days before the applicant intends to cease practising the profession. 2. The applicant must be a member in good standing who holds a certificate of registration for a psychologist authorizing autonomous practice or a certificate of registration for a psychological associate authorizing autonomous practice or a certificate of registration for a behaviour analyst authorizing autonomous practice and, <ol style="list-style-type: none"> i. whose certificate of registration is not subject to any term, condition or limitation that was imposed as a result of a disciplinary proceeding or a fitness to practise proceeding, ii. who is not in default of any obligation to the College, including payment of the annual membership fee, and iii. who is not the subject of any ongoing disciplinary or fitness to practise proceeding. 	<p>These provisions (subsections 38., 39.) for Inactive Class of Certificates of Registration are unchanged (current subsections 30., 31.) adding the profession of Applied Behaviour Analysis/Behaviour Analysts to the wording (highlights).</p>
<p>39.</p>	<p>Terms Conditions and Limitations</p> <p>It is a term, condition and limitation of every Inactive certificate of registration that the member shall not practise the profession.</p>	

<p>40.</p>	<p>Retired Class of Certificates of Registration</p> <p>To qualify for a Retired certificate of registration, an applicant must comply with the following non-exemptible registration requirements:</p> <ol style="list-style-type: none"> 1. The applicant must submit his or her application to the Registrar not less than 60 days before the applicant intends to cease practising the profession. 2. The applicant must be a member in good standing who holds a certificate of registration for a psychologist authorizing autonomous practice or a certificate of registration for a psychological associate authorizing autonomous practice or a certificate of registration for a behaviour analyst authorizing autonomous practice and, <ol style="list-style-type: none"> i. whose certificate of registration is not subject to any term, condition or limitation that was imposed as a result of a disciplinary proceeding or a fitness to practise proceeding, ii. who is not in default of any obligation to the College, including payment of the annual membership fee, and iii. who is not the subject of any ongoing disciplinary or fitness to practise proceeding. 	<p>These provisions (subsections 40., 41) for Retired Class of Certificates of Registration are unchanged (current subsections 32., 33.) adding the profession of Applied Behaviour Analysis/Behaviour Analysts to the wording (highlights).</p>
<p>41.</p>	<p>It is a term, condition and limitation of every Retired certificate of registration that the member shall not practise the profession.</p>	
<p>Expiry, Reinstatement, Etc.,</p>		
<p>42.</p>	<p>A person's certificate of registration expires immediately if the Registrar issues another certificate of registration to the person.</p>	<p>No proposed change. A provision is made in 42.1 to allow a psychologist or psychological associate to also hold a certificate of registration as a behaviour analyst. However, this provision continues to prohibit a member from holding supervised practice and autonomous or interim autonomous practice certificates of registration, at the same time.</p>
<p>42.1</p>	<p>Despite section 42., a person may hold a certificate of registration in each of the professions regulated by the College if they meet the registration requirements to practice as a psychologist or psychological associate and meet the registration requirements to practice as a behaviour analyst.</p>	<p>This provision will permit members of the College, who meet the registration requirements, to hold two certificates of registration: one authorizing the practice of Psychology, and one authorizing the practice of Applied Behaviour Analysis.</p>

<p>43.</p>	<p>If the Registrar suspends a member’s certificate of registration pursuant to section 24 of the Health Professions Procedural Code for failure to pay a fee, the Registrar may lift the suspension within two years from the date of suspension on the payment of,</p> <ul style="list-style-type: none"> (a) the fee the member failed to pay; and (b) all applicable fees and penalties required under the by-laws. 	<p>No proposed change.</p>
<p>Transition</p>		
<p>44. – 46.</p>	<p>44. (1) Every certificate of registration that was in existence immediately before April 7, 2015 is continued as the equivalent certificate of registration with the same status under this Regulation until such time as it otherwise ceases to be effective and, for greater certainty,</p> <ul style="list-style-type: none"> (a) every certificate of registration subject to a limitation of academic status is continued as an Academic certificate of registration; (b) every certificate of registration subject to a limitation of inactive status is continued as an Inactive certificate of registration; and (c) every certificate of registration subject to a limitation of retired status is continued as a Retired certificate of registration. <p>(2) Where an application for a certificate of registration had been made but not finally dealt with before April 7, 2015, the application shall be dealt with in accordance with this Regulation.</p> <p>45. OMITTED (REVOKES OTHER REGULATIONS).</p> <p>46. OMITTED (PROVIDES FOR COMING INTO FORCE OF PROVISIONS OF THIS REGULATION).</p>	<p>These provisions (subsections 44.-46.) are unchanged (current subsections 36.-38.). The date of proclamation will be inserted in subsection 44. (1) to replace the date of April 7, 2015.</p>

Psychology and Applied Behaviour Analysis Act, 1991/2021
Loi de 2021 sur la psychologie et l'analyse comportementale appliquée ~~Loi de 1991 sur les~~
~~psychologues~~

ONTARIO REGULATION 801/93
PROFESSIONAL MISCONDUCT

Consolidation Period: From December 31, 1993 to the [e-Laws currency date](#).

No amendments.

This Regulation is made in English only.

1. The following are acts of professional misconduct for the purposes of clause 51 (1) (c) of the Health Professions Procedural Code:

THE PRACTICE OF THE PROFESSION AND THE CARE OF, AND RELATIONSHIP WITH, CLIENTS

1. Contravening a term, condition or limitation imposed on the member's certificate of registration.
2. Failing to maintain the standards of the profession.
3. Doing anything to a client for the purpose of prevention, assessment, diagnosis, intervention or other purpose in a situation in which a consent is required by law, without such a consent.
4. Delegating a controlled act in contravention of the Act, the *Regulated Health Professions Act, 1991* or the regulations under either of those Acts.
5. Failing to supervise adequately a person who is under the professional responsibility of the member and who is providing a psychological [or applied behaviour analysis](#) service.
6. Abusing a client.
7. Practising the profession while under the influence of any substance, or while suffering from illness or other dysfunction which the member knows or ought to know impairs the member's ability to practise.
8. Discontinuing professional services that are needed unless,
 - i. the client requests the discontinuation,
 - ii. the client withdraws from the service,
 - iii. reasonable efforts are made to arrange alternative services,
 - iv. the client is given a reasonable opportunity to arrange alternative services, or
 - v. continuing to provide the services would place the member at serious personal risk.
9. Providing a service that the member knows or ought to know is not likely to benefit the client.
10. Practising the profession while the member is in a conflict of interest.
11. Giving information about a client to a person other than the client or ~~his or her~~[their](#) authorized representative except with the consent of the client or ~~his or her~~[their](#) authorized representative or as required or allowed by law.
12. Breaching a term of an agreement with a client relating to,
 - i. the fees for professional services, or
 - ii. professional services for the client, except where, in the judgement of the member, the breach is trivial or was necessitated by exceptional circumstances.
13. Failing to provide a truthful, understandable and appropriate explanation of the nature of an assessment, intervention, or other service following a client's request for an explanation.

REPRESENTATIONS ABOUT MEMBERS AND THEIR QUALIFICATIONS

14. Inappropriately using a term, title or designation in respect of the member's practice.
15. Inappropriately using a term, title or designation indicating a specialization in the profession.

Consultation - Date TBD

16. Failing to identify oneself as a psychologist or psychological associate [or behaviour analyst](#) to a client or a member's employer when providing psychological [or applied behaviour analysis](#) services.
17. Failing to advise the College promptly of a change in the name used by the member in providing or offering to provide psychological [or applied behaviour analysis](#) services.
18. Permitting, counselling, or assisting any person who is not a member to represent himself or herself as a member of the College.

RECORD KEEPING AND REPORTS

19. Failing to keep records as required by the regulations.
20. Making a record, or issuing or signing a certificate, report, or similar document that the member knows or ought to know is false, misleading or otherwise improper.
21. Failing, without reasonable cause, to provide a report or certificate relating to a service performed by the member, within a reasonable time, to the client or ~~his or her~~[their](#) authorized representative after a client or ~~his or her~~[their](#) authorized representative has requested such a report or certificate.

BUSINESS PRACTICES

22. Failing to inform the client, before or at the commencement of a service of the fees and charges to be levied for the service, and for late cancellations or missed appointments.
23. Submitting an account or charge for services that the member knows [or ought to know](#) is false or misleading.
24. Charging a fee that is excessive in relation to the service performed.
25. Charging a fee for a service that exceeds the fee set out in the schedule of fees currently published for the profession without informing the client, before or at the commencement of the service, of the additional amount that will be charged.
26. Receiving or conferring a rebate, fee or other benefit by reason of the referral of a client from or to another person.
27. Charging a fee for an undertaking to provide an on-call service to a client unless the client is an organization.
28. Offering or giving a reduction for prompt payment of an account.
29. Failing to provide an itemized account for professional services within a reasonable time, if requested to do so by the client or the person or agency who is to pay, in whole or in part, for the services.
30. Selling any debt owed to the member for professional services. This does not include the use of credit cards to pay for professional services.

MISCELLANEOUS MATTERS

31. Contravening the Act, the *Regulated Health Professions Act, 1991* or the regulations under either of those Acts.
32. Contravening a federal, provincial or territorial law, or a municipal by-law, if
 - i. the purpose of the law, or by-law is to protect public health, or
 - ii. the contravention is relevant to the member's suitability to practise.
33. Influencing a client to change ~~his or her~~[their](#) will or other testamentary instrument.
34. Engaging in conduct or performing an act, in the course of practising the profession [of psychology or applied behaviour analysis or relevant to the practice of psychology or applied behaviour analysis](#), that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional. O. Reg. 801/93, s. 1.
2. OMITTED (PROVIDES FOR COMING INTO FORCE OF PROVISIONS OF THIS REGULATION). O. Reg. 801/93, s. 2.

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Psychology and Applied Behaviour Analysis Act, 1991/2021
Loi de 2021 sur la psychologie et l'analyse comportementale appliquée ~~Loi de 1991 psychologues~~

ONTARIO REGULATION 209/94

GENERAL

Consolidation Period: From April 7, 2015 to the [e-Laws currency date](#).

Last amendment: 73/15.

Legislative History: 222/95, 534/98, 535/99, 73/15.

This Regulation is made in English only.

PARTS I, II REVOKED: O. Reg. 535/99, s. 1.

PART III
QUALITY ASSURANCE

GENERAL

6. In this Part,

“assessor” means an assessor appointed under section 81 of the Health Professions Procedural Code;

“Committee” means the Quality Assurance Committee and includes a panel of the Committee appointed under subsection 7 (2);

“program” means the quality assurance program required by section 80 of the Health Professions Procedural Code;

“stratified random sampling” means a sampling where groups are,

- (a) removed from the pool of members to be sampled, or
- (b) weighted to increase or decrease the likelihood of their being selected. O. Reg. 73/15, s. 1.

7. (1) The program shall include the following components:

- 1. Self-assessment.
- 2. Peer and practice assessment.
- 3. Continuing education and professional development designed to,
 - i. promote continuing competence and continuing quality improvement among members,
 - ii. address changes in practice environments, and
 - iii. incorporate standards of practice, advances in technology, changes made in entry to practice competencies and other relevant issues in the discretion of the Council.
- 4. Mechanisms for the College to monitor members’ participation in, and compliance with, the program. O. Reg. 73/15, s. 1.

(2) The Chair of the Committee may appoint a panel of the Committee composed of three persons, at least one of whom shall be a member of the Council appointed by the Lieutenant Governor in Council. O. Reg. 73/15, s. 1.

(3) The Committee shall administer the program. O. Reg. 73/15, s. 1.

SELF-ASSESSMENT

8. (1) The purposes of self-assessment are to assist members,

- (a) to identify the extent to which a member’s practice meets current standards;
- (b) to identify opportunities to improve a member’s knowledge, skill and judgment; and
- (c) to plan a member’s continuing education and professional development. O. Reg. 73/15, s. 1.

(2) Every member shall participate in self-assessment in the manner approved by the Committee and fulfil any reporting requirements as directed by the Committee. O. Reg. 73/15, s. 1.

(3) Every member shall retain records of ~~his or her~~their participation in self-assessment, in the form and manner required by the Committee, for a period of at least five years. O. Reg. 73/15, s. 1.

(4) At the request of the Committee, a member shall submit the records referred to in subsection (3) to the College within the time period specified in the request or, where no time period is specified, within 30 days after the day the member receives the request. O. Reg. 73/15, s. 1.

(5) This section does not apply to a member who holds a Retired certificate of registration. O. Reg. 73/15, s. 1.

PEER AND PRACTICE ASSESSMENT

9. (1) Each year the Committee shall select members to undergo a peer and practice assessment to assess the members' knowledge, skill and judgment. O. Reg. 73/15, s. 1.

(2) A member shall undergo a peer and practice assessment if,

(a) the member's name is selected randomly from the entire membership;

(b) the member's name is selected by stratified random sampling; or

(c) the member has failed to participate in self-assessment. O. Reg. 73/15, s. 1.

(3) An assessor or assessors shall evaluate the member's knowledge, skill and judgment by way of a peer and practice assessment, prepare a written report that may include recommendations and provide the report to the Committee and the member, along with a notice of the member's right to make written submissions to the Committee. O. Reg. 73/15, s. 1.

(4) The member may make written submissions to the Committee within 14 days from the date that he or she received the report. O. Reg. 73/15, s. 1.

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

(a) direct that no further action be taken;

(b) take any action listed in subsection 80.2 (1) of the Health Professions Procedural Code if the Committee is of the opinion that the member's knowledge, skill or judgment is unsatisfactory;

(c) grant the member a specified period of time to address the recommendations in the report; or

(d) direct that the member undergo a second peer and practice assessment. O. Reg. 73/15, s. 1.

(6) If the Committee acts under clause (5) (c) or (d), subsections (3) and (4) and clauses (5) (a) and (b) apply, with any necessary modifications. O. Reg. 73/15, s. 1.

(7) For greater certainty, the Committee shall not require a member to undergo a further peer and practice assessment under clause (5) (d) after the second assessment. O. Reg. 73/15, s. 1.

(8) This section does not apply to a member who holds a Retired or Inactive certificate of registration. O. Reg. 73/15, s. 1.

CONTINUING EDUCATION AND PROFESSIONAL DEVELOPMENT

10. (1) Every member shall participate in continuing education and professional development activities in the manner approved by the Committee for the purpose of maintaining and enhancing the member's knowledge, skill and judgment. O. Reg. 73/15, s. 1.

(2) The College shall, in a timely manner, distribute information to the members about the requirements for continuing education and professional development activities approved by the Committee. O. Reg. 73/15, s. 1.

(3) A member shall retain the records of ~~his or her~~their participation in continuing education and professional development activities for a period of at least five years. O. Reg. 73/15, s. 1.

(4) At the request of the Committee, a member shall attest to the completion of their continuing education and professional development activities in the form and manner required by the Committee and provide the Committee with ~~his or her~~their records of the activities undertaken in the form and manner requested by the Committee. O. Reg. 73/15, s. 1.

(5) This section does not apply to a member who holds a Retired certificate of registration. O. Reg. 73/15, s. 1.

11.-17. REVOKED: O. Reg. 73/15, s. 1.

PART IV ADVERTISING

18. (1) An advertisement with respect to a member's practice must not contain,

(a) anything that is false or misleading;

(b) claims of uniqueness or special advantage that are not supportable by existing scientific evidence;

(c) any claim, whether express or implied, that the member is a specialist;

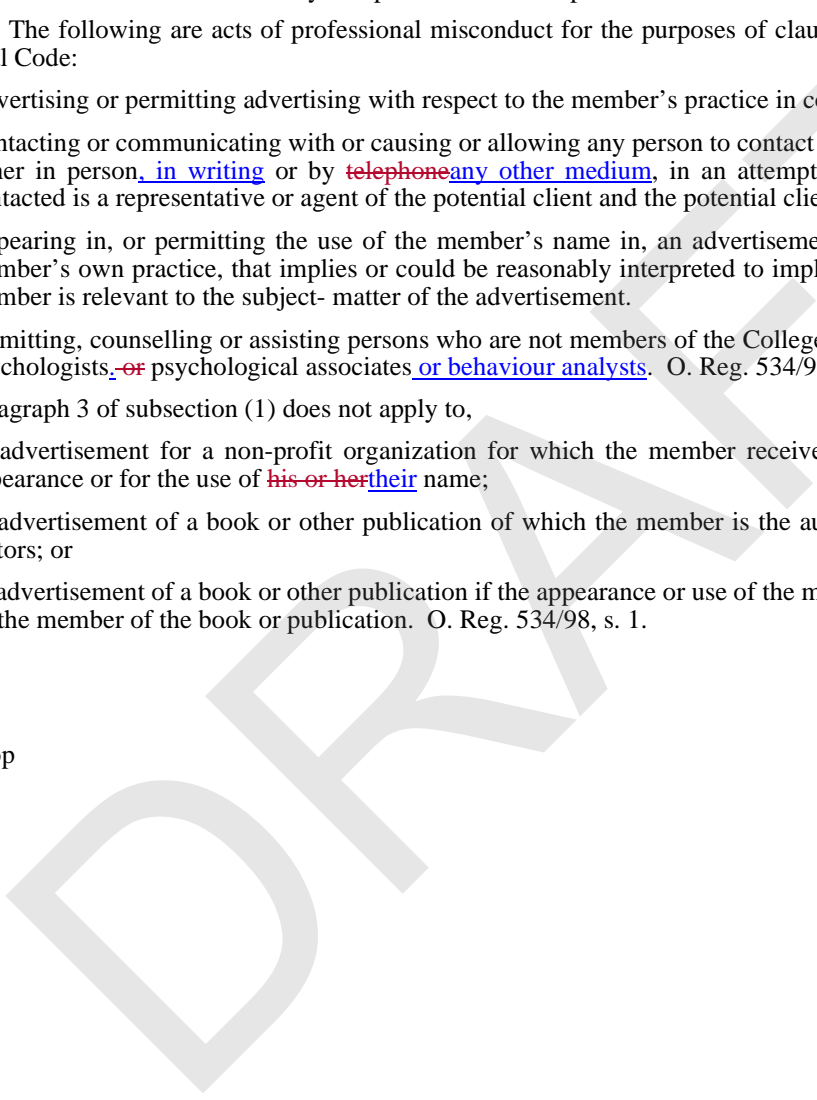
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- (d) an endorsement by an organization other than a professional psychological [or applied behaviour analysis](#) organization or a professional body of psychologists, of psychological associates or of both [or of behaviour analysts](#) that grants professional credentials to psychologists, psychological associates or to both [or to behaviour analysts](#);
 - (e) a testimonial by a client or former client or by a friend or relative of a client or former client;
 - (f) a reference to a particular brand of equipment used to provide professional services if the reference implies that the member recommends the use of that brand of equipment; or
 - (g) anything that discredits the professions of psychology [or applied behaviour analysis](#). O. Reg. 534/98, s. 1.
- (2) Clause (1) (e) does not apply with respect to an advertisement that is intended for organizations or businesses or with respect to testimonials made by an organization or a business. O. Reg. 534/98, s. 1.
- (3) An advertisement must be readily comprehensible to the persons to whom it is directed. O. Reg. 534/98, s. 1.

