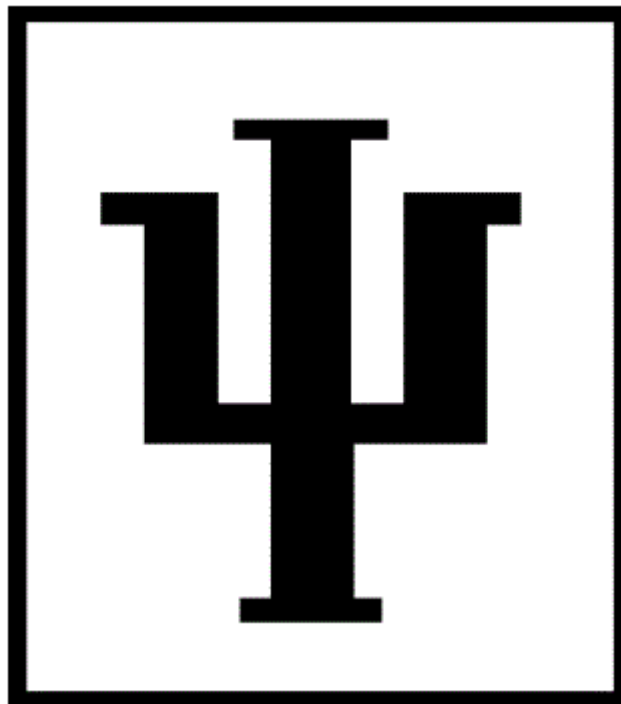


THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO

**PUBLIC AND OBSERVERS
MEETING MATERIALS**

**College Council
March 24, 2017
2017.01**



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**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

COUNCIL MEETING AGENDA

2017.01

March 24, 2017

9:00 AM to 4:00 PM

Agenda Item	Topic	Page #	Strategic Direction*
.00	CALL TO ORDER		
.01	APPROVAL OF AGENDA & MINUTES		
.01a	Review & Approval of Agenda	01	
.01b	Review & Approval of Minutes - Council Meeting 2016.04 December 2, 2016	03	
.01c	Review of Action List	10	
.02	CONSENT AGENDA ITEMS		
.02a	President's Report	12	
.02b	Registrar's Report	13	
.02c	Financial Information - Memo	15	
	(1) Finance & Audit Committee Report	16	
	(2) Statement of Revenue and Expenses to November 30, 2016	17	
	(3) Variance Report to November 30, 2016 <input checked="" type="checkbox"/>	18	
	(4) Balance Sheet as of November 30, 2016 (Unaudited)	22	
	(5) Investment Report to November 30, 2016 <input checked="" type="checkbox"/>	23	
.02d	Staff Presentations	26	M5
.02e	Committee Reports	--	
	(1) Executive Committee	27	M8
	(2) Registration Committee	28	M8
	(3) Discipline Committee	30	M8
	(4) Inquiries, Complaints and Reports Committee	31	M8
	(5) Quality Assurance Committee	38	M8
	(6) Client Relations Committee	39	M8
	(7) Fitness to Practice Committee	--	
.03	STRATEGIC ISSUES		
.03a	Strategic Direction Implementation: Chart Update	40	M9
.04	POLICY ISSUES		
.04a	Motion: By-Law 18: Fees	43	M5
.04b	Motion: Continuing Professional Development Distribution	47	M5
.04c	Motion: Standards of Professional Conduct	59	M2
.04d	Motion: Policy II-10(ii) Conflict of Interest and Reasonable Perception of Bias (JEEC) & Staff and Contributors' Agreement Form	84	M9
.04f	Motion: Policy II-1(i): Executive Committee: Terms of Reference/Role	92	M9

.05	BUSINESS ISSUES		
.05a	Draft Budget 2017-2018 – Summary page included in observer package	95	
.05b	Registrar's Performance Review: IN CAMERA <input checked="" type="checkbox"/>	--	
.06	OTHER BUSINESS		
	Next Council Meeting: Friday June 23, 2017	--	
	Confirmed Council Training & Meeting: September 14-15, 2017	--	
.07	ADJOURNMENT		

Not included in observer package

*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.*



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

**COUNCIL MEETING
2016.04
December 2, 2016**

Present:

Lynette Eulette, Ph.D., C.Psych., President	Jaffar Mohammad Hayat, Public Member
Ruth Berman, Ph.D., C.Psych., Vice-President	Gilles Hebert, Ph.D., C.Psych.
Kristin Bisbee, Public Member	Elizabeth Levin, Ph.D., C.Psych.
Judy Cohen, Public Member	Denise Milovan, Ph.D., C.Psych.
Dorothy Cotton, Ph.D., C.Psych.	Patricia Minnes, Ph.D., C.Psych.
D'Arcy Delamere, Public Member	Astra Josie Rose, Public Member
Robert Gauthier, M.Sc., M. Ed, C.Psych.Assoc.	Ethel Teitelbaum, Public Member
Michael Grand, Ph.D., C.Psych.	Glenn Webster, M.Ed., C.Psych.Assoc.

Regrets:

Donna McNicol, Public Member

Staff:

Rick Morris, Ph.D., C.Psych., Registrar & Executive Director
 Barry Gang, MBA, Dip.C.S., C.Psych.Assoc. Director, Professional Affairs
 Lesia Mackanyn, Director, Registration
 Zimra Yetnikoff, Director, Investigations & Hearings
 Stephanie Morton, Manager: Administration
 Caitlin O'Kelly, Administrative Assistant: Office of the Registrar, Recorder

2016.04.00 Call to Order

The President called the meeting to order at 8:59AM

2016.04.01 Approval of the Agenda and Minutes

.01a Approval of Agenda

The following changes were made to the agenda:

Moved:

.02a President's Report to .01c

It was MOVED Teitelbaum

That the agenda be approved as amended.

CARRIED

.01b Minutes

(1) Minutes from the Council Meeting 2016.03 on September 30, 2016

It was MOVED Minnes

That the minutes from the Council Meeting 2016.03 on September 30, 2016 be approved.

CARRIED

49
50 **Review of Action List:**
51 The Council reviewed the Action List and noted items that were completed, outstanding or on
52 the agenda at this meeting.
53

54 **.01c President's Report**

55 The President answered questions with regards to the ASPPB Annual Meeting and its main
56 theme of "Sailing in Rough Waters: Promoting Public Protection in an Anti-Regulatory Climate".
57 The President noted that in Canada the government appears to be taking a more active role in
58 regulation, while in the United States the anti-regulatory climate is somewhat stronger.
59

60 In relation to the President's reporting on the ACPRO meeting in November, the Registrar
61 answered questions regarding the information ACPRO is interested in collecting for a minimum
62 dataset. The Registrar explained that currently, different Colleges/Boards across Canada collect
63 varying information and this results in a lack of cross-Canada statistics on the profession. In
64 Ontario, the College already collects the data that would meet ACPRO's minimum dataset.
65

66 Since the September Council meeting Peter McKegney resigned from his position as a Public
67 Member of Council. The President thanked Mr. McKegney for all his contributions to the College
68 during his years on Council, serving as President and on various Committees.
69

70 **2016.04.02 Consent Agenda**

71
72 **It was MOVED Teitelbaum**
73 **That the Consent Agenda be approved.** **CARRIED**
74

75 **2016.04.03 Strategic Issues**

76 **.03a Strategic Direction Implementation Update**

77
78 The Registrar provided the Council with the updated *Strategic Direction Implementation Table*.
79 Items added since the Council Meeting of September 30, 2016 were shown in **Bold**.
80

81 **.03b New Strategic Direction 2017-2022**

82 At the September 30, 2016 Council meeting an ad hoc Committee was established to review the
83 College's *Vision, Mission and Values*. The Committee met by teleconference in October and
84 concluded that the current direction continued to be relevant, timely and appropriate however a
85 number of small changes were suggested.
86

87 The *Vision* was changed to read: "The College strives for excellence in self-regulation in service
88 of the public interest."

89 The *Mission* was changed to read: "To regulate the practice of psychology in servicing and
90 protecting the public interest."
91

92 The Committee introduced a new heading, *Strategies*, to specify the way in which the College
93 *Mission* would be accomplished. In reviewing these, Council noted that the concept of
94 "Promoting cohesiveness of the profession" had been removed and "Acting in a responsibly
95 transparent manner" added. The Council considered the new item "Enhancing the Council's
96 governance practices", but suggested that it be changed to "Advancing the Council's
97 governance practices".

98 The Committee provided Council with a “tracked changes” version as well as a “clean” version
99 of their recommendations.

100
101 **It was MOVED Delamere**

102 **That the Strategic Direction 2017-2022 be approved.**

CARRIED

103
104 **Action Item Staff:**

105 To present the new Strategic Direction Implementation Chart at the next Council Meeting and to update
106 the wall chart in Council Chambers

107
108 **2016.04.04 Policy Issues**

109
110 **.04a Transparency Initiatives and MOHLTC Consultations**

111 The Registrar presented Council with an update on proposals being suggested by the Ministry
112 regarding changes to the *Regulated Health Professions Act (RHPA)*. These pertain to member
113 information to be placed on College public registers as well as proposals directed at
114 strengthening the sexual abuse prevention provisions.

115
116 At the direction of Council, the College had conducted an initial member consultation on
117 proposed changes to the information to be available on the public register. The second stage of
118 this consultation was deferred pending further exploration of issues raised from the initial
119 feedback. Given that the Ministry is moving to develop a consistent approach among all
120 Colleges regarding information on public registers, the Council agreed with the Executive
121 Committee recommendation that the College continue to defer further member consultation
122 regarding the “Transparency Initiatives”.

123
124 **Action Item Council:**

125 Defer further consultations regarding the “Transparency Initiatives” until such a time as there is clarity
126 regarding the Ministry’s actions related to their transparency proposals.

127
128 In addition to the changes regarding member information on public registers, the Ministry, in
129 consideration of the recommendations of the Sexual Abuse Prevention Task Force, has
130 suggested six proposals for changes to the *RHPA* regarding sexual abuse prevention
131 (Strengthening Sexual Abuse Provisions in the *RHPA*) along with other proposals: Increasing
132 Transparency of Health Regulatory Colleges’ Operations and Improving the College
133 Complaints, Investigations and Discipline Processes.

134
135 The Registrar provided Council with a copy of the College’s response to the proposals as well
136 as the response from the Federation of Health Regulatory Colleges of Ontario (FHRCO).
137 Feedback was requested within a very short timeframe that did not permit consultation with the
138 Council or membership.

139
140 **.04b Standards of Professional Conduct Review – Status Update**

141 Revisions to the *Standards of Professional Conduct* were approved by Council for circulation to
142 members at its September meeting. The consultation was distributed to members on October
143 13, 2016 with a request that feedback be received by December 12, 2016. To date, 34
144 responses have been received although it is anticipated that further responses will be received.
145 The detailed feedback will be reviewed by the Client Relations Committee with
146 recommendations brought forward to the Executive and Council.

Action Item Client Relations Committee:

Review and report to the Executive Committee on the responses to the *Standards of Professional Conduct Review*

.04c Fees By-Law Amendment Update

Amendments to the *By-Law 18: Fees* were approved by Council for circulation at its September meeting. The consultation was distributed to members on October 7, 2016 with a request that feedback be received by December 15, 2016. To date the College has received 41 responses. The Registrar provided Council with a sample of these responses. The Council vote to amend the *By-Law 18* will take place at the March meeting at which time all potential responses will have been received.

Action Item Staff:

Report on *By-Law 18: Fees* consultation to be brought to March meeting of Council for consideration.

.04d Examination Accommodation Policy

The Registrar provided Council with the *Examination Accommodation Policy* which was endorsed in principle at the September 2016 Council meeting. The policy provided to Council was only a part of the full documents that Council reviewed in September. The Director of Registration clarified that the full document will be included in the registration application as well as the registration guidelines for candidates. The policy reflects the procedural steps.

It was MOVED Minnes

That Policy II-2(iv): *Accommodation for College Administered Examinations* be approved.
CARRIED

Action Item Staff:

To incorporate the Examination Accommodation Policy into the *Policies and Procedures Manual*

.04e Policy I-13: Non-Voting Psychological Associate Seat on Council

At the Council meeting in June 2016, the question was raised regarding the status the non-voting Psychological Associate seat as it relates to eligibility to be considered a "Council Member" for the purposes of appointment to statutory committees. A review of this matter suggested that it would be problematic to consider the non-voting seat as a "Council Member" in comprising committees. Specifically, the "non-voting" status would be carried forward by this individual. This could then result in there being a non-voting Executive Committee member or a non-voting individual on a Discipline Panel member.

For greater clarity, the Executive Committee recommended that Policy I-13: *Non-Voting Psychological Associate Seat on Council* be amended to include a specific statement noting that for purposes of *By-law 21: Committee Composition*, the non-voting Psychological Associate is a member of the College, not of the Council.