19. (1) The following are acts of professional misconduct for the purposes of clause 51 (1) (c) of the Health Professions Procedural Code:

- 1. Advertising or permitting advertising with respect to the member's practice in contravention of section 18.
 - 2. Contacting or communicating with or causing or allowing any person to contact or communicate with, potential clients, either in person, [in writing](#) or by ~~telephone~~[any other medium](#), in an attempt to solicit business, unless the person contacted is a representative or agent of the potential client and the potential client is not an individual or a family.
 - 3. Appearing in, or permitting the use of the member's name in, an advertisement, other than an advertisement of the member's own practice, that implies or could be reasonably interpreted to imply that the professional expertise of the member is relevant to the subject- matter of the advertisement.
 - 4. Permitting, counselling or assisting persons who are not members of the College to promote or advertise themselves as psychologists, ~~or~~ psychological associates [or behaviour analysts](#). O. Reg. 534/98, s. 1.
- (2) Paragraph 3 of subsection (1) does not apply to,
- (a) an advertisement for a non-profit organization for which the member receives no consideration for ~~his or her~~[their](#) appearance or for the use of ~~his or her~~[their](#) name;
 - (b) an advertisement of a book or other publication of which the member is the author or editor or one of the authors or editors; or
 - (c) an advertisement of a book or other publication if the appearance or use of the member's name is in relation to a review by the member of the book or publication. O. Reg. 534/98, s. 1.

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DRY

REPORT TO COUNCIL

2022.03.04A

FIRST QUARTER, JUNE 1, 2022 – AUGUST 31, 2022

PRESIDENT'S REPORT

In July, we received the news of Dr. Rick Morris, our Registrar & Executive Director's plan to retire on January 31, 2023. This news reminded me anew of how much I have valued Dr. Morris' excellence in leadership, and his many contributions to the regulation of the profession, and how much he will be missed.

With Dr. Morris' announcement, I set into motion the various steps identified in our new *Policy I-15: Succession Plan for the Position of Registrar & Executive Director*. In this regard, I want to thank each member of Council for your timely response to my request for your feedback on the appointment of members to the Search Committee last month. The Search Committee includes Dr. David Kurzman (Professional Member of Council), Dr. Marjory Phillips (Vice-President & Academic Member of Council), Mr. Paul Stopciati (Public Member of Council) and myself.

As a Committee, we have established our plan to proceed with the search for a new Registrar & Executive Director at the College. The Search Committee has decided to work with the Executive Search Firm, Odgers Berndtson, to undertake an internal and external search for a suitable candidate. This process will also include integral points of consultation with the Executive Committee and Council as a whole. I am optimistic that we will find a suitable candidate on a timeline that corresponds with Dr. Morris' planned retirement.

While I focused on the new issue of Dr. Morris' retirement in the past few months, I also had the opportunity to work on several longstanding College projects as well.

ABA Regulation

Council has the opportunity to review the Applied Behaviour Analysis Regulations package for the first time at our September 23rd, 2022 meeting. I benefited from the opportunity to participate in the development of this draft of the proposed Regulations over the past year. Routine meetings in the last three months have led to gradual refinements in the amendments to the Registration Regulation, in particular. It is now time for Council as a whole to decide if they support the distribution of the proposed Regulations to the membership and various stakeholders for consultation.

Master's Level Registration

Dr. Paula Garshowitz is available to begin work this month on our longstanding, Council action point 2019.03.03C, "To pursue amendments to O.Reg. 74/15 - Registration under the *Psychology Act, 1991* to discontinue Master's level registration and at that time, grant the title Psychologist to all existing Psychological Associates." Dr. Morris and I had an initial meeting with her this week. Dr. Garshowitz is now developing her workplan for the project. To begin, she will review relevant information gathered by our different Councils over the years. For example, the information included in the March 2013 Report to Council of the Task Force on Shaping the Future of Psychology Regulation in Ontario, as well as more recent stakeholder consultation feedback on the action point from 2019. I look forward to meeting with

Dr. Garshowitz as she plans and completes the research for this project and develops a revised Registration Regulation with accompanying rationale for Council's review.

Committees and Working Groups

I participated in College Committees and Working Group meetings since June 2022 (the Executive, ICRC, Finance & Audit, and Search Committees along with the EDI and ABA working groups). I have appreciated the contributions of professional and public members of Council, members of the College, Behavior Analysts from the community, and College staff in each of these meetings. Each College Committee and Working Group functions well due to the commitment of all of those in attendance. I have been particularly impressed by the administrative assistance of Ms. Caitlin O'Kelly, Assistant to the Registrar, whose excellent organizational skills contribute immeasurably to the many meetings she supports, and send a thank you to her on behalf of us all.

Respectfully,
Wanda Towers, Ph.D., C.Psych.



REPORT TO COUNCIL

2022.03.04B

SEPTEMBER 2022 COUNCIL MEETING

REGISTRAR & EXECUTIVE DIRECTOR'S REPORT

REGULATION OF APPLIED BEHAVIOUR ANALYSIS

Over the past many months, the Applied Behaviour Analysis Working Group has been meeting regularly to develop the statutory processes necessary for the regulation and registration of Behaviour Analysts. The results of these efforts are presented to Council at this meeting for review and approval for circulation to the membership and other stakeholders. The task of developing appropriate registration qualifications required consideration of two groups: new Behaviour Analysts entering the field and those who have been competently practicing the profession prior to regulation. The details of these *routes to registration* are discussed in item .03B *ABA Regulations for Circulation*. I want to extend my thanks and appreciation to the ABA Working Group for their expertise and the time they have generously given to ensuring the success of this undertaking.

FINANCIAL AUDIT FOR THE YEAR ENDING MAY 31, 2022

The Auditors will be reviewing the Audited Financial Statements for the year ending May 31, 2022 with Council at this meeting. As you will hear, the audit went very smoothly, with very positive results. I want to thank the Senior Management Team, especially Ms. Stephanie Morton, Director, Corporate Services for their work in collecting the required information and having it available in a timely fashion.

BARBARA WAND SEMINAR IN PROFESSION ETHICS, STANDARDS AND CONDUCT

Planning for the next Barbara Wand Seminar, scheduled for Monday, November 28, 2022 is well underway, and a "Save the Date" was recently distributed to the membership and those on the College information subscriber list. The topic for the Seminar is "Equity, Diversity & Inclusion" and we are very pleased to have two very knowledgeable and experienced presenters available to us. This virtual Seminar is free to all members of the College and to graduate psychology students. As well, this year we are pleased to extend complimentary access to members of the Ontario Association for Behaviour Analysis (ONTABA). We encourage everyone to make plans to attend.

COLLEGE PERFORMANCE MANAGEMENT FRAMEWORK (CPMF)

Although no information has been received to date regarding this year's CPMF, it is assumed the College, along with the other health Colleges, will be engaged in the third cycle pertaining to activities in the 2022 year. Once again this year, Mr. Barry Gang, Deputy Registrar will lead the Senior Management Team in reviewing the College's compliance with the CPMF standards and preparing the necessary documentation. The 2022 CPMF will be presented to Council at the March 2023 meeting and then submitted to the Ministry of Health at the end of that month. The preparation of the CPMF is very time consuming and I want to thank the Senior Team in advance, for this time and attention to this undertaking.

CONTACT FOR QUESTIONS

Dr. Rick Morris, Registrar & Executive Director

REPORT TO COUNCIL

2022.03.04C

FIRST QUARTER, JUNE 1, 2021 – AUGUST 31, 2022

REGISTRATION COMMITTEE QUARTERLY REPORT

COMMITTEE MEMBERS:

Marjory Phillips, Co-Chair, Council Member
 Adrienne Perry, Co-Chair, Council Member
 Mark Coates, College Member
 Paula Conforti, Council Member
 Samantha Longman-Mills, College Member

Nadia Mocan, Public Member
 Eduardo Roldan, College Member
 Fred Schmidt, Council Member
 Paul Stopciati, Public Member
 Sheila Tervit, College Member

STAFF

Lesia Mackanyn, Director, Registration
 Myra Veluz, Senior Registration Assistant
 Shannon Elliott, Registration Assistant

Deneika Greco, Registration Assistant
 Janine Persaud, Registration Assistant
 Emily Sarmento, Registration Assistant

COMMITTEE ACTIVITIES

July 14, 2022: Plenary Session

A Plenary Session was held on the morning of July 14 and included an orientation session for new and returning Committee members. Meeting dates for the 2022-2023 term were also selected. Dr. Marjory Phillips led a review and discussion of the Committee's Work Plan, looking at on-going projects and goals for the new term, with an emphasis on the Committee's ongoing review of the Oral Examination. The Committee also reviewed the survey feedback from some oral examiners with respect to piloting a diagnostic rubric in the Oral Examinations.

July 14, 2022: Panel A

The Registrar referred a total of 37 cases to Panel A which included:

- 4 involving academic credential reviews (4 masters);
- 17 involving training for supervised practice members or eligible candidates (6 doctoral, 11 masters);
- 3 involving an examination outcome (1 EPPP, 2 Oral Examination);
- 1 involving a reciprocity application;
- 3 involving an application for removal or modification of limitation and/or condition;
- 8 involving a request for change of area of practice;
- 1 involving a request to return to an autonomous certificate from an inactive certificate.

July 15, 2022: Panel B

The Registrar referred a total of 27 cases to Panel B which included:

- 3 involving academic credential reviews (1 doctoral, 2 masters);
- 15 involving training for supervised practice members or eligible candidates (5 doctoral, 10 masters);
- 2 involving a reciprocity application;
- 7 involving requests for change of area of practice.

SUBMITTED BY

Marjory Phillips, Ph.D., C.Psych., Co-Chair

Adrienne Perry, Ph.D., C.Psych., Co-Chair

REGISTRATION RELATED 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

2022.02.04D

FIRST QUARTER, JUNE 1, 2022 – AUGUST 31, 2022

INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

COMMITTEE MEMBERS:

Melanie Morrow, College Member, Chair
 Tanaya Chatterjee, College Member
 Adam Ghemraoui, College Member
 David Gold, College Member
 Allyson Harrison, College Member
 Joyce Isbitsky, College Member
 Jacob Kaiserman, College Member
 Marilyn Keyes, Council Member
 Archie Kwan, Council Member
 Ilia Maor, Public Member

Denise Milovan, College Member
 Ian Nicholson, Council Member
 Cenobar Parker, Public Member
 Jasmine Peterson, College Member
 Rana Pishva, College Member
 Naomi Sankar-DeLeeuw, College Member
 Wanda Towers, Council Member
 Esther Vlessing, Public Member
 Scott Warnock, Public Member

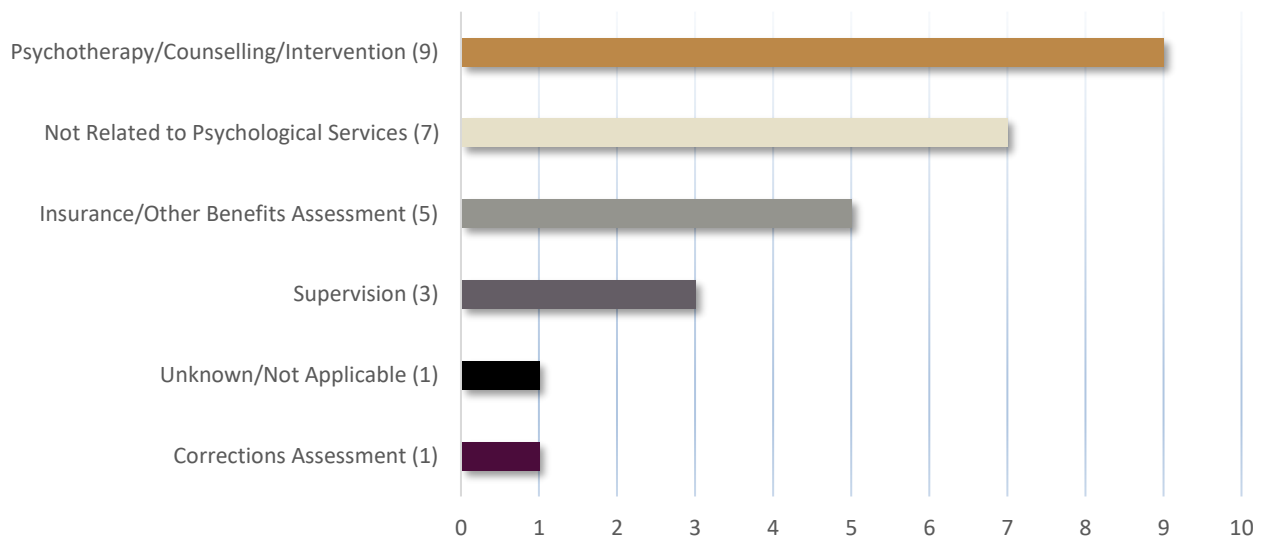
STAFF

Zimra Yetnikoff, Director, Investigations & Hearings
 Hélène Theberge, Senior Administrative Assistant
 Jennifer Taylor, Administrative Assistant

COMMITTEE ACTIVITIES

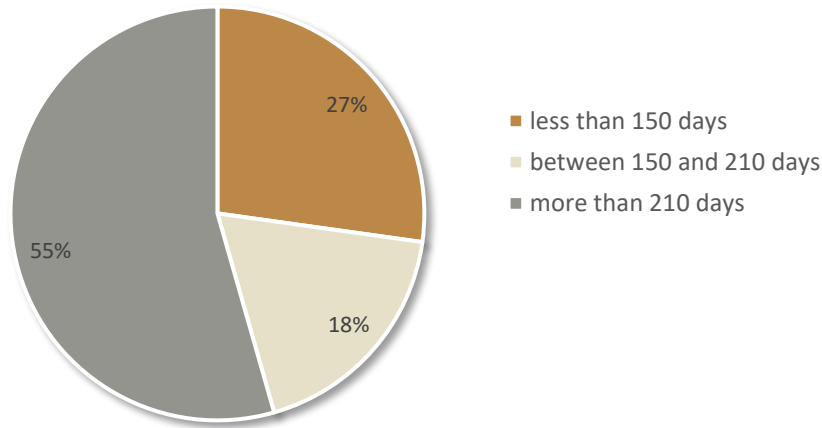
New Complaints and Reports

In the 1st Quarter, the College received 25 new complaints and opened one Health Inquiry, for a total of 26 new matters. The nature of service in relation to these matters is as follows:



Timeline Snapshot

There are currently 147 open Complaints and Registrar’s Investigations being actively investigated.

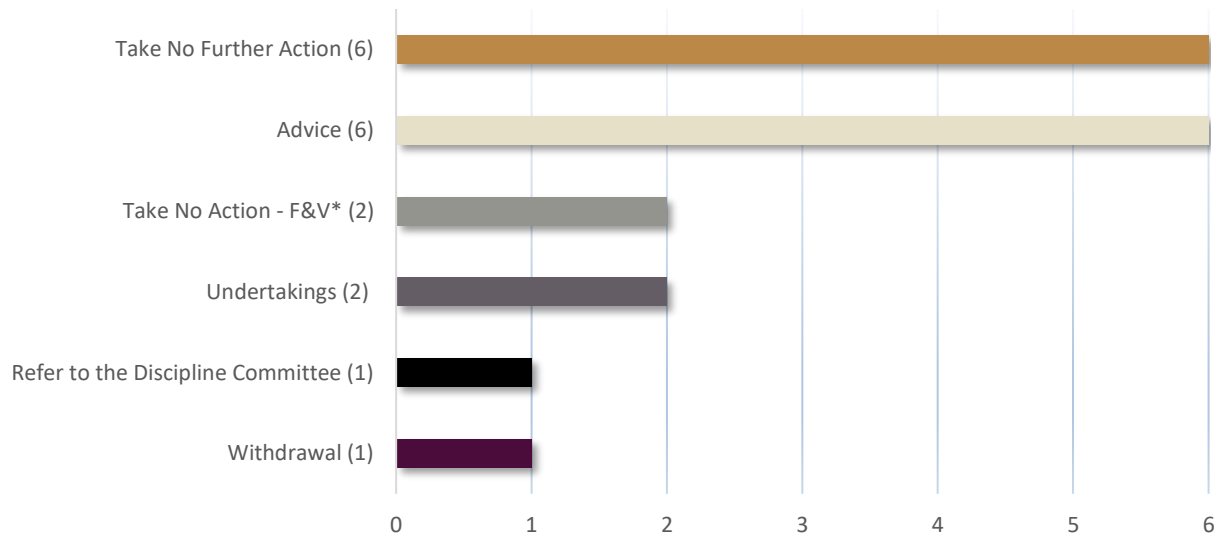


ICRC Meetings

The ICRC met on June 16, July 27, August 24, 2022, and September 9, 2022 to consider a total of 42 cases. In addition, the ICRC held 16 teleconferences to consider 19 cases.