It was MOVED Cohen

That Policy I-13: *Non-Voting Psychological Associate Seat on Council* be amended by adding the following:

Committee Composition

11. For the purpose of *By-Law 21: Committee Composition*, the individual holding the non-voting psychological associate is a member of the College, not of the Council.

CARRIED

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Action Item Staff:

To make the amendment to Policy I-13: *Non-Voting Psychological Associate Seat on Council* in the *Policies and Procedures Manual*.

.04f Shaping the Future – Implementation Plan Update and Membership Data

The Registrar provided Council with a copy of the *Briefing Note* that was forwarded to Ms. Allison Henry at the Ministry of Health and Long-Term Care on November 14, 2016 as directed by Council. A concern was raised that those reviewing just the *Briefing Note* will not have sufficient information to make a decision. The Registrar reported that the Ministry does have the full report drafted in 2013.

As requested by Council at the September 2016 meeting, the Registrar provided Council with updated member data similar to that which was collected from the *Shaping the Future Task Force Report* in 2013. Council reviewed the updated data which led to a discussion about diversity within the profession and the nature of services being provided to diverse populations. It was suggested that this item be brought to the next meeting of the Directors of Clinical Training for discussion. The discussion could include the nature of diversity training as well as the student demographics with respect to diverse backgrounds being trained in the various areas of practice. It was also noted that this could be a topic for the Associations to consider.

Action Item Staff:

Bring this issue to their next meeting of the Directors of Training Program

.04g Executive Committee Role

The Executive Committee has had a number of discussions regarding the role of the Executive stemming from recommendations of Richard Steinecke's Executive Committee Audit Report. When the Executive Committee met they examined the audit report, the current policy and by-laws as well as information regarding the role of the Executive Committee at other health regulated Colleges.

Resulting from these discussions, the President provided Council with a list of ideas regarding the Executive Committee's role. Council agreed with the general proposal that the Executive should examine issues before they come to Council as an effective way to get an early focus on issues. Council made suggested changes to some of the language for example, suggesting that the Executive "facilitate" rather than be "responsible for". Council referred the "Role of the Executive Committee" back to the Executive to be discussed with a revised "Role of the Executive Committee" policy to be presented at the next Council meeting.

Action Item Executive Committee:

To take the suggested recommendations and revise Policy II-1(i) *Terms of Reference/Role* of the Executive Committee and present it at the Council meeting in March.

2016.04.05 Business Issues**.05a Financial**

(1) Variance Report to August 31, 2016

Council received the Variance Report for the period ending August 31, 2016 which included explanation for items that exceeded the budget by more than \$5,000 as well as items that were underspent by more than \$10,000. In review of the cost of sales it was noted that there was a

250 loss of \$41,000 from the June Oral Exams and that this loss will increase should the changes to
 251 the Fee's By-law be implemented.

252
 253 **It was MOVED Hebert**
 254 **That the Variance Report to August 31, 2016 be accepted.** **CARRIED**

255
 256 (2) Statement of Revenue and Expenses to August 31, 2016

257
 258 **It was MOVED Hebert**
 259 **That the Statement of Revenue and Expenses to August 31, 2016 be accepted.** **CARRIED**

260
 261 (3) Report from Finance and Audit Committee
 262 The President gave an oral report of the FAC's November 17, 2016 teleconference. In January
 263 the FAC will examine the budget.

264
 265 **It was Moved Hebert**
 266 **That the Finance and Audit Committee Report be received.** **CARRIED**

267
 268 **.05b Report from meetings with:**

269 **Training Program Directors**
 270 Dr. Patricia Minnes gave an oral report on the meeting of the Training Program Directors of
 271 November 8, 2016. The Directors are reporting a trend in the lack of students specializing in
 272 Rehabilitation Psychology and Forensic/Correctional Psychology and with the population of
 273 seniors.

274
 275 **Internship Program Directors**
 276 Dr. Dorothy Cotton gave an oral report on the meeting of the Internship Program Directors of
 277 November 8, 2016. The Internship Directors reported that they have had issues with some
 278 students who accepted American internships, being turned back at the US border. They noted
 279 this might result in an increase in the number of applicants for Canadian internships while the
 280 number of available spots may decrease.

281
 282 **.05c Accessibility of Website**

283 Given the healthy state of the College's financial position Council requested information on the
 284 cost of bringing the College's website up to the full accessibility standards as prescribed by the
 285 Accessibility for Ontarians with Disability Act (AODA). The Registrar noted that the College is
 286 not required to meet these standards due to the staff size, and because we are not on the list of
 287 designated organizations. He reported that it would cost the College \$1000 to do a full review of
 288 the website. The last estimate at what it would cost to bring the website to the full AODA
 289 standards was around \$250,000. Council decided not to move forward with this at this time.

290
 291 **2016.04.06 Other Business**

292
 293 **.06a Set Date for Elections in 2017**

294 The Council confirmed that Elections in Districts 4 & 7 would be held on March 31, 2017

295
 296 **It was MOVED Levin**
 297 **That the Elections to Council in Districts 4 & 7 be held on March 31, 2017.** **CARRIED**

298
 299

300 **.06b Next Meetings of Council**

-
- 301 o Training March 23, 2017 & Meeting March 24, 2017
302 o June 23, 2017
303 o Training September 14, 2017 & Meeting September 15, 2017
304

305 **2016.04.07 Adjournment**

306
307 There being no further business,

308
309 **It was MOVED Cohen**
310 **That the Council Meeting be adjourned.**

CARRIED

311
312 The Council Meeting was adjourned at 1:20PM
313

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319 _____
Lynette Eulette, Ph.D., C.Psych., President

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324 _____
Ruth Berman, Ph.D., C.Psych., Vice-President

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327
328 **Minutes approved at the Council Meeting on March 24, 2017**



THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO

Action List
College Council 2016.04 – December 2, 2016

Item:	Responsibility:	Action:	Status:
2016.03.04c	Staff	During the call for Committee appointments in the spring, a letter be sent to all Psychological Associates and the OAPA	For Action in April 2017
2016.03.04c	Council	Defer further discussion on <i>By-Law 21: Committee Composition</i> until results from the above action item have been reviewed	Deferred
2016.03.04d	Council	Defer further discussion on amendments to <i>By-Law 20: Elections</i> until March 2017 Council Meeting	Deferred
2016.04.03b	Staff	Present the new Strategic Direction Implementation Chart at the next Council Meeting	On Agenda
2016.04.03b	Staff	Update the wall chart in the Council Chambers	Completed
2016.04.04a	Council	Defer further consultations regarding the "Transparency Initiatives" until such a time as there is clarity regarding the Ministry's actions related to transparency proposals in Bill 87	Deferred
2016.04.04b	Client Relations Committee	Review and report to the Executive Committee on the responses to the <i>Standards of Professional Conduct Review</i>	Completed

2016.04.04c	Staff	Bring Motion to approve <i>By-Law 18: Fees</i> amendment to March meeting of Council	On Agenda
2016.04.04d	Staff	Incorporate the Examination Accommodation Policy into the <i>Policies and Procedures Manual</i>	Completed
2016.04.04e	Staff	Make the amendment to Policy I-13: <i>Non-Voting Psychological Associate Seat on Council</i> in the <i>Policies and Procedures Manual</i>	Completed
2016.04.04f	Staff	Take question of diversity within the profession as represented by students and the nature of services being provided to diverse populations to next meeting of the Directors of Clinical Training	In Process
2016.04.04g	Executive Committee	Take suggested recommendations and revision of Policy II-1(i) <i>Executive Committee: Terms of Reference/Role</i> to Council meeting in March	On Agenda

President's Report
Council Meeting - March 24, 2017

At the December Council meeting the Strategic Direction for 2017-2022 was approved. You will see that we have introduced a new Agenda format which highlights how each agenda item relates to our Strategic Direction. Many of the items on the Agenda have been 'in process' for Council since early fall 2016. Most notably, we will be considering motions related to member consultations that occurred over the past few months pertaining to *Bylaw 18: Fees*, the *Standards of Professional Conduct*, and the QA Continuing Professional Development program.

Following the last Council meeting, I participated in two professional development activities. I was involved in the oral examinations, which always present new learnings for me given the discussions with colleagues and the interviews with our supervised practice members. Secondly, I attended two days of Regulatory Council Member Training offered by the Federation of Health Regulatory Colleges of Ontario (FHRCO). The first day was led by Deanna Williams and covered various governance issues that are particularly relevant to regulatory bodies. The topic for the second day was the *Regulated Health Professions Act, 1991 (RHPA)* led by Richard Steinecke. This session included discussions about the public interest, the regulatory framework, conflict of interest, and accountability. I was joined by D'Arcy Delamere, public member, on the first day, and Judy Cohen, public member, on the second. It was a timely and relevant training experience that provided opportunities to discuss the concepts and ideas as they relate to our College.

During the month of January, I was involved in the Registrar's Performance Review. This is a four-step process with specific roles for the President, the Executive Committee, the Registrar, and the Council. In the first step, as President, I met with the Registrar to talk about the past year in relation to the past year's objectives and goals. This review was the first for Dr. Morris since his transition to Registrar from Deputy Registrar, and it spanned the period November 2015 to December 2016. Next, I presented a summary of the discussion with the Registrar to the Executive and the Executive developed a consensus opinion of the Registrar's performance on specific functions and provided a salary recommendation. This occurred at the February 3, 2017 Executive Committee meeting (see Executive Committee Report). Following this, I met with Dr. Morris on March 2, 2017 to provide feedback from the Executive. The final step involves the Council and is on the Council Meeting Agenda and will take place *in camera*.

The Finance and Audit Committee (FAC) met in January to consider the College's financial reports to November 30, 2016 and the draft 2017-2018 budget. This information was subsequently considered by the Executive Committee and is on the Council Meeting Agenda.

Respectfully submitted,
Lynette Eulette



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

To: Council

Date: March 23, 2017

From: Dr. Rick Morris, Registrar & Executive Director

CC:

Re: Registrar's Report

Psychotherapy Working Group Update

The Colleges involved in the Psychotherapy Working Group, in conjunction with the Ministry, initiated a broad stakeholder consultation regarding the clarification document; *Understanding When Psychotherapy is a Controlled Act*. The purpose of the survey was to evaluate the effectiveness of the document as an aid in differentiating when the provision of psychotherapy would constitute a controlled act and when such services remain within the public domain. The survey was sent to members of the Colleges to whom the controlled act is relevant, professional associations as well as other non-regulated groups and individuals who may be impacted by the legislation. Our College distributed the survey to members, the Canadian Psychology Regulators, as well as to OPA, OAPA and CPA.

In total, 2,670 respondents completed the survey. Of these, 58% were regulated health professionals providing psychotherapy; predominantly from the Colleges of Psychotherapy, Psychology, and Social Work/Social Service Work. Only about 8% of respondents were providers of psychotherapy not registered with a College.

Overall, regulated health professionals providing psychotherapy rated the clarification document as more beneficial to their understanding as compared to providers not registered with a College. Many respondents chose to provide comments. Some of the themes of the comments included:

- requests for more specificity on the distinction between the controlled act and psychotherapy outside the controlled act;
- recommendations for the case examples to clarify this distinction;
- need for definitions of “serious/seriously” as well as “psychotherapeutic technique”; and,
- clarification on who may assess or diagnose a client/patient and how this is done.

The Psychotherapy Working Group and representatives of the Ministry met to discuss the survey results and determine next steps. Concern was expressed by the Ministry representatives that the survey suggested there continued to be confusion with regard to what was encompassed in the controlled act. In considering the survey comments, it was the general view of the Working Group that providing case examples, as suggested, would not be beneficial as every example would lead to more questions. It was also noted that the distinction between the controlled act, and psychotherapy in the public domain, rested on an evaluation of the seriousness of the client/patient’s disorder and impairment. The Working Group felt that such distinctions could be made by each College, for its own members, but it was not the role of the Colleges to educate non-members about as when a client met the criteria for ‘serious disorder’ causing ‘serious impairment’; the threshold for the controlled act; or how one might go about making this determination.

The Working Group strongly recommended that the controlled act be proclaimed and that any necessary clarifications be handled as they arose based on actual situations rather than making further

attempts to provide clarification based on hypothetical concerns. The Working Group expressed the view that since the government had decided that psychotherapy with some individuals to be potentially harmful, it would not be in the public interest to let this disappear as a result of “sunsetting” of the unproclaimed controlled act. The Ministry representatives indicated they would take this information back to those at the Ministry who would be making the decision.

Public Member Update

I am pleased to announce that Ms. Judy Cohen has been reappointed as a public member of Council. Her new term runs until March 2020. The official reappointment letter may be found in the “For Your Information” section of the Council materials. We are very pleased to have Judy back with us for another three years.

Unfortunately, at the same time as I am announcing this reappointment, I wish to inform you that Ms. Astra Josie Rose has decided not to seek reappointment as a public member to Council. Josie has been a Council member since April 2014. During this time she has served on a variety of Committees generously contributing her talents, ideas and time. In notifying me of her decision, Josie indicated that, “it was a delight serving on Council. I learned a lot from all of you and had the opportunity to meet some incredible individuals.” We thank Josie for her service to our Council and wish her all the best.