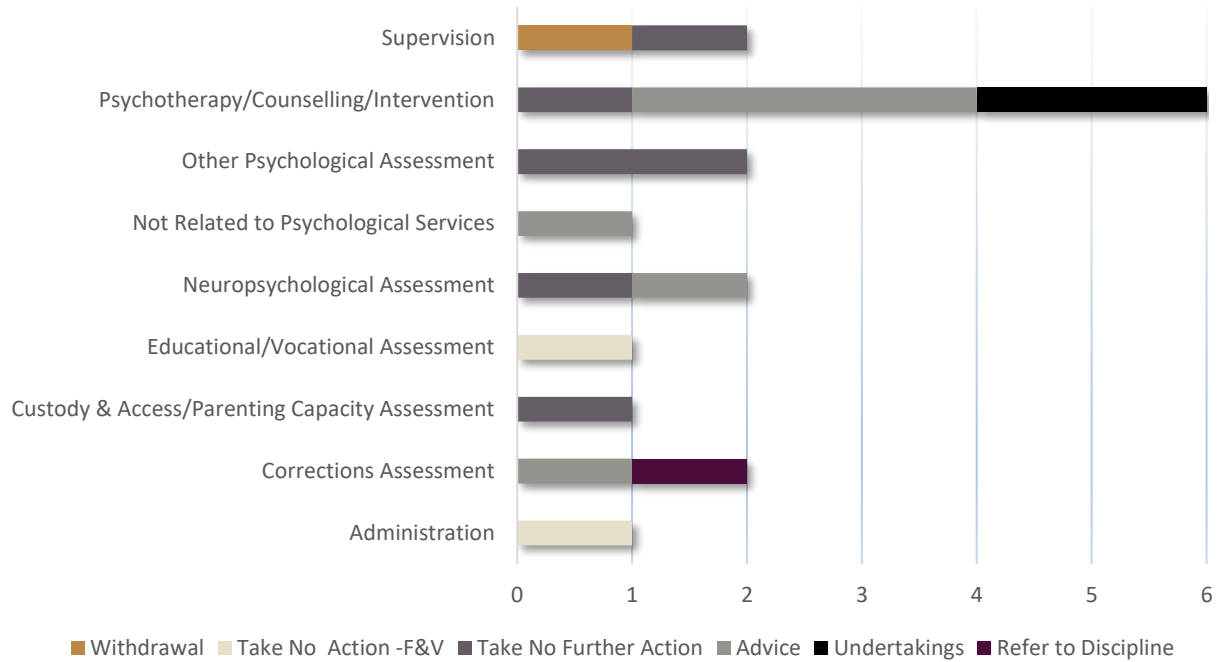
ICRC Dispositions

The ICRC disposed of 18 cases during the 1st Quarter, as follows. The ICRC took some remedial action, ranging from providing advice to a referral to the Discipline Committee, in 9, or 50%, of these cases:



*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.

The dispositions of these 18 cases, as they relate to nature of service, are as follows:



Disposition of Allegations

The 18 cases disposed of included the consideration of 50 allegations. The ICRC took some remedial action with respect to 24, or 48%, of these allegations.



Health Professions Appeal and Review Board (HPARB)

In the 1st Quarter, two HPARB reviews of ICRC decisions were requested. The College received seven HPARB decision, all confirming ICRC decisions.

SUBMITTED BY

Melanie Morrow, M.A., C.Psych.Assoc., Chair



BRIEFING NOTE

2022.03.04E

SEPTEMBER 2022 COUNCIL MEETING

ANNUAL REPORTS 2021-2022

STRATEGIC DIRECTION REFLECTION

Advancing the Council's governance practices

MOTION FOR CONSIDERATION

That the 2021-2022 Annual Reports for the College's statutory and non-statutory Committees and Working Groups be approved.

Moved By TBD

ATTACHMENTS

Annual Reports for:

- Council
- Executive Committee
- Registration Committee
- Inquiries, Complaints and Reports Committee
- Discipline Committee
- Quality Assurance Committee
- Client Relations Committee
- Fitness to Practice Committee
- Jurisprudence and Ethics Examination Committee
- ABA Working Group
- Equity, Diversity, and Inclusion Working Group

CONTACT FOR QUESTIONS

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

Registrar & Executive Director



REPORT TO COUNCIL

2022.03.04E

ANNUAL REPORT 2021-2022

COUNCIL

COUNCIL MEMBERS

Wanda Towers, President	Electoral District 3 (Central)
Marjory Phillips, Vice-President	District 8 (Academic)
Paula Conforti	Electoral District 7 (Psychological Associates)
Graeme Goebelle	Public Member (to December 12, 2021)
Joyce Isbitsky	Electoral District 1 (North)
Marilyn Keyes	Electoral District 4 (East)
Carolyn Kolers	Public Member (from March 24, 2022)
David Kurzman	Electoral District 5 (GTA East)
Archie Kwan	Electoral District 6 (GTA West)
Ilia Maor	Public Member (from July 8, 2021)
Nadia Mocan	Public Member
Melanie Morrow	Non-Voting Psychological Associate
Cenobar Parker	Public Member (from March 4, 2022)
Adrienne Perry	District 8 (Academic)
Philip Ricciardi	Electoral District 2 (Southwest)
Paul Stopciati	Public Member
Nancy Tkachuk	Public Member (to September 2, 2021)
Esther Vlessing	Public Member (from December 22, 2021)
Scott Warnock	Public Member

COLLEGE STAFF SUPPORT

Rick Morris, Registrar & Executive Director
Caitlin O'Kelly, Assistant to the Registrar

INTRODUCTION

The Council is the Board of Directors of the College of Psychologists of Ontario and, as set out in statute, is responsible for managing and administering the affairs of the College.¹ This report covers the fiscal year June 1, 2021 to May 31, 2022. All meetings of the College Council were held virtually and livestreamed to allow them to be open to public.

ACTIVITIES

Policies

Council considered the current policies scheduled for review and approved amendments to the following:

- *Policy II-3(i): ICRC Terms of Reference/Role*
- *Policy II-3(ii): Release of Member's Response to Complainant*
- *Policy II-3(iv): Responding to Requests for Extensions to Make Written Submissions*

¹(s. 4. Health Professions Procedural Code being Schedule 2 of the [Regulated Health Professions Act, 1991](#))

- *Policy I-14: Complaints and Indemnification – College Agents and Staff*
- *Policy II-2(v): Alternative Documentation Guideline*
- *Policy II-5(iii): Quality Assurance Requirements for Members with a Certificate of Registration for Interim Autonomous*

In addition, Council approved 1 new policy:

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

By-Laws

Council approved amendments to *By-law 5: Selection of Committee Chairs and Committee Members* and *By-law 20: Election to Council, Qualifications, Terms of Office, and Conditions for Disqualification*, following consultation with the membership. These amendments were necessary to meet the expectations set out in the College Performance Management Framework (CPMF). The amendments require members to participate in an orientation prior to submitting their nomination to run for Council. It also establishes a one-year cooling off period between a member's participation on the leadership of a psychology professional association and running for election to the College Council.

Standards of Professional Conduct, 2017

Council amended *Standard 6. Representation of Services of the Standards of Professional Conduct, 2017*, specifically 6.1.d. and 6.1.e., to indicate that the Registrar, on behalf of the College, is authorized to approve changes to a member's listing of their highest academic degree in situations where no other avenue for approval is available.

Business

Council received quarterly reports and annual reports from the statutory and non-statutory Committees.

Council approved the creation of a Council Evaluation Form to be completed by Council members following each meeting. The Evaluation is to assess the effectiveness of Council meetings with an ongoing focus on continuous improvement. It reflects the Council's commitment to an accountable, transparent, and an open process of engagement, evaluation, and constructive dialogue.

Council approved the *College Performance Management Framework Report* for submission to the Ministry of Health and posting on the College website.

Financial

Council appointed signing officers for the year, received quarterly financial statements, approved the audited financial statements for the fiscal year ending May 31, 2021, and appointed the auditors for the upcoming year. In March 2022, the Council approved the annual budget for 2022-2023.

The need to increase membership fees was considered and a decision made to maintain the current fee structure. It was noted that College membership fees have not increased since 2002. The College established a Fee Stabilization Reserve Fund to be used to offset the need for a fee increase in order to cover any operating deficit.

REPORT TO COUNCIL

2022.03.04E

ANNUAL REPORT 2021-2022

EXECUTIVE COMMITTEE

COMMITTEE MEMBERS

Wanda Towers, President	Professional Member of Council
Marjory Phillips, Vice-President	Professional Member of Council
Paula Conforti	Professional Member of Council
Philip Ricciardi	Professional Member of Council
Paul Stopciati	Public Member of Council
Scott Warnock	Public Member of Council

COLLEGE STAFF SUPPORT

Rick Morris, Registrar & Executive Director
Caitlin O’Kelly, Assistant to the Registrar

INTRODUCTION

The Executive Committee of the College of Psychologists of Ontario is elected from, and by, the members of the College Council. Its role is to monitor and coordinate the work of the College Committees and ensure that Council has all the pertinent information it requires for effective decision-making. The Executive Committee held eight regular meetings during 2021-2022.

ACTIVITIES

Following their election at the Council meeting of June 18, 2021, the Executive Committee met to appoint members of Council and professional members of the College to the six statutory Committees and the two non-statutory Committees; Jurisprudence and Ethics Examination, and Finance and Audit.

The Executive Committee reviewed implementation of the Strategic Direction 2017-2022, monitored the progress of various College initiatives, and brought policy issues to the attention of Council for consideration. The Executive, in conjunction with the Finance and Audit Committee, met with the College Auditors to review the draft *Audited Financial Statements for 2020-2021* in preparation for presentation to Council. As well, following a review by the Finance and Audit Committee, the Executive considered the draft 2022-2023 budget and recommended its approval to Council.

A variety of issues or topics were discussed by the Executive Committee including:

- Quarterly review of the telepsychology provisions put in place to facilitate practice by out-of-province practitioners for Ontario clients impacted by COVID-19;
- Consideration and approval of the College Performance Management Framework (CPMF)
- Discussion of the performance review process for the Registrar & Executive Director
- Equity, Diversity and Inclusion Training for Council and Committees;
- Equity, Diversity, and Inclusion Working Group Terms of Reference/Role
- Hiring of a ABA Regulation - Project Lead to facilitate the development of ABA regulation

- Hiring of a project researcher to develop a report to further Council’s decision to close master’s level registration.
- Approval process for changes to a member’s listing of their highest academic degree
- Expansion of eligibility for granting a Time-Limited Interim Autonomous Certificate of Registration
- Council Evaluation of Meeting Effectiveness
- Amendments to By-Law 20: Election to Council
- A proposed Alternative Documentation Guideline to permit the acceptable of alternate registration documentation when the originals cannot be obtained by the applicant
- Quality Assurance requirements for members with Certificates of Registration for Interim Autonomous Practice
- Governance reform proposals and the impacts of Bill 106, *Pandemic Emergency Preparedness Act, 2022*
- Appointment of Behaviour Analysts to the College Council as transitional, non-voting members
- Creation of a new policy; *Succession Plan for the Position of Registrar & Executive Director*

The President and the Registrar & Executive Director represented the College at meetings of the Association of Canadian Psychology Regulatory Organizations (ACPRO) and the President, Registrar & Executive Director and Deputy Registrar attended the annual and mid-year meetings of the Association of State and Provincial Psychology Boards (ASPPB).



REPORT TO COUNCIL

2022.03.04E

ANNUAL REPORT 2021-2022

REGISTRATION COMMITTEE

COMMITTEE MEMBERS

Adrienne Perry (Co-Chair),	Council Member
Marjory Phillips, (Co-Chair),	Council Member
Mark Coates,	College Member
Paula Klim-Conforti,	Council Member
Samantha Longman-Mills,	College Member
Nadia Mocan,	Public Member
Paolo Pires,	College Member
Philip Ricciardi,	Council Member
Paul Stopciati,	Public Member
Sheila Tervit,	College Member

COLLEGE STAFF SUPPORT

Lesia Mackanyn, Director: Registration	Deneika Greco, Registration Assistant
Myra Veluz, Senior Registration Assistant	Shannon Elliott, Registration Assistant
Janine Persaud, Registration Assistant	Emily Sarmento, Registration Assistant

INTRODUCTION

The primary role of the Registration Committee is to:

- (1) review all applications for registration of Psychologists and Psychological Associates referred by the Registrar & Executive Director, at all steps in the registration or appeals process, and to make individual registration decisions;
- (2) review applications under section 19 of the *Regulated Health Professions Act, 1991 (RHPA)* for removal or modification of a term, condition or limitation;
- (3) review applications for change of area of practice or change of status for autonomous practice members; and
- (4) recommend registration policy and procedures consistent with the *RHPA*, with *Ontario Regulation 74/15, Registration*, with applicable federal/provincial agreements such as the amended *Canadian Free Trade Agreement (CFTA)* and the *Ontario Labour Mobility Act, 2009*, or international agreements such as the Association of State and Provincial Psychology Board's (ASPPB) Reciprocity Agreement.

ACTIVITIES

Meetings

The Registration Committee is comprised of two panels which meet to consider and review individual cases. Each panel met six times. In addition, the full Committee met in plenary sessions on six occasions to consider a variety of broader policy issues.

Panel Deliberations

All cases referred by the Registrar & Executive Director to the Registration Committee require thorough preliminary staff review with multiple interactions between the applicants and staff. Many cases require multiple reviews by a panel of the Registration Committee during the period of supervised practice and for approval to participate in the oral examination. In some instances, where the decision is not favorable to the applicant, appeals are made to the Health Professions Appeal and Review Board (HPARB).

Results of Plenary Deliberations

The Committee reviewed decisions and recommendations of the Health Professions Appeal and Review Board (HPARB). A sub-committee completed its work on revising the College’s *Supervision Resource Manual* so that it aligns with the College’s *Standards of Professional Conduct* and reflects best practices in supervision. The Committee continues its work on reviewing the College’s Oral Examinations and developed a rubric for evaluating competency in the Controlled Act of Diagnosis. Through its *Work Plan* the Committee noted future projects and tasks looking ahead to its 2022-23 Term.

Summary of Registration Activities For 2021-2022

Applications Received by the College: June 1, 2021 to May 31, 2022

Applications for a certificate authorizing Supervised Practice:

Title	Academic Credentials from Ontario Universities	Academic Credentials from Universities elsewhere in Canada	Academic Credentials from Universities in the U.S.	International Academic Credentials other than the U.S.	Total
Psychological Associate	55	1	9	40	105
Psychologist	69	9	16	11	105
Total	124	10	25	51	210

Supervised Practice Applications: Comparisons by Year

Title	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22
Psychological Associate	60	67	65	53	77	66	98	75	91	105
Psychologist	101	143	131	120	122	131	120	118	147	105
Total	161	210	196	173	199	197	218	193	238	210

Interim Autonomous/Autonomous Practice Applications

Temporary Interim Autonomous Practice Applications

The College received **21** applications for a certificate authorizing interim autonomous practice (temporary) from out of province psychologists to register to provide services to an existing client located in Ontario for a period of up to 12 months.

From Other Canadian Jurisdictions

The College received **125** applications for certificates authorizing autonomous practice/interim autonomous practice from Canadian Labor Mobility applicants already registered to practice psychology in another Canadian jurisdiction.

From USA

The College received **2** applications for certificates authorizing interim autonomous practice from psychologists already licensed to practice in the USA.

From Ontario

The College received **15** applications from Psychological Associates currently registered with the College of Psychologists of Ontario to be registered for the title Psychologist based upon their registration as a psychologist (master’s level) in another Canadian jurisdiction.