We have been in touch with the public appointments office regarding our current vacancies.

A handwritten signature in black ink, appearing to read "R. Morris". The signature is written in a cursive style with a large, prominent "M".



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

To: Council

Date: March 24, 2017

From: Dr. Rick Morris
Registrar & Executive Director

CC:

Re: Financial Materials

Attached are the Council meeting financial materials providing information regarding the financial position of the College for the six month period ending November 30, 2016.

This information has been reviewed by both the Finance and Audit Committee and the Executive Committee. A review of the *Balance Sheet As of November 30, 2016* indicates that the College continues to be in a very sound financial position.

The *Statement of Revenue and Expenses* provides a high level view of year-to-date *Revenue, Cost of Sales* and *Expenditures* comparing these to budget year-to-date.

The *Variance Report to November 30, 2016* provides an explanation of line items noted to be “material” related to income or expenditures as compared to the budget. This is obtained from a review of the detailed *Statement of Revenue and Expenses*. In addition to the usual Line Item explanations provided, the *Variance Report to November 30, 2016* has been expanded to include A. *Line Items Where Income was less than Expected Budget Year-to-Date by at Least \$5000*. This was added as “income less than budgeted” is similar to “expenses that exceed budget” as both indicate areas which would contribute to a budget deficit. They are included in this report to increase transparency.

The *Variance Report to November 30, 2016* identifies three line items where income was less than expected (A.). Four cost centres were identified which exceed the budget by at least \$5,000 (B.) and five areas are noted as being underspent by more than \$10,000 (C.). The report also provides an analysis of the College’s Cost of Sales (D.).

The *Balance Sheet*, showing the College’s current assets and liabilities, presents the position of the College at the end of six months as compared to last year at six months. As noted in the line *Profit (loss) for period* (2nd line from bottom), overall earnings exceeded expenses by approximately \$118,920 for the period ending November 30, 2016.

The *Investment Report to November 30, 2016* describes the College’s various investments including Cash Equivalents and Short and Long Term Investments.

If you have any questions or wish more detailed information, please do not hesitate to contact me.



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

To: Council **Date:** March 24, 2017
From: Dr. Lynette Eulette **CC:**
Re: **Finance and Audit Committee (FAC) Report**

The FAC met by teleconference on January 26, 2017. The Committee reviewed the Unaudited Financial Statements, the Variance Report, and the Investment Report for the six month period ending November 30, 2016. The Committee voted to receive these reports.

The Committee also reviewed the Draft Budget for 2017-2018. The Registrar provided the Committee with an overview of the budget and answered questions from members. The Committee accepted the draft budget for presentation to the Executive Committee at its next meeting.

A statement of compliance regarding College remittances for government taxes (health tax, payroll tax) was presented and received by the Committee.

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

Respectfully submitted,
Lynette Eulette (Chair)

THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
STATEMENT OF REVENUE & EXPENSES
6 Periods Ended 30/11/2016

	2016-2017 Budget	Budget YTD	2016-2017 YTD	2016-2017 % To Date	Expected % To Date	% Variance YTD	\$ Variance YTD	Year-End 31-May-17
REVENUE	3,404,029	1,702,015	1,608,359	47%	48%	-6%	-93,655	3,352,799
COST OF SALES	273,700	142,350	140,193	51%	52%	-2%	-2,157	273,700
GROSS MARGIN	3,130,329	1,559,665	1,468,166	47%	47%	-6%	-91,498	3,079,099
EXPENDITURES:								
Governance	119,600	67,050	40,399	34%	56%	-40%	-26,651	99,100
Registration	101,400	50,700	38,697	38%	50%	-24%	-12,003	101,400
Client Relations, Communications & Education	37,700	44,450	16,988	45%	50%	-62%	-27,462	33,200
Quality assurance	25,400	12,700	18,033	71%	50%	42%	5,333	25,400
Investigations and resolutions	104,300	52,150	55,040	53%	50%	6%	2,890	121,075
Hearings	281,400	156,150	79,105	28%	55%	-49%	-77,045	240,650
Government relations	0	-	-	-	-	-	-	0
Liaison (Professional Organizations)	38,700	22,200	19,566	51%	54%	-12%	-2,634	38,014
Administration	2,544,063	1,272,032	1,176,031	46%	50%	-8%	-96,000	2,443,300
Total Expenditures	3,252,563	1,677,432	1,443,860	44%	51%	-14%	-233,572	3,102,139
EXCESS OF REVENUE OVER EXPENDITURES	-122,234	(117,767)	24,307	-20%		-121%	142,074	-23,040

THE COLLEGE OF PSYCHOLOGISTS

Balance Sheet
As Of November 30, 2016

Unaudited

ASSETS

	Current Year	Prior Year
Current assets:		
Petty Cash	200.00	200.00
Bank	1,272,181.68	576,639.27
Cash Equivalents	2,202,376.84	3,388,584.39
Short Term Investments	3,296,347.91	2,466,387.54
Accounts Receivable Control	27,670.65	30,120.54
Interest Receivable	4,786.39	3,187.07
Prepaid Expenses	34,838.70	17,065.24
Total current assets	6,838,402.17	6,482,184.05
Fixed assets:		
Furniture & Equipment	51,385.55	50,983.30
Computer Equipment	61,304.85	58,468.57
Leasehold Improvements	197,547.38	197,547.38
Website & Database Development	264,257.85	156,464.20
Less accumulated depreciation	383,218.31	270,145.97
	191,277.32	193,317.48
Other assets:		
Long Term Investment	514,585.91	505,106.98
	514,585.91	505,106.98
	7,544,265.40	7,180,608.51

LIABILITY AND SHAREHOLDER'S EQUITY

Current liabilities:		
Accounts Payable Control	71,705.98	27,496.44
Accounts Payable Other	189,713.09	151,538.36
Employee Tax Deductions Payab	18,374.69	18,157.41
Prepaid Fees	1,509,796.13	1,487,410.56
Total current liabilities	1,789,589.89	1,684,602.77
Long term liabilities:		
	0.00	0.00
Shareholder's equity:		
Current Year's Profit	308,532.44	0.00
Retained Earnings	2,048,287.58	2,048,287.58
Investigations & Hearings Reserve Fund	748,672.00	748,672.00
Contingency Reserve Fund	979,000.00	979,000.00
Fee Stabilization Reserve Fund	1,075,000.00	1,075,000.00
Website & Database Development Reserve Fund	243,810.25	243,810.25
Premises Reserve Fund	152,453.00	152,453.00
Fair Registration Practices Reservè Fund	80,000.00	80,000.00
Profit (loss) for period	118,920.24	168,782.91
Total shareholder's equity	5,754,675.51	5,496,005.74
	7,544,265.40	7,180,608.51