Certificates of Registration Issued by the College: June 1, 2021 to May 31, 2022

Certificates Authorizing Supervised Practice Issued: June 1, 2021 to May 31, 2022

Title	Academic Credentials from Ontario Universities	Academic Credentials from Universities elsewhere in Canada	Academic Credentials from Universities in the U.S.	International Academic Credentials other than the U.S.	Total
Psychological Associate	19	7	7	8	41
Psychologist	79	10	19	10	118
Total	98	17	26	18	159

Certificates Authorizing Interim Autonomous Practice Issued: June 1, 2021 to May 31, 2022

Title	Academic Credentials from Ontario Universities	Academic Credentials from Universities elsewhere in Canada	Academic Credentials from Universities in the U.S.	International Academic Credentials other than the U.S.	Total
Psychological Associate	0	0	0	0	0
Psychologist	25	93	32	13	163
Total	25	93	32	13	163

Certificates Authorizing Autonomous Practice Issued: June 1, 2021 to May 31, 2022

Title	Academic Credentials from Ontario Universities	Academic Credentials from Universities elsewhere in Canada	Academic Credentials from Universities in the U.S.	International Academic Credentials other than the U.S.	Total
Psychological Associate	11	6	2	9	28
Psychologist	112	83	34	15	244
Total	123	89	36	24	272

College Examinations: Comparisons by Year**Examination for Professional Practice in Psychology (EPPP)**

	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22
Applications approved by the College & submitted to ASPPB	203	176	180	184	194	164	187	160	189	155
Scores received from ASPPB	179	143	190	175	187	155	191	147	190	166

Jurisprudence & Ethics Examination

Exam Session	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22
Fall	79	81	75	96	92	90	108	104	93	122
Spring	90	103	96	93	113	114	129	152	119	153
Total for year	169	184	171	189	205	204	237	256	212	265

Oral Examinations June 2021 and December 2021

Exam Session	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
June	47	77	59	53	66	62	62	44	49*	54
December	85	69	97	89	67	67	89	85	96	87
Total for year	132	146	156	142	133	129	151	129	145	141

* 8 exams were completed in October 2020

Registration Interviews: June 1, 2021 to May 31, 2022
 (these include mobility, term/condition/limitation, or change of area)

Title	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22
Psychological Associate	4	4	4	1	0	1	2	0	1	1
Psychologist	11	7	13	12	13	11	13	9	15	9
Total for the year	15	11	17	13	13	12	15	9	16	10

Supervised Practice Applicants Referred to Registration Committee for Training Plans (Initial Referral)
June 1, 2021 to May 31, 2022

Title	Academic Credentials from Ontario Universities	Academic Credentials from Universities elsewhere in Canada	Academic Credentials from Universities in the U.S.	International Academic Credentials other than the U.S.	Total
Psychological Associate	20	2	3	9	34
Psychologist	20	4	7	5	36
Total for the year	40	6	10	14	70

Supervised Practice Applications Refused
June 1, 2021 o May 31, 2022

Title	Academic Credentials from Ontario Universities	Academic Credentials from Universities elsewhere in Canada	Academic Credentials from Universities in the U.S.	International Academic Credentials other than the U.S.	Total
Psychological Associate	6	8	9	9	32
Psychologist	1	0	4	6	11
Total for the year	7	8	13	15	43



REPORT TO COUNCIL

2022.03.04E

ANNUAL REPORT 2021-2022

INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

COMMITTEE MEMBERS:

Melanie Morrow, Chair	College
Scott Warnock, Vice-Chair	Public Member
Jason Brown	College
Tanaya Chatterjee	College
David Gold	College
Allyson Harrison	College
Joyce Isbitsky	Council
Marilyn Keyes	Council
Archie Kwan	Council
Ilia Maor	Public Member (from July 8, 2021)
Denise Milovan	College
Ian Nicholson	College
Jasmine Peterson	College
Rana Pishva	College
Naomi Sankar-DeLeeuw	College
Fred Schmidt	College
Laura Spiller	College
Paul Stopciati	Public Member
Nancy Tkachuk	Public Member (to September 2, 2021)
Wanda Towers	Council
Scott Warnock	Public Member

COLLEGE STAFF SUPPORT

Zimra Yetnikoff, Director, Investigations and Hearings
 Mona McTague, Case Manager, Investigations and Resolutions
 Nina Modi, Case Manager, Investigations and Resolutions
 Graedon Pfeiffer, Case Manager, Investigations and Resolutions
 Lee-Ann Siu, Case Manager, Investigations and Resolutions
 Annie Song, Case Manager, Investigations and Resolutions
 H el ene Th eberge, Senior Administrative Assistant, Investigations and Hearings
 Jennifer Taylor, Administrative Assistant, Investigations and Hearings

INTRODUCTION

The Inquiries, Complaints and Reports Committee (ICRC) is responsible for investigating matters regarding members' conduct and competence. It is also responsible for inquiries into whether a member may be incapacitated. As required by law, every matter is considered by a panel of the ICRC. A panel is composed of one public and two professional members. Public members are appointed to the College by the Lieutenant Governor in Council.

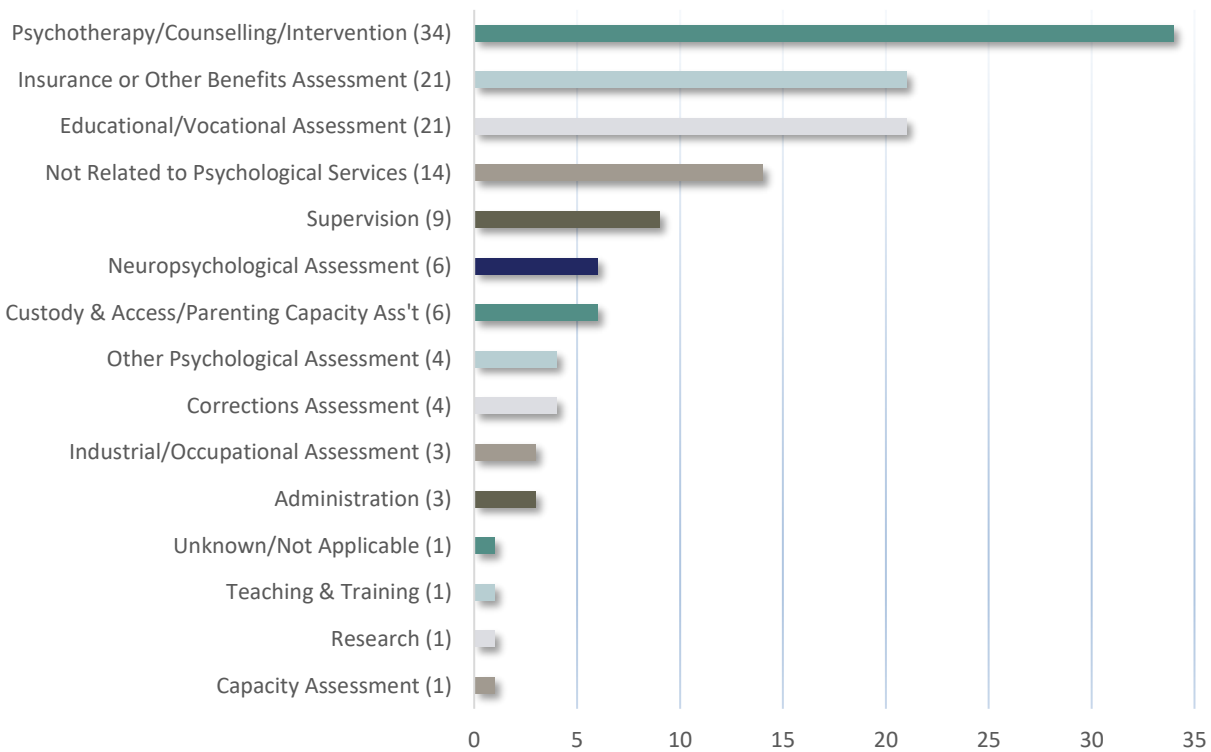
A panel decides how to proceed after considering all the relevant information in a matter. This can range from taking no further action to referring the matter to the Discipline Committee. In some cases, the panel may decide that remediation is appropriate, which can include advice or a program of continuing education. Every decision includes reasons, except if the decision is to refer the matter to the Fitness to Practice or Discipline Committees.

A party to a complaint may request that the Health Professions Appeal and Review Board (HPARB) review an ICRC decision. HPARB will consider whether the ICRC’s investigation was adequate and its decision reasonable.

Investigation staff also engage with matters that do not become formal complaints or reports. For example, the College investigates non-members who may be holding themselves out as Psychologists or Psychological Associates or inappropriately using the titles “Psychologist” or “Doctor.”

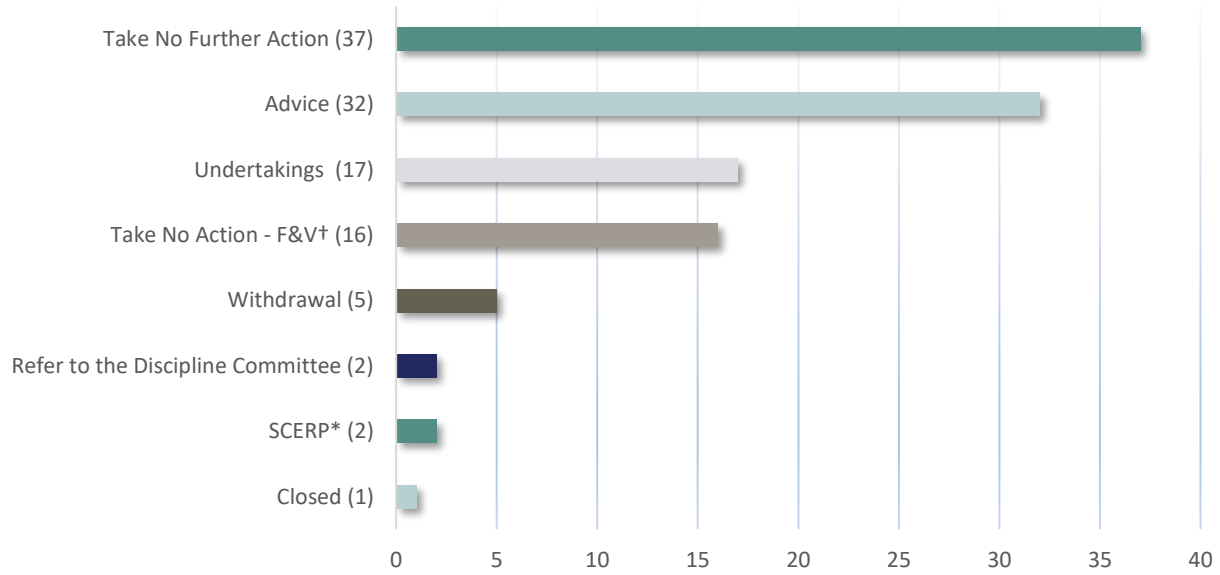
NEW MATTERS

During the 2020-2021 fiscal year the College initiated the investigation of 121 complaints, six Registrar’s Investigations, and two Health Inquiries, for a total of 129 new matters. These matters related to the following areas of practice.



DISPOSITIONS

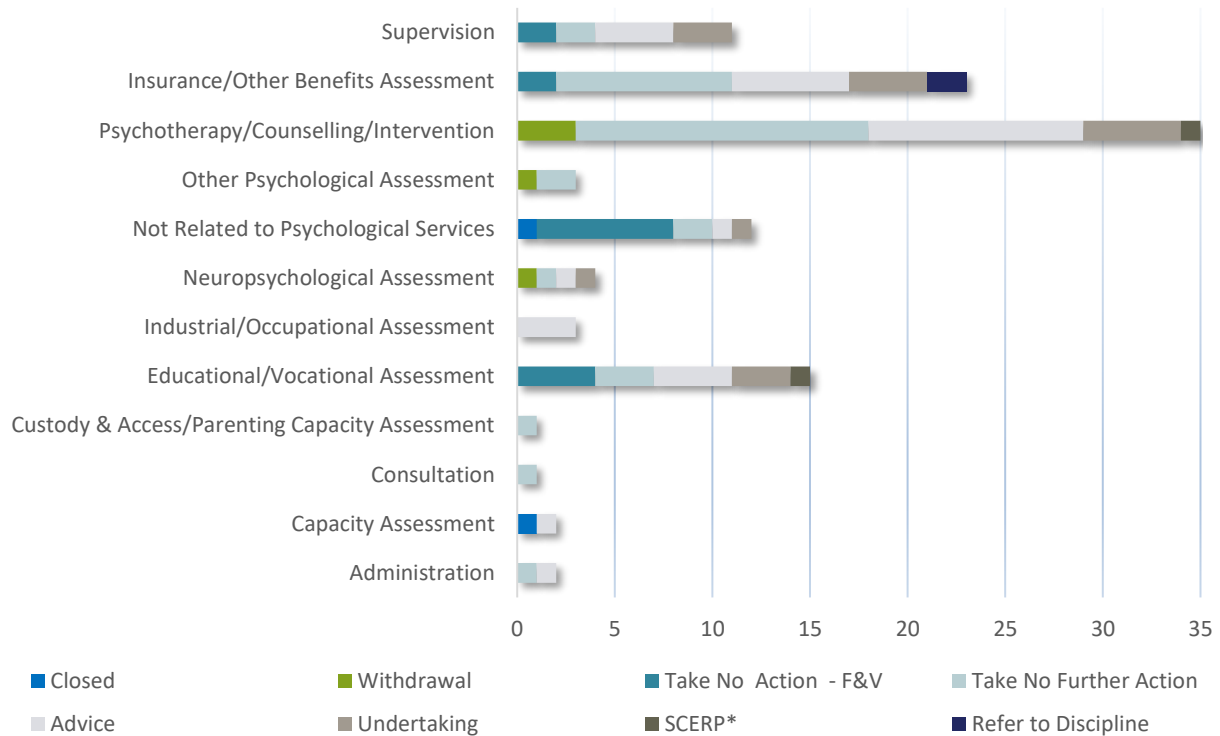
The ICRC disposed of 112 cases in the 2021-2022 fiscal year. The ICRC took some action in 53 (47%) of these cases, ranging from providing Advice to referring matters to the Discipline Committee. While multiple dispositions may be reached in any given case, the most serious disposition for each case is represented.



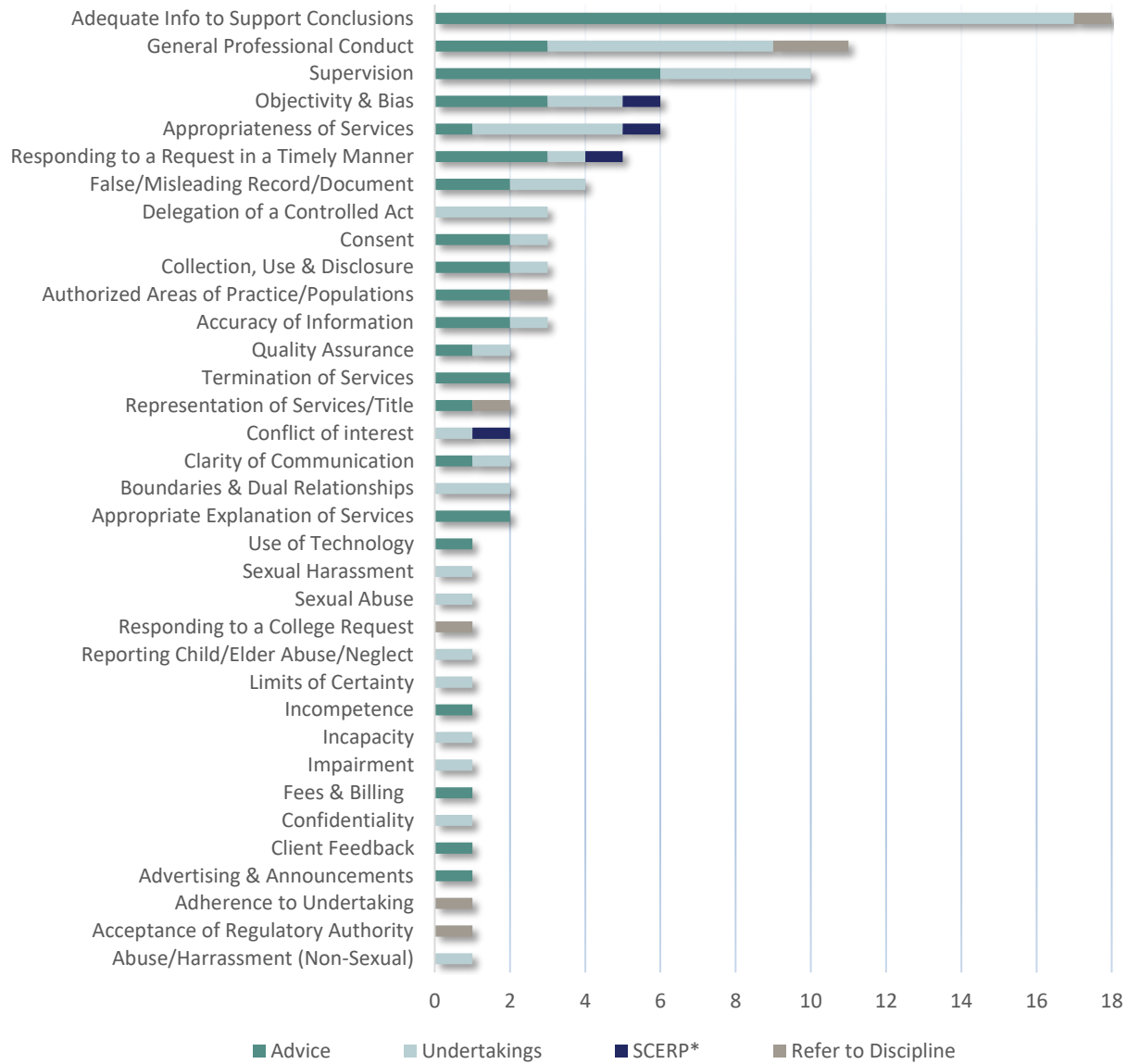
†F&V: Frivolous, vexatious, made in bad faith, moot or otherwise an abuse of process, pursuant to s.26(4) of the Health Professions Procedural Code

*SCERP: Specified Continuing Education or Remediation Program

The dispositions of these 112 cases related to the following nature of services:



The disposition of these 112 cases involved the consideration of 315 allegations, as many complaints involve multiple allegations. The ICRC took action with respect to 105 (33%) of these allegations.



HEALTH PROFESSIONS APPEAL AND REVIEW BOARD (HPARB)

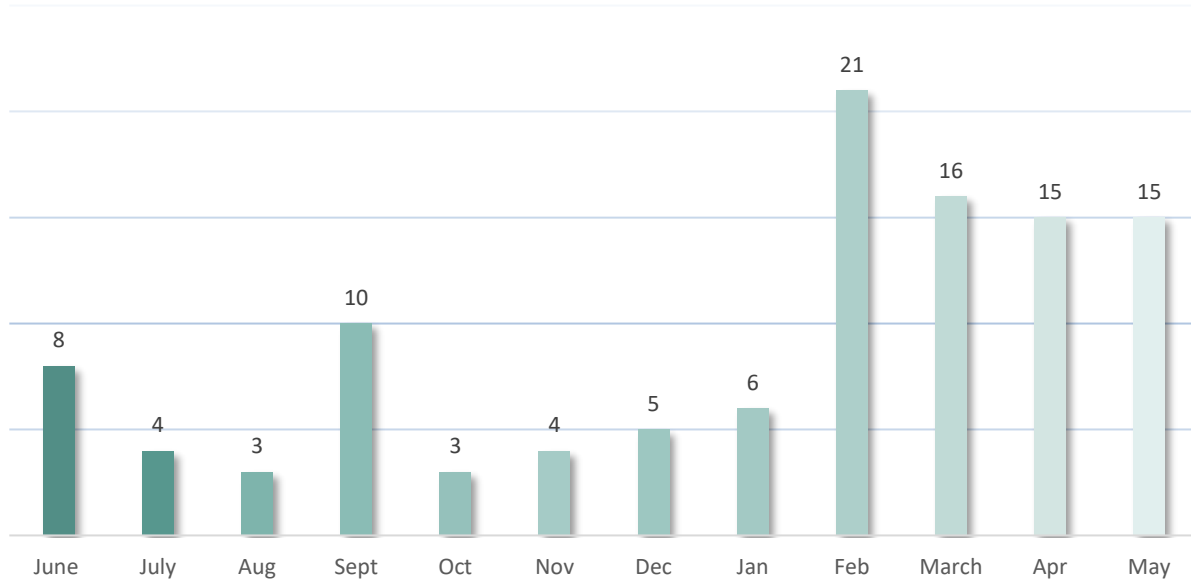
There were 17 requests by complainants and/or members for HPARB reviews of ICRC decisions in the 2021-2022 fiscal year. HPARB considers whether the ICRC’s investigations were adequate and if the ICRC’s decisions were reasonable. HPARB issued 16 Decisions, including those for reviews requested in previous years. Twelve of these decisions were confirmed, two requests for review were withdrawn, and one was dismissed by HPARB as being frivolous, vexatious, made in bad faith, moot or otherwise an abuse of process. HPARB returned one matter to the ICRC for inadequate investigation.

INQUIRIES

Investigations and resolutions staff fielded 110 general inquiries by telephone and email in the 2021-2022 fiscal year. These inquiries included questions about professional conduct and how to submit a complaint

or report, issues regarding access to information, and information regarding people who may be inappropriately holding themselves out as authorized to practice psychology in Ontario.

The inquiries were distributed throughout the year as follows:



Of the 110 inquiries received, 25 (23%), became some kind of investigation in the same fiscal year. An additional 16 current matters are related to inquiries made in previous fiscal years.



During the 2021-2022 fiscal year the Registrar initiated inquiries into 41 new matters. These include matters referred to the Registrar for further inquiry by the ICRC, as well as mandatory reports to the College.

In making inquiries, the Registrar can consider whether there are reasonable and probable grounds to believe that a member has committed an act of professional misconduct or is incompetent. If so, the Registrar may appoint an Investigator to investigate the matter on a formal basis. Six of these inquiries became formal Registrar's Investigations in the 2021-2022 fiscal year.

The Registrar also closed 53 inquiries in the 2021-2022 fiscal year without appointing an Investigator. The Registrar may close an inquiry if further investigation is unnecessary. For example, the College may receive a mandatory report about a matter that is under investigation through the complaints process. In such a case, the mandatory report matter may be closed. In closing these inquiries, the Registrar may also provide the member with some guidance.

UNAUTHORIZED PRACTICE INVESTIGATIONS

In the 2021-2022 fiscal year, the College opened 40 and closed 48 Unauthorized Practice cases. These cases relate to unregistered individuals who may be holding themselves out as authorized to practice psychology in Ontario. This includes inappropriate use of the titles “Doctor” and “Psychologist.” The College also investigates unauthorized performance of controlled acts, including the communication of a diagnosis.



REPORT TO COUNCIL

2022.03.04E

ANNUAL REPORT 2021-2022

DISCIPLINE COMMITTEE

COMMITTEE MEMBERS

Marilyn Keyes, Chair	Council
Janice Currie, Co-Vice-Chair	Council
Sara Hagstrom, Co-Vice-Chair	College
Gilles Boulais	College
Paula Conforti	Council
Lynette Eulette	College
Robert Gauthier	College
Graeme Goebelle	Public Member (to December 12, 2021)
Michael Grand	Council
Anthony Hopley	College
Joyce Isbitsky	Council
Sandra Jackson	College
David Kurzman	Council
Archie Kwan	Council
Maggie Mamen	College
Ilia Maor	Public Member (from July 8, 2021)
Nadia Mocan	Public Member
Melanie Morrow	College
Mary Ann Mountain	College
Tisha Ornstein	College
Adrienne Perry	Council
Marjory Phillips	Council
Paul Stopciati	Public Member
Nancy Tkachuk	Public Member (to September 2, 2021)
Wanda Towers	Council
Scott Warnock	Public Member

COLLEGE STAFF SUPPORT

Zimra Yetnikoff, Director, Investigations and Hearings

Hélène Théberge, Senior Administrative Assistant, Investigations and Hearings

INTRODUCTION

The Discipline Committee conducts Hearings into allegations of professional misconduct and incompetence, referred by the Inquiries, Complaints and Reports Committee. The Committee is also responsible for holding Hearings of applications for the reinstatement of a Certificate of Registration which had been revoked as a result of a disciplinary proceeding.

HEARINGS

Three Hearings took place during the 2021-2022 fiscal year:

1. **Dr. Martin Rovers:** A Hearing was held in this matter on June 29, 2021 and August 27, 2021.
https://members.cpo.on.ca/public_register/show/3067
2. **Dr. Darren Schmidt:** A Hearing was held in this matter on August 25, 2021.
https://members.cpo.on.ca/public_register/show/21702
3. **Dr. Augustine Meier:** A hearing was held on November 25, 2021.
https://members.cpo.on.ca/public_register/show/1032

REFERRALS

Two matters were referred to the Discipline Committee in the 2021-2022 fiscal year:

1. **Dr. Romeo Vitelli:** https://members.cpo.on.ca/public_register/show/1461

A referral was made to the Discipline with the ICRC Decision sent to Dr. Vitelli on March 24, 2022. The pre-hearing in this matter is scheduled for September 16, 2022.

1. **Dr. Darren Schmidt:** https://members.cpo.on.ca/public_register/show/21702

A referral was made to the Discipline Committee with the ICRC Decision sent to the parties on December 2, 2021. The hearing is scheduled for October 3, 4, 6 and 7, 2022.

ONGOING MATTERS

1. **Dr. André Dessaulles :** https://members.cpo.on.ca/public_register/show/2530

A referral was made to the Discipline Committee on January 21, 2021. A motion was heard on June 20 and 23, 2022, and the motion is scheduled to continue November 7 and 8, 2022. The hearing has not yet been scheduled.

REPORT TO COUNCIL

2022.03.04E

ANNUAL REPORT 2021-2022

QUALITY ASSURANCE COMMITTEE

COMMITTEE MEMBERS

Michael Minden, Chair	College
Joyce Isbitsky	Council
David Kurzman	Council
Ilia Maor	Public Member
Nadia Mocan	Public Member
David Howard	College
Sabrina Hassan	College
Kate Green	College

COLLEGE STAFF SUPPORT

Barry Gang, Deputy Registrar and Director, Professional Affairs
 Madeleine Lee, Quality Assurance Coordinator
 David Fierro, Administrative Assistant, Member Services

INTRODUCTION

The Health Professions Procedural Code, being Schedule 2 of the *Regulated Health Professions Act, 1991 (RHPA)* requires that the College of Psychologists establish a Quality Assurance Program. A Quality Assurance Program is defined as “a program to assure the quality of the practice of the profession and to promote the continuing competence among the members”. The Quality Assurance Committee has the statutory responsibility for the development and implementation of the College’s Quality Assurance Program.

SELF-ASSESSMENT GUIDE AND CONTINUING PROFESSIONAL DEVELOPMENT PLAN

Every member of the College is required to undertake a self-review and set new professional development goals every other year. This is done through the completion of the Self-Assessment Guide (SAG) and Continuing Professional Development (CPD) Plan. Members with even registration numbers complete the self-assessment process in the even-numbered years and those with odd registration numbers do so in the odd-numbered years. Members holding Certificates of Registration Authorizing Supervised Practice or Interim Autonomous Practice are required to complete the SAG and CPD Plan each year. This requirement also applies to members who have chosen to move to Inactive status as it is anticipated that they will be returning to Active status. Inactive status members are required to take steps to remain current in their areas of competence during their inactive period and to document this in the SAG and CPD Plan.

Summary of Self-Assessment Information

SAG Declarations of Completion due in 2021	2306
Members who did not make a Declaration of Completion when due and were required to submit their full, completed SAG to the Quality Assurance Committee for review	24
SAG Reviews Carried Over from Previous Cycles	4
Exemptions Due to Retirement/ Deferrals Granted Due to Exceptional Circumstances	6
SAG reviews completed	21
• SAGs deemed to have been completed appropriately:	13
• Members provided with remedial feedback:	5
• Referral to an Assessor under s. 81 of the Health Professions Procedural Code:	1
• Referral to Inquiries, Complaints and Reports Committee (ICRC):	2
SAG reviews carried over to 2022-2023	1

PEER ASSISTED REVIEWS

The Peer Assisted Review (PAR) is a review of a member's practice conducted by two other members of the College. Annually, the College selects members to participate in the PAR process. Members of the College may be selected by random selection or stratified random selection or due to their failure to comply with the requirement to complete the SAG.

COVID-19 restrictions prevented the occurrence of most of the PAR's planned for this year. The voluntary option of remote participation was offered to those who had begun to plan for a PAR at the beginning of the pandemic. A few members decided to participate in the PAR remotely.

Summary of Peer Assisted Review Information

Total Reviews Planned for 2021-2022	73
Exemption Granted following Resignation/Retirement:	3
PARs Conducted in Total (All members met requirements):	9
PARs Carried Over to 2022-2023	61

MANDATORY CONTINUING PROFESSIONAL DEVELOPMENT PROGRAM

Every member of the College, except those with a Retired Class of Certificate of Registration, is required to satisfy the requirements of the Continuing Professional Development (CPD) Program. The mandatory CPD Program is designed to:

- promote continuing competence and continuing quality improvement among members;
- remedy gaps in knowledge and skills identified in members' self-assessment;
- address changes in practice environments; and
- incorporate standards of practice and advances in technology.

The Mandatory CPD Program permits members to undertake continuing professional development and continuing education in a variety of ways as best suits their learning styles and needs.

Members are required to satisfy the minimum requirements of the program at the end of every two-year CPD cycle.

Summary of Continuing Professional Development Information

Declarations of Completion for CPD due in 2021	2245
Members subject to CPD audit for failing to make Declaration when due	14

Continuing Professional Development Program Audits

Members selected for auditing either because they failed to declare completion of all CPD requirements by the due date or through a process of random selection, including those carried over from previous years	50
Members Referred to Inquiries, Complaints and Reports Committee for lack of compliance/cooperation with QA Programs:	3
Audits completed	46
<ul style="list-style-type: none"> Members found to have met requirements: 	33
<ul style="list-style-type: none"> Members receiving remedial feedback: 	13
Audits Ongoing/Outstanding for 2022-2023	1

The Quality Assurance Committee conducts ongoing reviews of the various components of the College’s Quality Assurance Program in an effort to continuously to look for ways to enhance its value to the membership.

During 2021-22, the Committee:

- Reviewed the CPD Credit requirements and simplified the Continuing Professional Development credit category limits;
- Added a section to the Self-Assessment Guide requiring members to reflect on their Equity, Diversity and Inclusion related practices;
- Decided to require members to obtain at least five of the required 50 credits per two-year CPD cycle in activities related to Equity, Diversity and Inclusion;
- Decided that in-person Peer Assisted Reviews, which had been postponed until pandemic-related physical distancing measures could be relaxed, could no longer be justified in the public interest, and that members be required to participate in virtual reviews, with the proviso that individual requests for deferral would be considered on a case-by-case basis and that members would be invited to request technical assistance from College staff; and
- Decided that members with a Certificate of Registration for Interim Autonomous Practice, who are regulated psychological service providers in other Provinces, and who are in compliance with Self-Assessment and Continuing Professional Development requirements in their home jurisdictions will be considered to have satisfied the Ontario requirements.

REPORT TO COUNCIL

2022.03.04E

ANNUAL REPORT 2021-2022

CLIENT RELATIONS COMMITTEE

COMMITTEE MEMBERS:

Kofi Belfon, Chair	College
Archie Kwan, Vice Chair	Council
Adrienne Perry	Council
Graeme Goebelle	Public Member (to December 12, 2021)
Nadia Mocan	Public Member
Melanie Morrow	College
Rosemary Barnes	College
Lana Stermac	College
Esther Vlessing	Public Member

COLLEGE STAFF SUPPORT

Barry Gang, Deputy Registrar and Director, Professional Affairs
Julie Hahn, Practice Advisor and Client Relations Coordinator

INTRODUCTION

The College has a statutory obligation to have a Patient Relations Committee whose mandate is to enhance relations between members and their clients. This Committee is referred to as the Client Relations Committee at the College of Psychologists of Ontario.

The Code outlines some specific responsibilities for the Committee with respect to sexual abuse prevention while allowing the Committee to address a broader spectrum of client-member topics.

ACTIVITIES

Funding for Therapy and Counselling

The Client Relations Committee administers the Funding for Therapy and Counselling program under section 85.7 of the Health Professions Procedural Code being schedule 2 of the *Regulated Health Professions Act, 1991*. During 2021-2022, the College continued to provide funding for therapy and counselling to three (3) individuals approved in previous years and deemed five (5) additional individuals to be eligible for funding. A total of eight (8) individuals are currently receiving funding for therapy or counselling. The Committee developed, and has begun to utilize, a satisfaction survey for applicants for the College's program for funding of therapy or counselling.

Other Activities

The Committee completed an educational document entitled [Sexual Behavior or Remarks of a Sexual Nature Towards Patients](#). This document addresses sexual abuse occurring in the form of sexual behaviour or remarks not clinically appropriate to the services provided.

The Committee continues to consider matters related to Equity, Diversity, and Inclusion within the profession. This important work is ongoing.



REPORT TO COUNCIL

2022.03.04D

ANNUAL REPORT 2021-2022

FITNESS TO PRACTICE COMMITTEE

COMMITTEE MEMBERS

Philip Ricciardi, Chair	Council
Paula Conforti	Council
Graeme Goebelle	Public Member
Julie Goldenson	College
Mark Watson	College

COLLEGE STAFF SUPPORT

Zimra Yetnikoff, Director, Investigations and Hearings
Jennifer Taylor, Administrative Assistant: Investigations and Hearings

INTRODUCTION

The role of the Fitness to Practice Committee is to conduct hearings in matters referred by the Inquiries, Complaints and Reports Committee concerning the alleged incapacity of a member. The Committee is also responsible for hearing applications for reinstatement by members whose certificate of registration was revoked following incapacity proceedings.

ACTIONS

The Committee did not receive any referrals or conduct any hearings this year.



REPORT TO COUNCIL

2022.03.04E

ANNUAL REPORT 2021-2022

JURISPRUDENCE AND ETHICS EXAMINATION COMMITTEE

COMMITTEE MEMBERS

Mary Ann Mountain	College Member
Paula Conforti	Council Member
Audrey Cooley	College Member
Donna Ferguson	College Member
Tae Hart	College Member
Gilles Hebert	College Member
Pierre Ritchie	College Member
Carole Sinclair	College Member
Angela Troyer	College Member
Scott Warnock	Public Member

COLLEGE STAFF SUPPORT

Rick Morris, Registrar & Executive Director
Lesia Mackanyn, Director, Registration
Caitlin O'Kelly, Assistant to the Registrar

INTRODUCTION

The Jurisprudence and Ethics Examination Committee's (JEEC) mandate is to provide advice to Council related to management of the Jurisprudence and Ethics Examination and to be responsible for item development, test construction and standard setting. The Committee held two regular meetings during 2021-2022.