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

To: Council **Date:** March 24, 2017
From: Dr. Rick Morris, Registrar & Executive Director **CC:**
Re: Staff Presentations: December 2, 2016 to March 24, 2017

Dr. Rick Morris, Registrar & Executive Director

- December 4, 2016: *Tricky Issues in Professional Practice*, Barbara Wand Seminar, Toronto
- December 7, 2016: *Oral Examiners Briefing*, December Oral Examinations, Toronto
- January 13, 2017: *College Update*; Association of Ontario Psychology Chiefs of School Boards, Toronto
- January 16, 2017: *The Regulation of the Practice of Psychology in Ontario*, Ethics Class, Queen's University, Kingston
- January 19, 2017: *Ethical Issues in Professional Practice*, Ottawa Mentorship Group, Royal Ottawa Mental Health Centre, Ottawa
- January 20, 2017: *Tricky Issues and Ethical Dilemmas*, Students' Case Conference, University of Ottawa, Ottawa
- January 20, 2017: *Ethical Issues in Professional Practice*, City Wide Interns Seminar Series, University of Ottawa, Ottawa
- February 9, 2017: *Ethical Issues in Professional Practice*, Ottawa Academy and Mentorship Group, Royal Ottawa Mental Health Centre, Ottawa
- February 10, 2017: *College Update on Current Initiatives Presentation and Panel Discussion with OPA and CPA*, Community Psychology Day 2017, The Ottawa Hospital, Ottawa
- March 1, 2017: *Ethical Issues in Profession Practice – Part 1*, Baycrest Centre for Geriatric Care, Toronto
- March 8, 2017: *Ethical Issues in Profession Practice – Part 2*, Baycrest Centre for Geriatric Care, Toronto
- March 16, 2017: *The Regulation of the Practice of Psychology in Ontario*, Ethics Class, University of Waterloo, Waterloo



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

To: Council **Date:** March 24, 2017
From: Dr. Lynette Eulette **CC:**
Re: **Executive Committee Report**

Committee Members:

Ruth Berman, Ph.D., C.Psych.	Council
Judy Cohen	Council, Public Member
D'Arcy Delamere	Council, Public Member
Lynette Eulette, Ph.D., C.Psych.	Council
Robert Gauthier, M.Sc., M. Ed, C.Psych.Assoc.	Council
Gilles Hebert, Ph.D., C.Psych.	Council

The Executive Committee met on February 3, 2017. The agenda had a significant number of policy and business items. The policy items were primarily related to the College consultations that had been completed, and are on the Council Meeting Agenda. The business issues related to the finalizing the role of the Executive, Council and Executive training, reviewing the College financial statements to November 30, 2016 and the proposed budget for 2010-2018, and the status of the Council elections for this year.

Another significant matter for this Executive Committee meeting concerned the Registrar's Performance Review. As noted in the President's Report, the review is a process that involves four steps. The Executive received the summary report from the President and then reviewed the Registrar's performance with regards to specific functions (See Policy I-12(a)). The Executive also considered a salary recommendation, which will be presented to Council at today's meeting in an *in camera* session.

The Executive Committee will be holding the second of this year's out-of-town receptions in May in London, ON. The date for the reception is May 16, 2017 followed by the Executive Committee meeting on May 17, 2017. We are looking forward to this opportunity to reach out to College members and talk with them about the practice of psychology in their community.

Respectfully submitted,
Lynette Eulette, Chair

Registration Committee Report to March 24, 2017 Council Meeting

Committee Members:

Marnee Maroes, Ph.D., C.Psych.	Chair, Registration Committee, Professional Member
Ester Cole, Ph.D., C.Psych.	Professional Member
Robert Gauthier, M.Sc., M.Ed., C.Psych.Assoc.	Professional Member of Council
Michael Grand, Ph.D., C.Psych.	Professional Member of Council, Academic
Jaffar Mohammad Hayat	Public Member of Council
Astra Josie Rose	Public Member of Council
Patricia Minnes, Ph.D., C.Psych.	Professional Member of Council, Academic
Marjory Phillips, Ph.D., C.Psych.	Professional Member
Wanda Towers, Ph.D., C.Psych.	Professional Member

Staff Support to Registration Committee:

Lesia Mackanyn, Director: Registration
 Myra Veluz: Senior Registration Assistant
 Shannon Elliott: Administrative Assistant: Registration
 Kelly Russell: Administrative Assistant: Registration

Meetings of the Registration Committee

November 17, 2016: Panel A

The Registrar referred a total of 37 cases to Panel A.

These cases included:

- 5 academic credential reviews;
- 21 cases where retraining was required for supervised practice members;
- 1 review regarding examination eligibility;
- 1 review of a reciprocity application;
- 9 requests for change of area of practice.

November 18, 2016: Panel B

The Registrar referred a total of 35 cases to Panel B.

These cases included:

- 5 academic credential reviews;
- 16 cases where retraining was required for supervised practice members;
- 2 reviews of examination outcomes;
- 12 requests for change of area of practice.

January 19, 2017: Panel B

The Registrar referred a total of 24 cases to Panel B.

These cases included:

- 3 academic credential reviews;
- 14 cases where retraining was required for supervised practice members;
- 1 review of an examination outcome;
- 2 applications for removal or modification of a limitation and/or condition;
- 4 requests for change of area of practice.

January 20, 2017: Panel A

The Registrar referred a total of 30 cases to Panel A.

These cases included:

- 4 academic credential reviews;
- 20 cases where retraining was required for supervised practice members;
- 1 review of an examination outcome;
- 1 application for removal or modification of a limitation and/or condition;
- 4 requests for change of area of practice.

January 19, 2017 Plenary Session

A Plenary Session was held on the afternoon of January 19, 2017. The Committee continued its review of the various documentation and guidelines for retraining for candidates and supervised practice members. Suggestions from the September 2016 Plenary Session were incorporated and the Committee made some further suggestions for improvement to the retraining plan proposal form in particular.

The Committee also undertook a review of the current *Declaration of Competence Form* and suggested modifications to the grid so that applicants could accurately and easily indicate proposed practice areas and client groups. A modified form will be provided to the Committee at a future Plenary Session for approval.