ACTIVITIES

The meeting in the fall of 2021 focused on a review of the Final Report on the September 2021 examination administration. This exam was written by 112 candidates with a 79% pass rate. The meeting in the spring of 2022 focused on the Final Report of the March examination which was taken by 153 candidates with an 81% pass rate. The reports are prepared by Dr. Marla Nayer, consultant to the JEEC.

The review of the French translation is up to date for the current item bank and will be maintained as new items are added. The Committee reviewed the sample items provided to candidates in the *Preparing to take the Jurisprudence and Ethics Examination* document. There are now 30 sample items, and all have been updated to ensure consistency with current legislation and standards of practice. Items in the item bank are reviewed on a 3-year cycle. This is an ongoing process to ensure that items reflect current legislation, standards, and language. New items or ones that may have some statistical issues are also reviewed as identified. Members of the Committee reviewed a total of 35 items in the October 2021 meeting and 73 items at their May 2022 meeting. A full review of the item bank is scheduled to occur in the 2022-2023 year. This review will also ensure clarity of language consistency with EDI principles.



REPORT TO COUNCIL

2022.03.04E

ANNUAL REPORT 2021-2022

APPLIED BEHAVIOUR ANALYSTS WORKING GROUP

WORKING GROUP MEMBERS

Jennifer Cunningham	Behaviour Analyst - Practitioner
Nancy Marchese	Behaviour Analyst - Psychologist
Nicole Neil	Behaviour Analyst - Educator
Adrienne Perry	Behaviour Analyst - Psychologist, Professional Member of Council
Kendra Thomson	Behaviour Analyst – Educator, Non-voting Member of Council
Wanda Towers	College President - Professional Member of Council
Scott Warnock	Public Member of Council

COLLEGE STAFF SUPPORT:

Paula Garshowitz ABA Regulation-Project Lead
Rick Morris Registrar & Executive Director
Caitlin O’Kelly Assistant to the Registrar

INTRODUCTION

On June 3, 2021, the [Advancing Oversight and Planning in Ontario's Health System Act, 2021, S.O. 2021, c. 27 - Bill 283](#) received Royal Assent. This legislation, specifically Schedule 4, once proclaimed, authorizes the College of Psychologists of Ontario to regulate the profession of Applied Behaviour Analysis (ABA).

At a future date, upon proclamation, Schedule 4 would repeal the *Psychology Act, 1991* and replace it with the new [Psychology and Applied Behaviour Analysis Act, 2021](#). At this time, the College of Psychologists of Ontario would become the College of Psychologists and Applied Behaviour Analysts of Ontario. The legislation authorizes the regulation of Behaviour Analysts while maintaining the current regulatory framework for Psychologists and Psychological Associates.

While the legislation has been passed, sections of Schedule 4, relevant to the College, will not be proclaimed until the regulatory tools needed to regulate this new profession have been created. To assist Council in the development of necessary policies and to identify issues related to the current practice and education of Behaviour Analysts, the College struck the Applied Behaviour Analysts Working Group (ABA Working Group).

The mandate of the ABA Working Group is to provide advice to the College’s Council on policy and other matters related to the regulation of Behaviour Analysts. Among these considerations are the elements of the Registration Regulation as it pertains to Behaviour Analysts. These include a transitional provision for those currently working in the field, as well as entry-level requirements for those joining the profession for the first time. In addition, the Working Group has reviewed the College’s Professional Misconduct and General Regulations, and will begin to review the College’s By-laws, and Policies to include other changes that may be necessary.

ACTIVITIES

Since December 2021, the ABA Working Group has met every second week and completed the following:

- Development of Terms of Reference for the Working Group
- Invited guests to their meetings to gain additional knowledge about the regulation of Behaviour Analysts in other jurisdictions.
- Obtained information from other Ontario health regulatory Colleges to learn from their experience with transitional registration.
- Recommended that Council appoint two Behaviour Analysts as non-voting Council members to participate in Council meetings until proclamation of the *Psychology and Applied Behaviour Analysis Act, 2021* to engage the ABA profession and to begin to negotiate how a two-profession Council will operate.
- Outlined the principles upon which registration will be based.
- Developed details of proposed registration processes and necessary amendments to the O. Reg. 74/15 - Registration Regulation, under the *Psychology Act, 1991*. Two pathways to registration are proposed: a time-limited transitional provision for those currently working in the field and entry-level requirements for those joining the profession for the first time.
- Recommended two separate transitional routes to registration for applicants practising the profession prior to proclamation of the *Act* for those (i) who are certified with the Behavior Analysts Certification Board (BACB) at the BCBA or BCBA-D level, and (ii) those who are not BACB certified at the established levels.
- Mapped the proposed pathways using basic flow charts.
- Developed a system to fairly evaluate evidence of competence for transitional applicants who are not BACB-certified.
- Designed an online self-screening tool to assist those currently practising in the field of Behaviour Analysis to determine if they should apply to register with the College.
- Initiated the development of an examination of knowledge and competence for registration purposes.
- Drafted amendments to O.Reg. 801/93 - Professional Misconduct Regulation and O.Reg. 209/94 General Regulation (QA and Advertising) to encompass the profession of Applied Behaviour Analysis.
- On behalf of the Working Group, staff held meetings with major stakeholders, including government and ABA associations to update them on the progress of the Group's work.



REPORT TO COUNCIL

2022.03.04E

ANNUAL REPORT 2021-2022

EQUITY, DIVERSITY, AND INCLUSION WORKING GROUP

COMMITTEE MEMBERS

Donna Ferguson, Chair	College Member
Wanda Towers, Vice-Chair	Council Member
Kofi Belfon	College Member
Michael Grand	College Member
Tae Hart	College Member
Chris Mushquash	College Member

COLLEGE STAFF SUPPORT

Caitlin O'Kelly, Assistant to the Registrar
Rick Morris, Registrar & Executive Director

INTRODUCTION

The College of Psychologist's ongoing mandate is to protect the public interest through the regulation of the practice of psychology. As a regulator, it carefully considers and reflects upon its role with respect to the important issues of equity, diversity, and inclusion. The Equity, Diversity, and Inclusion (EDI) Working Group is tasked with identifying any issues of racism, systemic discrimination or bias that may be present within the College and its regulatory processes, as well as the larger profession. The members of the Working Group represent diversity of race, colour, being Indigenous, places of origin, religions, ethnic origins, sexual orientations, and gender identities; reflective of the diversity of our members and the clients our members serve. The Working Group is first considering College regulatory processes and then will turn its attention outward toward the profession, in general. The Working Group held 18 meetings during 2021-2022.

ACTIVITIES

The Working Group undertook a variety of activities:

- Terms of Reference/Role for the Working Group were approved;
- A College [webpage](#) was created to provide updates from the College and offer EDI resources for members. Resources are added as new information becomes available;
- Training in equity, diversity, and inclusion was provided to the College leadership in recognition of the importance of an awareness of these issues in all aspects of the business of the College. A workshop was held on Friday December 3, 2021, and attended by over 65 individuals representing the College Council, its Committees and College Staff;
- A survey, *Equity, Diversity, and Inclusion: A Picture of our Membership* was distributed to the member to gather information on the diversity of the College;
- The Working Group met with the Chairs of the College statutory Committees to discuss work to be undertaken within each Committee's role and mandate; and,
- The Association of Canadian Psychology Regulatory Organizations (ACPRO) public statement entitled *An Apology to Indigenous People and Pledge to be Anti-Racist* was reviewed and supported.



BRIEFING NOTE

2022.03.04F

SEPTEMBER 2022 COUNCIL MEETING

AUDITED FINANCIAL STATEMENTS 2021-2022

STRATEGIC DIRECTION REFLECTION

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

TWO MOTIONS FOR CONSIDERATION

1. That the Audited Financial Statements for the fiscal year ending May 31, 2022 be accepted.
2. That the firm of Hilborn LLP be appointed as Auditors for the College for the year ending May 31, 2023.

ATTACHMENTS

1. Audited Financial Statements Year Ending May 31, 2022

CONTACT FOR QUESTIONS

Rick Morris, Registrar & Executive Director

***The College of Psychologists of Ontario
Audit Findings Communication
for the year ended May 31, 2022***





A message from Liana Bell

I am pleased to provide you with the findings of our audit of the financial statements of The College of Psychologists of Ontario (the "College") for the year ended May 31, 2022.

Our audit findings communication is designed to highlight and explain key issues, which we believe to be relevant to the audit and to continue effective two-way communication with you regarding our audit. This will assist the Finance and Audit Committee in fulfilling your responsibility of overseeing the financial reporting process of the College.

This communication has been prepared to comply with the requirements outlined in Canadian Auditing Standard 260, *Communication with those Charged with Governance*. The information in this document is intended solely for the use of Finance and Audit Committee, the Council and management and should not be distributed to others without our consent.

We look forward to discussing our audit findings with you in detail as well as any other matters that you may wish to address.

A handwritten signature in black ink that reads "Hilborn LLP".

Liana Bell, CPA, CA
Partner
Hilborn LLP
August 18, 2022

**“Our
commitment
to quality is
reflected in
every aspect
of our work.
If you have
any questions
or comments,
please contact
me.”**



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Significant Qualitative Aspects of the College’s Accounting Practices	2
Other Significant Matters	3 - 4
Appendix A - Summary of uncorrected misstatements	

Your client service team

Liana Bell, Engagement Partner
lbell@hilbornca.com

Deric Chan, Senior Manager
dchan@hilbornca.com

Joy Lee, Supervisor
jlee@hilbornca.com

John Campbell, Partner and Tax
Group Leader
jcampbell@hilbornca.com

“At Hilborn, we are committed to audit quality and strong client service. Audit quality is integral to our business and is an overarching consideration in our training, our processes, and our systems and controls.”

Executive Summary



Audit status

We have substantially completed our audit of the financial statements of the College for the year ended May 31, 2022, with the exception of the following procedures:

- Completion of subsequent events procedures
- Receipt of the signed management representation letter
- Receipt of the bank confirmation and one legal response
- Council approval of the financial statements

These procedures require completion before we may issue our auditor's report. If we become aware of significant matters after completing these procedures, we will bring them to your attention.



Auditor's report and representations from management

We expect to issue an unmodified opinion. The expected form and content of our report is included in the draft financial statements issued.

We will provide the management representation letter upon the Council's approval of the draft financial statements. We will ask management to sign and return the letter to us before we issue our auditor's report.



Independence

We are independent and have been so throughout the audit process. We have complied with all relevant ethical requirements regarding independence.



Significant difficulties encountered

There were no significant difficulties encountered while performing the audit.



Changes from the audit plan

Our audit approach was consistent with the approach communicated to you in our audit plan dated July 25, 2022.

Final materiality is consistent with preliminary materiality set at \$95,000.

Significant Qualitative Aspects of the College’s Accounting Practices

Canadian Auditing Standards require that we communicate with you about significant qualitative aspects of the entity’s accounting practices, including accounting policies, accounting estimates and financial statement disclosures.

Accounting policies, accounting estimates and financial statement disclosures	Hilborn’s response and views
<p>Management is responsible for the appropriate selection and application of accounting policies under the financial reporting framework of Canadian accounting standards for not-for-profit organizations. Our role is to review the appropriateness and application of these policies as part of our audit.</p> <p>The accounting policies used by the College are described in Note 1, Significant Accounting Policies, included in the notes to the financial statements.</p>	<ul style="list-style-type: none"> - We reviewed all accounting policies previously adopted by the College, and based on audit work performed, the accounting policies are appropriate for the College and applied consistently. During the 2022 fiscal year, the College adopted the deferral method of accounting for contributions which includes government grants.
<p>Management is responsible for the accounting estimates included in the financial statements. Estimates and the related judgments and assumptions are based on management’s knowledge of the business and past experience about current and future events.</p>	<ul style="list-style-type: none"> - Based on the audit work performed, we are satisfied that the estimates made by management are reasonable in the context of the financial statements taken as a whole.
<p>Management has considered the impact of the COVID-19 pandemic on the College’s financial statements and concluded that a note disclosure is appropriate to describe that the impact on the future operations of the entity cannot be estimated.</p>	<ul style="list-style-type: none"> - We worked with management to understand the implications of COVID-19 on the College. - The financial statement disclosures related to COVID-19 are clear and transparent and meet the requirements of the College’s financial reporting framework.

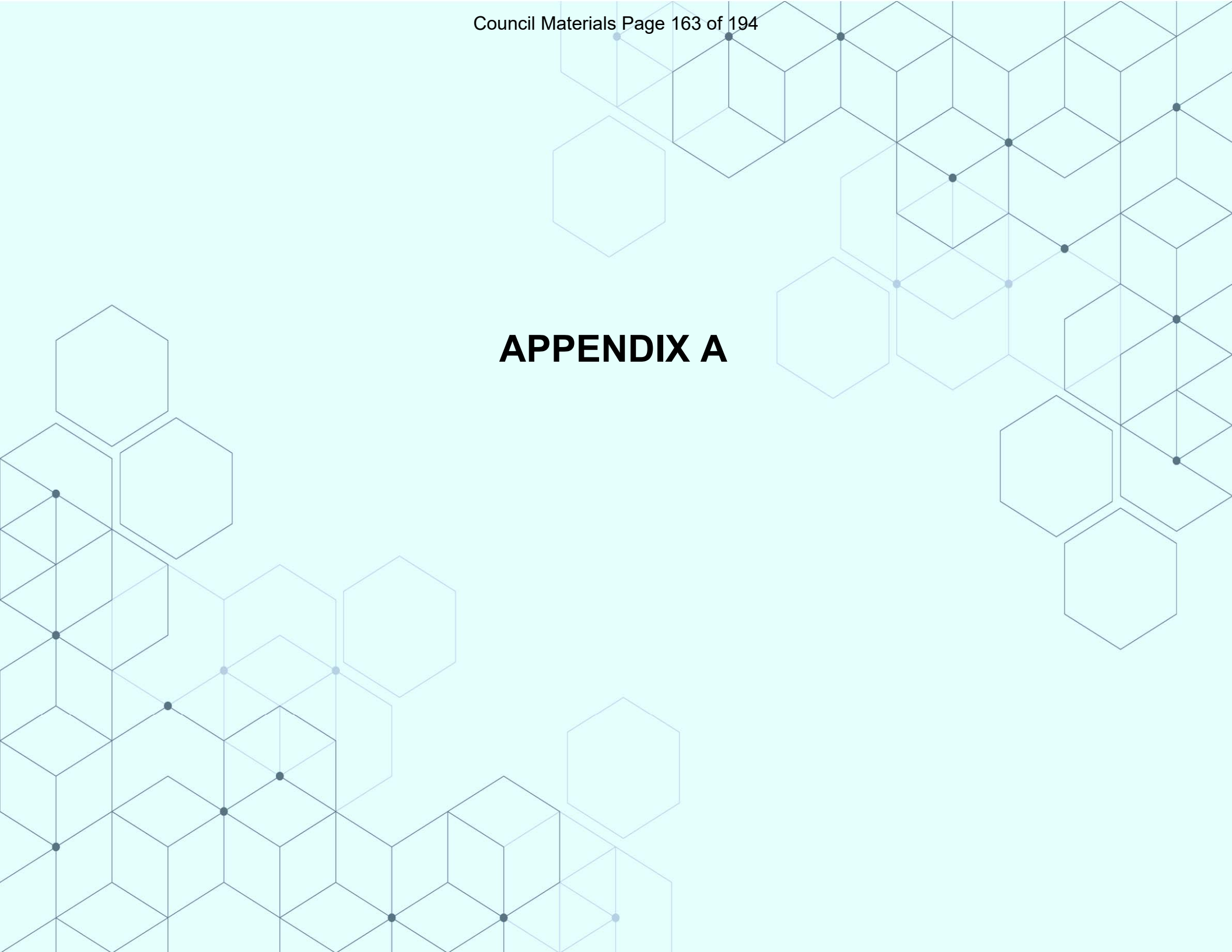
Other Significant Matters

In accordance with Canadian Auditing Standards, there are a number of required communications between the auditor and those charged with governance related to the oversight of the financial reporting process. Those communications will primarily be written in the form of our audit plan and audit findings communication. We may also communicate orally through discussions. The table below summarizes the communications required at the conclusion of the audit.

Significant Matter	Discussion
Summary of uncorrected misstatements	We concur with management's representation, that the uncorrected misstatements as referred to in Appendix A – summary of uncorrected misstatements - are not material to the financial statements. Accordingly, the uncorrected misstatements have no effect on our auditor's report.
Corrected misstatements	During the course of the audit, management and Hilborn LLP worked collaboratively to identify adjustments required in the financial statements. All adjustments proposed by Hilborn were approved and made by management.
Significant deficiencies in internal control	We did not identify any significant deficiencies that, in our judgement, would be considered as significant deficiencies. It should be noted that due to the size of the College and the limited number of personnel involved, adequate segregation of duties is not practical; therefore, reliance is placed on the supervision and review by the Finance and Audit Committee and the Council.

Significant Matter	Discussion
<p>Fraud and non-compliance with laws and regulations</p>	<p>No fraud or non-compliance with laws and regulations came to our attention during the course of the audit.</p> <p>We would like to reconfirm with the Finance and Audit Committee that you are not aware of any fraud or non-compliance with laws and regulations not previously discussed with us.</p>
<p>Significant difficulties encountered</p>	<p>No difficulties were encountered while performing the audit and there are no unresolved disagreements. We received full cooperation from management during our audit.</p>
<p>Related parties</p>	<p>We did not identify any related party transactions or balances that require disclosure in the financial statements.</p>
<p>Subsequent events</p>	<p>No subsequent events, which would impact the financial statements, have come to our attention.</p>

APPENDIX A



College of Psychologists of Ontario
Year End: May 31, 2022
Schedule of unadjusted differences

APP A

Refno	Description	Assets	Liabilities	Equity	Income	Expenses	Annotation
Unrecorded - factual							
SUD 1	To record deferred rent	<u>(8,775.00)</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>8,775.00</u>	
		<u>(8,775.00)</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>8,775.00</u>	
	Understated/(Overstated)	<u>(8,775.00)</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>8,775.00</u>	



COLLEGE OF PSYCHOLOGISTS OF ONTARIO

FINANCIAL STATEMENTS

MAY 31, 2022

Draft Statement Subject to Revision



Independent Auditor's Report

To the Members of Council of the College of Psychologists of Ontario

Opinion

We have audited the financial statements of the College of Psychologists of Ontario (the "College"), which comprise the statement of financial position as at May 31, 2022, and the statements of operations, changes in net assets and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the College as at May 31, 2022, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the College in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other Information

Management is responsible for the other information. The other information comprises the information, other than the financial statements and our auditor's report thereon, in the annual report.

Our opinion on the financial statements does not cover the other information and we will not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information identified above and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated.

The annual report is expected to be made available to us after the date of our auditor's report. If, based on the work we will perform on this other information, we conclude that there is a material misstatement of this other information, we are required to report that fact to those charged with governance.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the ability of the College to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the College or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the financial reporting process of the College.



Independent Auditor's Report (continued)

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the internal control of the College.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the ability of the College to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the College to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We also provide those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.

Toronto, Ontario
To be determined

Chartered Professional Accountants
Licensed Public Accountants

COLLEGE OF PSYCHOLOGISTS OF ONTARIO**Statement of Financial Position**

May 31	2022 \$	2021 \$
ASSETS		
Current assets		
Cash and cash equivalents	7,472,927	4,856,274
Prepaid expenses and sundry receivables	95,889	44,518
Investments - short term (note 3)	-	2,961,735
	7,568,816	7,862,527
Investments - long term (note 3)	35,382	40,262
Property and equipment (note 4)	1,076,339	1,106,229
	8,680,537	9,009,018
LIABILITIES		
Current liabilities		
Accounts payable and accrued liabilities (note 5)	440,296	438,353
Registration fees received in advance	2,999,146	2,929,644
Current portion of lease inducements (note 6)	25,462	25,462
	3,464,904	3,393,459
Lease inducements (note 6)	218,546	244,008
	3,683,450	3,637,467
NET ASSETS		
Internally restricted (note 7)		
Investigations and hearing reserve fund	850,000	850,000
Contingency reserve fund	1,000,000	1,000,000
Fee stabilization fund	820,000	1,000,000
Web site and database development reserve fund	165,872	165,872
Premises reserve fund	227,742	227,742
Fair registration practices reserve fund	80,000	80,000
	3,143,614	3,323,614
Invested in property and equipment Unrestricted	832,331 1,021,142	836,759 1,211,178
	4,997,087	5,371,551
	8,680,537	9,009,018

The accompanying notes are an integral part of these financial statements

Approved on behalf of the Council:

President

Member

COLLEGE OF PSYCHOLOGISTS OF ONTARIO**Statement of Operations**

Year ended May 31	2022 \$	2021 \$
Revenues		
Registration fees	3,533,364	3,426,161
Examination fees	137,550	129,650
Investment income (note 8)	22,127	32,092
Miscellaneous income	28,900	15,329
Ministry of Children, Community and Social Services grant	75,018	-
	3,796,959	3,603,232
Expenses		
Administration (note 4 and 6)	2,758,123	2,658,486
Professional services	250,955	190,620
Hearings	350,337	340,404
Examination and seminar costs	257,740	231,157
Governance	60,818	46,739
Investigations and resolutions	146,997	94,892
Registration	95,501	82,050
Professional organizations	24,117	17,890
Communication, education and training	134,521	109,902
Quality assurance	17,296	11,325
Ministry of Children, Community and Social Services grant	75,018	-
	4,171,423	3,783,465
Deficiency of revenues over expenses for the year	(374,464)	(180,233)

The accompanying notes are an integral part of these financial statements

COLLEGE OF PSYCHOLOGISTS OF ONTARIO**Statement of Changes in Net Assets**

Year ended May 31

	Internally Restricted (note 7) \$	Invested in Property and Equipment \$	Unrestricted \$	Total 2022 \$
Balance - at beginning of year	3,323,614	836,759	1,211,178	5,371,551
Deficiency of revenues over expenses for the year	-	-	(374,464)	(374,464)
Inter-fund transfers representing:				
Purchase of property and equipment	-	126,675	(126,675)	-
Depreciation of property and equipment	-	(156,565)	156,565	-
Amortization of lease inducements	-	25,462	(25,462)	-
Other transfers (note 7)	(180,000)	-	180,000	-
Balance - at end of year	3,143,614	832,331	1,021,142	4,997,087

	Internally Restricted (note 7) \$	Invested in Property and Equipment \$	Unrestricted \$	Total 2021 \$
Balance - at beginning of year	4,095,872	146,586	1,309,326	5,551,784
Deficiency of revenues over expenses for the year	-	-	(180,233)	(180,233)
Inter-fund transfers representing:				
Purchase of property and equipment	-	1,063,261	(1,063,261)	-
Depreciation of property and equipment	-	(103,618)	103,618	-
Lease inducements received during the year	-	(284,323)	284,323	-
Amortization of lease inducements	-	14,853	(14,853)	-
Other transfers (note 7)	(772,258)	-	772,258	-
Balance - at end of year	3,323,614	836,759	1,211,178	5,371,551

The accompanying notes are an integral part of these financial statements

COLLEGE OF PSYCHOLOGISTS OF ONTARIO**Statement of Cash Flows**

Year ended May 31	2022 \$	2021 \$
Cash flows from operating activities		
Cash received from registration and examination fees	3,731,718	4,448,886
Investment income received	27,007	34,101
Miscellaneous income received	28,900	15,329
Grant income received	69,557	-
Cash paid to employees and suppliers	(4,075,589)	(3,658,326)
	(218,407)	839,990
Cash flows from investing activities		
Purchase of property and equipment	(126,675)	(1,063,261)
Cash received from lease inducements	-	284,323
Purchase of investments	(10,056,886)	(4,577,045)
Proceeds on redemption of investments	13,018,621	7,948,494
	2,835,060	2,592,511
Change in cash and cash equivalents	2,616,653	3,432,501
Cash and cash equivalents - beginning of year	4,856,274	1,423,773
Cash and cash equivalents - end of year	7,472,927	4,856,274

The accompanying notes are an integral part of these financial statements

COLLEGE OF PSYCHOLOGISTS OF ONTARIO

Notes to Financial Statements

May 31, 2022

Nature and description of the organization

College of Psychologists of Ontario/L'Ordre Des Psychologues de L'Ontario (the "College") is the governing body for Psychologists and Psychological Associates in Ontario. The College is the self-governing body established by the provincial government to regulate the practice of psychology in Ontario, under the terms of the Psychology Act (1991) and the Regulated Health Professions Act (1991).

The College's Vision: A model for self-regulation to protect the public interest.

The College's mission is promoting excellence in the practice of psychology by:

- Enforcing standards fairly and effectively;
- 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; and
- Promoting the cohesiveness of the profession.

The College is a not-for-profit organization incorporated without share capital under the laws of Ontario and, as such, is generally exempt from income taxes.

1. Summary of significant accounting policies

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations and are in accordance with Canadian generally accepted accounting principles. These financial statements have been prepared within the framework of the significant accounting policies summarized below:

(a) Basis of presentation

Unrestricted

The unrestricted net asset reflects the cumulative results of the day-to-day activities of the College in fulfilling its purpose.

The Council of the College has internally restricted net assets to be used for specific purposes. These funds are not available for operations without approval of the Council. The details of internally restricted funds are as follows:

Investigations and Hearings Reserve Fund

The Investigation and Hearings Reserve Fund is designated to cover costs including legal costs, for the conduct of inquiries, investigations, discipline hearings, fitness to practice hearings, appeals and payments under the program for funding for therapy and counselling which exceed annual budget provisions for those activities.

COLLEGE OF PSYCHOLOGISTS OF ONTARIO**Notes to Financial Statements (continued)**

May 31, 2022

1. Significant accounting policies (continued)**(a) Basis of presentation (continued)****Contingency Reserve Fund**

The Contingency Reserve Fund is designated to provide for extraordinary expenses that exceed or fall outside of the provisions of the College's operating budget and to fund the College's obligations in extreme circumstances as determined and approved by the Council.

Fee Stabilization Fund

The Fee Stabilization Fund is designated to minimize or delay the impact of year-over-year changes in revenues or expenses on membership renewal fees. In accordance to the College's reserve funds policy, any annual operating surplus remaining after appropriate allocations are made to the other reserve funds will be allocated to the Fee Stabilization Fund.

Web Site and Database Development Reserve Fund

The Web Site and Database Development Fund is designated to provide funding for ongoing web site and database development.

Premises Reserve Fund

The Premises Reserve Fund is designated to provide funding for purchase or leasing of premises in the future and to minimize the impact on the operating budget for major expenses relating to the College's property.

Fair Registration Practices Reserve Fund

The Fair Registration Practices Reserve Fund is designated to cover costs, including professional fees, for the preparation and conduct of audits of the College's registration practices.

(b) Revenue recognition**Registration Fees**

Registration fees are billed on a fiscal year basis commencing June 1st of each year and recognized as income on a fiscal year basis. Registration fees received in the current year, applicable to a subsequent year, are recorded as deferred revenue.

Examination Fees

Examination fees are recognized as revenue in the period in which the examination takes place. Examination fees received in the current year, applicable to an examination that takes place in the subsequent year, are recorded as deferred revenue.

COLLEGE OF PSYCHOLOGISTS OF ONTARIO**Notes to Financial Statements (continued)**

May 31, 2022

1. Significant accounting policies (continued)**(b) Revenue recognition (continued)****Investment Income**

Investment income consists of interest and realized and unrealized gains and losses. Interest is recognized as revenue when earned. Realized gains and losses are recognized when the transactions occur. Unrealized gains and losses which reflect the changes in fair value during the period are recognized at each reporting date and are included in current period operating results.

Miscellaneous Income

Other fees and revenues are recognized when the respective services are provided.

Contributions

Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

The College follows the deferral method of accounting for restricted contributions which include government grants.

Externally restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Grants approved but not received, at the end of an accounting period are accrued. Where a portion of a grant relates to a future period, it is deferred and recognized in that subsequent period.

(c) Financial instruments**(i) Measurement of financial assets and liabilities**

The College initially measures its financial assets and financial liabilities at fair value adjusted by, in the case of a financial instrument that will not be measured subsequently at fair value, the amount of transaction costs directly attributable to the instrument. Transaction costs of those financial assets and financial liabilities subsequently measured at fair value are recognized in income in the year incurred.

The College subsequently measures all its financial assets and financial liabilities at amortized cost, except for investments, which are measured at fair value. Changes in fair value are recognized in the Statement of Operations. Fair values are determined by reference to published price quotations in active markets.

Financial assets measured at amortized cost include cash and cash equivalents and sundry receivables.

Financial liabilities measured at amortized cost include accounts payable and accrued liabilities.

COLLEGE OF PSYCHOLOGISTS OF ONTARIO

Notes to Financial Statements (continued)

May 31, 2022

1. Significant accounting policies (continued)

(c) Financial instruments

(ii) Impairment

Financial assets measured at amortized cost are tested for impairment when there are indicators of possible impairment. When a significant adverse change has occurred during the period in the expected timing or amount of future cash flows from the financial asset or group of assets, a write-down is recognized in net income. The write down reflects the difference between the carrying amount and the higher of:

- the present value of the cash flows expected to be generated by the asset or group of assets;
- the amount that could be realized by selling the assets or group of assets;

When the events occurring after the impairment confirm that a reversal is necessary, the reversal is recognized in net income up to the amount of the previously recognized impairment. The amount of the reversal is recognized in income in the period that the reversal occurs.

(d) Cash and cash equivalents

Cash and cash equivalents consist of cash at bank, money market funds and guaranteed investment certificates whose term to maturity is within three months from date of acquisition.

(e) Short and long term investments

Short term and long term investments are comprised of guaranteed investment certificates and Canadian commercial instruments. These investments are recorded at fair value. Investments that mature within twelve months from the year-end date are classified as short term. Investments that mature in over twelve months from the year-end date are classified as long term.

(f) Property and equipment

The costs of property and equipment are capitalized upon meeting the criteria for recognition as property and equipment, otherwise, costs are expensed as incurred. The cost of property and equipment comprises its purchase price and any directly attributable cost of preparing the asset for its intended use.

Property and equipment are measured at cost less accumulated amortization and accumulated impairment losses.

COLLEGE OF PSYCHOLOGISTS OF ONTARIO

Notes to Financial Statements (continued)

May 31, 2022

1. Significant accounting policies (continued)

(f) Property and equipment (continued)

Depreciation is provided for, upon the commencement of the utilization of the assets, using methods and rates designed to amortize the cost of the property and equipment over their estimated useful lives. The annual amortization rates on a straight line basis are as follows:

Furniture and equipment	5 years
Computer equipment	3 years
Leasehold improvements	over the term of the lease

Property and equipment is tested for impairment whenever events or changes in circumstances indicate that its carrying amount may not be recoverable. If any potential impairment is identified, the amount of the impairment is quantified by comparing the carrying value of the property and equipment to its fair value. Any impairment of property and equipment is recognized in income in the year in which the impairment occurs. An impairment loss is not reversed if the fair value of the property and equipment subsequently increases. There were no impairment indicators in 2022.

(g) Lease inducements

Lease inducements are deferred and amortized over the term of the premise lease.

(h) Use of estimates

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the year. Actual results could differ from these estimates, the impact of which would be recorded in future affected periods.

2. Financial instrument risk management

The College is exposed to various risks through its financial instruments. The following analysis provides a measure of the College's risk exposure at the statement of financial position date.

The financial instruments of the College and the nature of the risks to which those instruments may be subject, are as follows:

Financial instrument	Risks				
	Credit	Liquidity	Market risk		
Currency			Interest rate	Other price	
Cash and cash equivalents	X			X	
Sundry receivables	X				
Short and long term investments	X			X	X
Accounts payable and accrued liabilities		X			

COLLEGE OF PSYCHOLOGISTS OF ONTARIO**Notes to Financial Statements (continued)**

May 31, 2022

2. Financial instrument risk management (continued)**Credit risk**

Credit risk is the risk that one party to a financial instrument will cause a financial loss for the other party by failing to discharge an obligation. The College's main credit risks relate to cash and cash equivalents, short and long term investments and sundry receivables.

The College reduces its exposure to the credit risk of cash and cash equivalents by maintaining balances with a Canadian chartered bank and for short and long term investments by investing in high investment grade investments. The College is not exposed to significant credit risk in respect of sundry receivables.

Liquidity risk

Liquidity risk is the risk that the College will encounter difficulty in meeting obligations associated with financial liabilities. The College is exposed to this risk mainly in respect of its accounts payable and accrued liabilities. The College expects to meet these obligations as they come due by generating sufficient cash flow from operations.

Market risk

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices. Market risk comprises three types of risk: currency risk, interest rate risk and other price risk. The College is not exposed to significant currency risk.

i) Interest rate risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates. The value of fixed income investments will generally rise if interest rates fall and decrease if interest rates rise. The College is exposed to interest rate risk on its fixed income investments.

ii) Other price risk

Other price risk is the risk that the fair value of financial instruments or future cash flows associated with the instruments will fluctuate because of changes in market prices (other than those arising from currency risk or interest rate risk), whether those changes are caused by factors specific to the individual instrument or its issuer or factors affecting all similar financial instruments traded in the market. The College is exposed to other price risk on its investments in Canadian commercial instruments. The College manages this risk by investing in high investment grade instruments.

Changes in risk

There have been no significant changes in the risk profile of the financial instruments of the College from that of the prior year.

COLLEGE OF PSYCHOLOGISTS OF ONTARIO**Notes to Financial Statements (continued)**

May 31, 2022

3. Investments

Details of investments are as follows:

	2022 \$	2021 \$
Short term		
Redeemable guaranteed investment certificates at varying rates between 0.31% to 0.35% maturing within one year	-	2,961,735
Long term		
Canadian commercial instrument at 8.90%, maturing June 2025, (8.90% in 2021, maturing June 2025)	35,382	40,262

Investment risk management

Risk management relates to the understanding and active management of risks associated with all areas of the College's activities and operations. Investments are primarily exposed to interest rate and other price risks. The College has formal policies and procedures for investment transactions and the majority of investments are made on the advice of portfolio managers.

4. Property and equipment

Details of property and equipment are as follows:

	2022		
	Cost \$	Accumulated Amortization \$	Net Book Value \$
Furniture and equipment	177,108	74,379	102,729
Computer equipment	143,343	139,277	4,066
Leasehold improvements	1,331,175	361,631	969,544
	1,651,626	575,287	1,076,339
	2021		
	Cost \$	Accumulated Amortization \$	Net Book Value \$
Furniture and equipment	52,816	47,754	5,062
Computer equipment	140,958	122,224	18,734
Leasehold improvements	1,331,177	248,743	1,082,433
	1,524,951	418,721	1,106,229

Administration expenses in the Statement of Operations includes depreciation expense of \$156,565 (\$103,618 - 2021).