Marnee Maroes, Ph.D., C.Psych.
Chair, Registration Committee

**Discipline Committee Report to Council
(December 1, 2016 – February 28, 2017)**

Committee Members:

Professional:

Robert Gauthier	Chair	Council
Ruth Berman		Council
Dorothy Cotton		Council
Lynette Eulette		Council
Michael Grand		Council
Gilles Hébert		Council
Elizabeth Levin		Council
Denise Milovan		Council
Patricia Minnes		Council
Clarissa Bush		College
Allyson Harrison		College
Jan Heney		College
Tim Hill		College
Maggie Mamen		College
Mary Ann Mountain		College
Donna Reist		College
Pamela Wilansky		College

Public:

Kristin Bisbee
Judy Cohen
D'Arcy Delamere
Jaffar Mohammad Hayat
Donna McNicol
Josie Rose
Ethel Teitelbaum

In the 3rd Quarter, there was one matter referred to the Discipline Committee, currently at the Notice of Hearing stage. Information regarding the referral is available on the Public Register: https://members.cpo.on.ca/public_register/show/914.

No hearings took place during this quarter.

In the 2nd Quarter, a panel of the Discipline Committee adjourned a matter on the basis of the Member's Undertaking and Agreement with the College.

The Discipline Committee's Order became available after the 2nd Quarter Report had already been completed, and is thus reported here. Information on the matter, as well as the full text of the Undertaking and Agreement, is available on the Public Register: https://members.cpo.on.ca/public_register/show/19200.

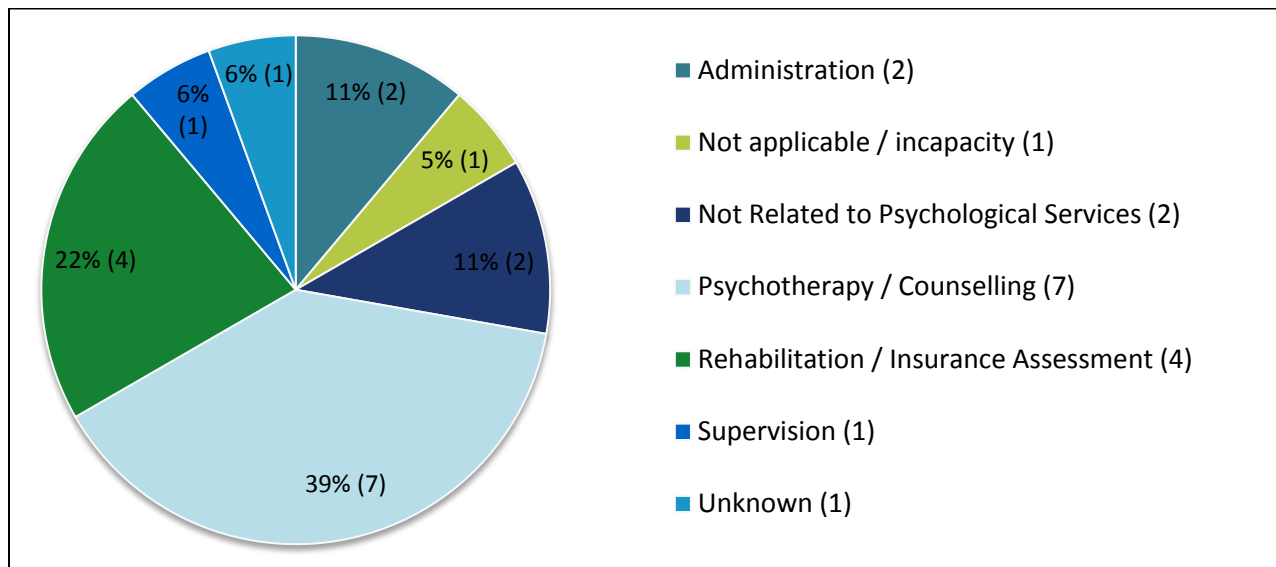
Robert Gauthier, M. Sc., M.Ed., C.Psych.Assoc.
Discipline Committee Chair
March 10, 2017

Inquiries, Complaints and Reports Committee Report to Council
Third Quarter December 1, 2016 to February 28, 2017¹

New Complaints and Reports

In the 3rd Quarter, the College received 16 new complaints and opened one new Registrar's Investigation and one new Health Inquiry, for a total of 18 new matters.

Seven of these new matters arose from psychotherapy/counselling services and four from rehabilitation/insurance assessments. Complaints and reports this quarter also relate to administration and supervision, while others do not relate to psychological services.



ICRC Meetings

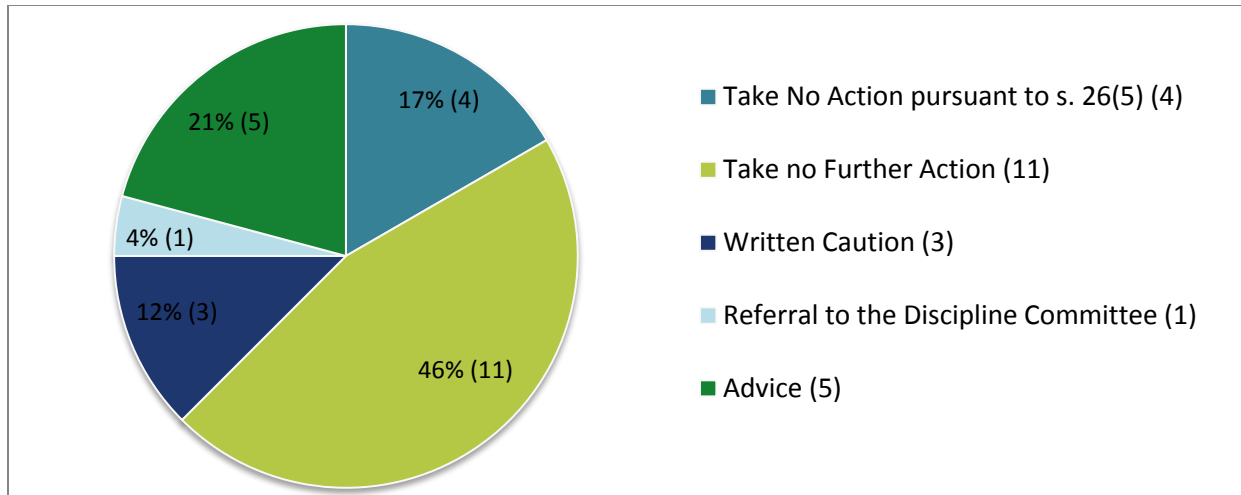
The ICRC met on December 12, 2016, January 26, 2017 and February 27, 2017. A total of 16 cases were considered on these dates. In addition, 13 teleconferences were held to consider 20 cases. The next ICRC meeting will take place on April 25, 2017.