COLLEGE OF PSYCHOLOGISTS OF ONTARIO**Notes to Financial Statements (continued)**

May 31, 2022

5. Accounts payable and accrued liabilities

Details of accounts payable and accrued liabilities are as follows:

	2022	2021
	\$	\$
Trade payables and accruals	408,018	409,259
Payroll and withholding taxes	32,280	29,094
	440,298	438,353

6. Lease inducements

Lease inducements received in the form of a leasehold improvement allowance under the premise lease are deferred and amortized on a straight line basis over the term of the lease as follows:

	2022	2021
	\$	\$
Balance - at beginning of year	269,470	-
Lease inducements received during the year	-	284,323
Less: amortization of lease inducements	(25,462)	(14,853)
Balance - at end of year	244,008	269,470
Current portion	25,462	25,462
Long-term portion	218,546	244,008

Administration expenses in the Statement of Operations includes amortization of deferred lease inducements of \$25,462 (\$14,853 - 2021).

7. Net assets - internally restricted

	2022	2021
	\$	\$
Investigations and hearings reserve fund	850,000	850,000
Contingency reserve fund	1,000,000	1,000,000
Fee stabilization fund	820,000	1,000,000
Web site and database development reserve fund	165,872	165,872
Premises reserve fund	227,742	227,742
Fair registration practices reserve fund	80,000	80,000
	3,143,614	3,323,614

During the 2022 fiscal year, the Council approved the transfer in the amount of \$NIL (\$772,258 - 2021) from the Premises Reserve Fund to the Unrestricted Net Assets to cover the expenditures related to the office leasehold improvements completed in November 2020.

During the 2022 fiscal year, the Council approved the transfer in the amount of \$180,000 (\$NIL - 2021) from the Fee Stabilization Fund to the Unrestricted Net Assets to cover the 2022 fiscal year operating deficiency.

COLLEGE OF PSYCHOLOGISTS OF ONTARIO**Notes to Financial Statements (continued)**

May 31, 2022

8. Investment income

Investment income consists of:

	2022	2021
	\$	\$
Interest	27,007	34,101
Unrealized losses on the fair value of investments	(4,880)	(2,009)
	22,127	32,092

9. Lease commitments

The College is committed to annual rental payments for office equipment and premises under operating leases. The leases for office equipment expire in September 2026 and October 2026 and the lease for premises expires in December 2031. The minimum annual payments are as follows:

	Premises	Equipment
	\$	\$
2023	189,548	6,685
2024	193,936	6,685
2025	200,079	6,685
2026	204,467	6,685
2027	210,609	2,364
Thereafter	1,028,476	-
	2,027,115	29,104

In addition, the College is responsible for its proportionate share of operating costs and realty taxes on its premises which in 2022 amount to \$171,000 (2021 - \$175,400).

10. Impact of global pandemic

The global pandemic of the virus known as COVID-19 has led the Canadian Federal government, as well as provincial and local governments, to impose measures, such as restricting foreign travel, mandating self-isolations and physical distancing and closing non-essential businesses. Because of the high level of uncertainty related to the outcome of this pandemic, it is difficult to estimate the financial effect on the College. No adjustments have been made in the financial statements for these events.

11. Contingent liabilities

There is currently three matters under review to assess whether the College has potential liabilities. As the outcome of these matters are not determinable at this time, no amounts have been recorded in the financial statements.



BRIEFING NOTE

2022.03.04G

SEPTEMBER 2022 COUNCIL MEETING

TRANSFER FROM RESERVE FUNDS

STRATEGIC DIRECTION REFLECTION

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

MOTION FOR CONSIDERATION

That \$36,360 be transferred from the Investigations and Hearings Reserved Fund and \$338,105 be transferred from the Fee Stabilization Fund to cover the 2021-2022 operating deficit of \$374,465.

Moved By TBD

PUBLIC INTEREST RATIONALE

To ensure the College has sufficient funds to fulfill its public protection mandate.

BACKGROUND

Policy IIIIF-2 Reserve Funds (attached) requires the College to have an Investigations & Hearings Fund and a Fee Stabilization Fund, and it designates how they are to be used in the event that there is an operating deficit in any fiscal year. As defined in *Policy IIIIF-2*, "The Investigations & Hearings Fund is designated to cover costs, including legal costs, for the conduct of inquiries, investigations, discipline hearings, fitness to practice hearings, appeals and payments under the program for Funding for Therapy and Counseling which exceed annual budget provisions for those activities". The Policy goes on to state that if "the costs of these activities exceed the budget and the College runs an operating deficit for that year, funds may be transferred from this fund to cover the cost overrun".

Policy IIIIF-2 also sets out that, "The Fee Stabilization Fund is designated to minimize or delay the impact of year-over-year changes in revenues or expenses on membership renewal fees". The Policy states that if there is an operating deficit even after funds are transferred from the Investigations & Hearings Fund to cover the overspends set out above, funds may be transferred from the Fee Stabilization Fund to cover the remaining deficit.

The unaudited financial statements for the year ending May 31, 2022 indicate an operating deficit of \$374,465 which then triggers transfers from these funds.

In the fiscal year 2021-2022, the total costs for legal services, for the conduct of inquiries, investigations, discipline hearings, fitness to practice hearings, appeals and payments under the program for Funding for Therapy and Counseling exceed the budget by \$36,360. As set out in *Policy IIIIF-2*, \$36,360 should be transferred from the Investigations and Hearings Fund, currently at \$850,000. The remainder of the deficit, \$338,105, (\$374,465 – \$36,360) would then be transferred from the Fee Stabilization Fund, currently at \$820,000, in keeping with its purpose "to minimize or delay the impact of year-over-year changes in revenues or expenses on membership renewal fees".

ATTACHMENTS

1. *Policy IIIF-2 Reserve Funds*

CONTACT FOR QUESTIONS

R. Morris, Ph.D., C.Psych.
Registrar & Executive Director



POLICY AND PROCEDURE MANUAL

POLICY	Reserve Funds		
SECTION	Operational – Financial	POLICY #	III F – 2
DATE CREATED	March 2007	DATE LAST REVISED	September 2017
NEXT REVIEW DATE	2025/2026	PAGE #	1 of 2

POLICY STATEMENT

The College shall establish and maintain reserve funds in order to cover variable and/or unforeseen costs and expenses.

PROCEDURE

1. The College shall establish and maintain the following reserve funds: Investigations & Hearings Reserve Fund, Contingency Reserve Fund, Fee Stabilization Fund, and any other reserve funds as deemed appropriate by the Council.
2. All transfers to and from the reserve funds shall be approved by the Council upon the recommendation of the Finance and Audit Committee, unless otherwise specified.
3. The details of the funds are as follows:
 - a. Investigations & Hearings Reserve Fund
 - i. The Investigations & Hearings Reserve Fund is designated to cover costs, including legal costs, for the conduct of inquiries, investigations, discipline hearings, fitness to practice hearings, appeals and payments under the program for Funding for Therapy and Counseling which exceed annual budget provisions for those activities.
 - ii. The minimum amount to be maintained in this fund is \$300,000 or such greater amount as may be determined by the Council of the College.
 - iii. In any fiscal year in which the costs of the activities set out in paragraph 3(a) exceed budget and the College runs an operating deficit for that year, funds may be transferred from this fund to cover the cost overrun.
 - b. Contingency Reserve Fund
 - i. The Contingency Reserve Fund is designated to provide for extraordinary expenses that exceed or fall outside of the provisions of the College's operating budget and are not otherwise covered by the Investigations & Hearings Reserve Fund or to fund the College's obligations in extreme circumstances as determined and approved by the Council of the College including in the event that the College ceases to exist as a statutory body corporate.
 - ii. The minimum amount to be maintained in this fund is \$500,000 or such greater amount as may be determined by the Council of the College
 - iii. In the event of dissolution of the Council, these funds are to be used only upon approval of a person or entity legally authorized to oversee the financial affairs of the College.
 - c. Fee Stabilization Fund
 - i. The Fee Stabilization Fund is designated to minimize or delay the impact of year-over-year changes in revenues or expenses on membership renewal fees.

- ii. In any fiscal year in which there is an operating deficit, even after funds from the Investigations & Hearings Fund are applied to cover any overspends for costs, including legal costs, for the conduct of inquiries, investigations, discipline hearings, fitness to practice hearings, appeals and payments under the program for Funding for Therapy and Counseling, funds may be transferred from the Fee Stabilization Fund to cover such deficit.
 - iii. In any fiscal year in which the fee stabilization fund falls below \$500,000, the Finance and Audit Committee will make recommendations to Council for a strategy for topping up the Fund.
4. Maximum Aggregate Value of Reserve Funds: The aggregate value of these reserve funds shall not exceed \$3 million or such other amount as may be approved by the Council of the College. In the event that there are surpluses in excess of this amount, the Finance and Audit Committee will consider whether to recommend to Council means for reducing revenues or for increased spending in the service of the public, members and other stakeholders, in subsequent years.

STRATEGIC DIRECTION 2017-2022

2022.03.05A

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 AUGUST 16, 2022

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"> • Enforcing standards fairly and effectively through: <ul style="list-style-type: none"> – Developing, establishing, and maintaining standards of qualifications for individuals seeking registration, 	<ul style="list-style-type: none"> • Revised the manner for recording Oral Exam results when not all areas of practice/client groups are authorized (September 2016) • Issuance of IAP Certificate for temporary and limited practice by practitioners registered in other jurisdictions (June 2019) • Setting the JEE pass point to Ontario first time test takers. (December 2019) • Amendments to the <i>Guidelines for Completing the Declaration of Competence</i> (December 2019) • Amendments to the Guidelines for Retraining for Supervised Practice (March 2020) • Transitioning to Online Administration of the JEE (November 2020) 	<ul style="list-style-type: none"> • 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) • Project Researcher hired, to begin in fall 2022, to develop a report to further Council’s decisions to discontinue Master’s level registration (June 2022) • Supervision Resource Manual Working Group formed (September 2020) • Establish a process to assess all CFTA candidates on their competence to perform the controlled act of communication of a diagnosis. (December 2020)
M2	<ul style="list-style-type: none"> • Enforcing standards fairly and effectively through: <ul style="list-style-type: none"> – Developing, establishing, and maintaining standards of practice and professional ethics for all members, 	<ul style="list-style-type: none"> • Review of Standards of Professional Conduct (Fall 2016) • Adoption of new <i>Standards of Professional Conduct</i>, to go into effect September 1, 2017 (March 2017) • Implementation of the ICRC Risk Rubric (August 2017) • Update to the <i>Standards of Professional Conduct, 2017</i> with regards to the language of clinical records (March 2021) 	

		<ul style="list-style-type: none"> • <i>Standards of Professional Conduct, 2017</i> updated with gender neutral language (March 2021) 	
M3	<ul style="list-style-type: none"> • Enforcing standards fairly and effectively through: <ul style="list-style-type: none"> – Developing, establishing, and maintaining standards of knowledge and skill and programs to promote continuing evaluation, competence, and improvement among members 	<ul style="list-style-type: none"> • Quality Assurance Committee began auditing CPD forms. (Fall 2019) 	
M4	<ul style="list-style-type: none"> • Communicating clearly and effectively with stakeholders, particularly applicants, members, and the public 	<ul style="list-style-type: none"> • Publication of quarterly <i>e-Bulletin</i> • Staff presentations to students and member groups (ongoing) • Strategic Direction 2017 – 2022 to members • Executive Committee Reception with London members (May 2017) • Executive Committee Reception with Guelph members (November 2017) • Proposed Policy II-3(iii) Appearance before a panel of the ICRC to be Cautioned (December 2017) • College Communications Plan (March 2018) • Executive Committee Reception with Kingston Members (May 2018) • Use of Title Consultation (February 2019) • Executive Committee Reception with Thunder Bay members (May 2019) • Executive Committee Reception with Hamilton members (November 2019) • New College Logo, as part of Communications Plan, Approved (December 2019) • Launch of new quarterly newsletter, <i>HeadLines</i> (July 2020) • Launch of new Website (August 2020) 	

		<ul style="list-style-type: none"> • Launch of Social Media (October 2020) • Approval of support for victims of sexual abuse and misconduct to be implemented January 1, 2021 (September 2020) • COVID-19 Updates (Spring 2020) and ongoing • Work with Ministry of Health and local Public Health Units in member vaccine notification (Spring 2021 and ongoing) • Encourage engagement with ONTABA and the ABA community through sharing of updates and invitation to join College notifications subscribers' list 	
M5	<ul style="list-style-type: none"> • Supporting and assisting members to meet high standards 	<ul style="list-style-type: none"> • Practice Advice Service (ongoing) • Barbara Wand Symposium (December 2016) • Revision of the <i>Self-Assessment Guide and Professional Development Plan</i> (May 2017) • Continuing Professional Development (CPD) Program Implemented • Examination and Corporation Fee reduced (June 2017) • Practical Applications within new <i>Standards</i> to be continuously updated (June 2017) • Barbara Wand Symposium in Ottawa (June 2017) • Updated Policy II-3(ii) Release of the Member's Response to the Complainant (June 2017) • Frequently Ask Questions for the new <i>Standards</i> and CPD Program continuously updated (August 2017) • Barbara Wand Seminar (January 2018) • Barbara Wand Seminar (June 2018) 	<ul style="list-style-type: none"> • Barbara Wand Seminar (November 2022)

		<ul style="list-style-type: none"> • Peer Assisted Reviewer Training (November 2018) • French Language translations of new <i>Standards</i> completed (November 2018) • Barbara Wand Seminar (January 2019) • Guidelines for CPD published in <i>e-Bulletin</i> (January 2019) • Release of new materials for the prevention of boundary violations and sexual abuse, including discussion guide. • Barbara Wand Seminar (June 2019) • Peer Assisted Reviewer Training (November 2019) • Barbara Wand Seminar (December 2019) • Barbara Wand Seminar (September 2020) • Barbara Wand Seminar (June 2021) • Barbara Wand Seminar (January 2022) 	
M6	<ul style="list-style-type: none"> • Responding to changing needs in new and emerging practice areas 	<ul style="list-style-type: none"> • New technological standard within the revised <i>Standards of Professional Conduct 2017</i> • Equity, Diversity, and Inclusion Working Group formed (October 2020) 	
M7	<ul style="list-style-type: none"> • Collaborating in shaping the regulatory environment 	<ul style="list-style-type: none"> • Participation in ASPPB, ACPRO, FHRCO • College participation in inter-College Psychotherapy Working Group • FHRCO Sexual Abuse Prevention Task Force Chaired by Deputy Registrar (2016-2017) • College participation in FHRCO discussions regarding Bill 87 (transparency and other changes to the RHPA) • College Council responded to the Standing Committee on Bill 87 (March 2017) • Submission to HPRAC, re: Psychotherapy (October 2017) 	

		<ul style="list-style-type: none"> • Submission to MOHLTC on regulation amendments in the Health Professions Procedural Code (March 2018) • Submission to Ontario Regulation Registry on Psychotherapy (June 2018) • Confirmation to Pursue Regulation of ABA (September 2019) • Discussions with the MOH and MCCSS regarding regulation of ABA (November 2017) • Applied Behaviour Analysis Working Group Formed (December 2020) • Applied Behaviour Analysis Working Group formed (December 2020) • College Performance Measurement Framework submitted/posted (March 2021) • Council Composition recommendation provided to the Ministry of Health for the regulation of ABA (March 19, 2021) • College Performance Measurement Framework submitted/posted (March 2022) • Two transitional non-voting Behaviour Analysts appointed to the Council effective at the June Council meeting (May 2022) • Submission to the Ministry of Health regarding Bill 106 (June 2022) 	
M8	<ul style="list-style-type: none"> • Acting in a responsibly transparent manner 	<ul style="list-style-type: none"> • Posting of Council materials on website in advance of meetings (June 2016) • Council and Executive to declare Conflicts of Interest at start of each meeting (June 2017) • Amendments to <i>By-law 18: Fees</i> (December 2017) 	

		<ul style="list-style-type: none"> • Amendments to <i>By-law 25: The Register and Related Matters</i> (June 2018) • Amendments to <i>By-law 5: Selection of Committee Chairs and Committee Members</i> and <i>By-law 21: Committee Composition</i> (September 2018) • Consultation on <i>By-Law 18: Fees</i> (June 2019) • Process implemented for temporary practice in Ontario with existing clients by registrants from other jurisdictions • Amendments to <i>By-Law 18: Fees</i> (September 2019) • Amendments to <i>By-Law 5 and 20</i> (March 2022) 	
M9	<ul style="list-style-type: none"> • Advancing the Council's governance practices 	<ul style="list-style-type: none"> • New Briefing Note format for Council materials • March 2017 Council Training Day • Revision to Role of the Executive Committee • Agenda to Reflect Strategic Direction of Item • Introduction of Board Self-Assessment process (June 2017) • Amendments to <i>By-law 20: Elections to Council. . .</i> (December 2017) • Two Committee Audits Planned for 2017-2018 • HIROC Risk Management System implemented (September 2017) • Sunsetting of Nominations and Leadership Development Committee; role incorporated into the Executive Committee (September 2020) • Expansion of Funding for Therapy Eligibility (June 2021) 	

		<ul style="list-style-type: none">• Equity, Diversity and Inclusion Training for Council, Committees Members and Staff (December 2021)	
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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 June 2022 as activities undertaken in service of the College’s Strategic Directions 2017 - 2022**