ICRC Dispositions

The ICRC disposed of 24 cases during the 3rd Quarter. The ICRC decided to take no further action in 11 of these cases. In an additional four cases, the ICRC decided to take no further action pursuant to section 26(5) of the Health Professions Procedural Code, believing these complaints to be frivolous, vexatious, made in bad faith, moot or otherwise an abuse of process.

Of the remaining nine cases, the ICRC decided to provide Advice in five, and Written Cautions in three. The ICRC decided to refer one case to the Discipline Committee.

¹ Complete statistics upon which this Report is based are appended at the end of this document.



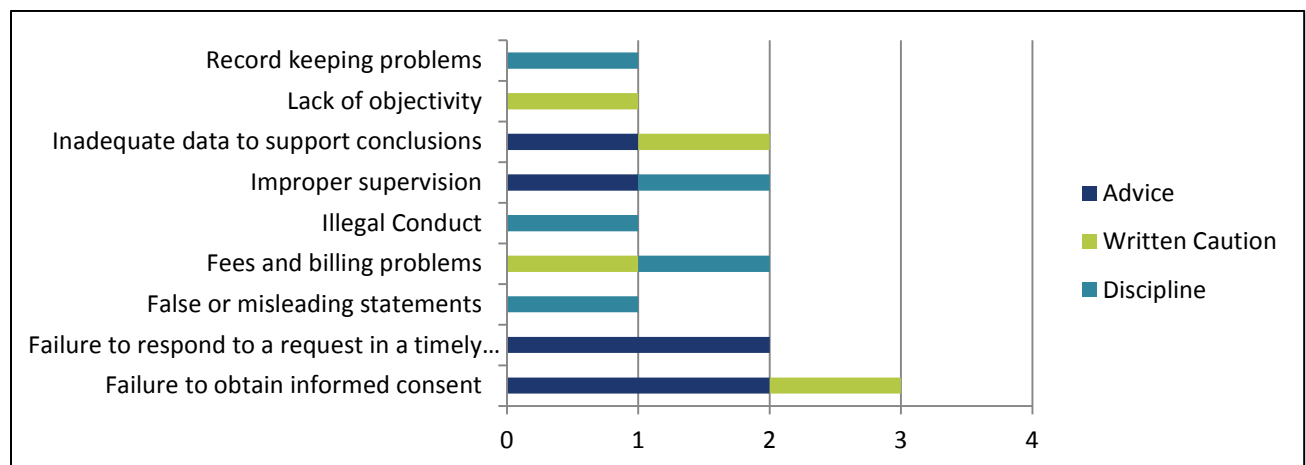
Disposition of Allegations

Each case considered by the ICRC may include a number of allegations, and the Committee will consider each allegation individually. Each case may therefore include a number of dispositions, although only the strongest one will be noted for statistical purposes. For example, a panel of the ICRC may decide to issue both advice and a written caution with respect to different allegations made in a single complaint. While the overall disposition will be noted as a Written Caution, the College maintains information regarding all the dispositions.

In the 3rd quarter, the 24 cases disposed of included the consideration of 60 allegations.

The most common allegations were: bias and lack of objectivity (9); inadequate data to support conclusions (8); failure to obtain informed consent (8); failure to respond to a request in a timely manner (5); conduct unbecoming a member of the CPO (4); improper supervision (4); and fees and billing problems (3).

The ICRC provided Advice with respect to six allegations and Written Cautions with respect to four allegations. Five allegations were referred to the Discipline Committee. The substance of these allegations is illustrated below.



Health Professions Appeal and Review Board

In the 3rd Quarter, four ICRC decisions were appealed to the Health Professions Appeal and Review Board (“HPARB”). Three decisions were received by the College from HPARB regarding previous appeals. In all three cases, the ICRC’s decisions were confirmed.

Committee Members

Professional - Council

Ruth Berman, Ph.D., C.Psych.
Dorothy Cotton, Ph.D., C.Psych.
Elizabeth Levin, Ph.D., C.Psych.

Professional

Sara Hagstrom, Ph.D., C.Psych. - Chair
Diane Addie, Ph.D., C.Psych.
Ian Brown, Ph.D., C.Psych.
Debbie Nifakis, Ed.D., C.Psych.
Gilles Boulais, Ph.D., C.Psych.
David Smith, Ph.D., C.Psych.
Glenn Webster, M.Ed., C.Psych.Assoc.

Public Members

Kristin Bisbee
Judy Cohen
Ethel Teitelbaum
Donna McNicol
D'Arcy Delamere

Respectfully submitted,

Sara Hagstrom, Ph.D., C.Psych.
Chair: Inquiries, Complaints and Reports Committee
March 8, 2017

Appendix

**Inquiries, Complaints and Reports Committee Report to Council
Third Quarter December 1, 2016 to February 28, 2017**

New Matters, by Case Type

YTD

	Q1	Q2	Q3	Q4	Current	Previous
Complaints	16	16	16		48	40
Registrar's Investigations	2		1		3	1
Health Inquiries	0		1		1	3
Total	18	16	18	0	52	44

New Matters, by Nature of Service

YTD

	Q1	Q2	Q3	Q4	Current	Previous
Administration	2		2		4	0
Capacity Assessment		1			1	0
Consultation					0	1
Corrections Assessment					0	1
Custody & Access / Child Welfare Assessment	2	1			3	8
Educational Assessment	3	1			4	5
Industrial / Occupational Assessment	1				1	1
Mediation					0	0
Neuropsychological Assessment	1	3			4	0
Not applicable / incapacity			1		1	3
Not Related to Psychological Services	3	2	2		7	3
Other Psychological Assessment					0	0
Psychotherapy / Counseling	2	7	7		16	12
Rehabilitation / Insurance Assessment	4	1	4		9	6
Supervision			1		1	1
Teaching / Training					0	2
Unknown			1		1	1
Total:	18	16	18	0	52	44

Health Professions Appeal and Review Board

YTD

	Q1	Q2	Q3	Q4	Current	Previous
Reviews Requested	2	2	4		8	16

YTD

	Q1	Q2	Q3	Q4	Current	Previous
Decision Confirmed	2	1	3		6	5
HPARB F&V					0	1
Decision Unreasonable					0	0
Notice to not Proceed	1				1	1
Withdrawn					0	3
Total:	3	1	3	0	7	10

Inquiries, Complaints and Reports Committee
Report to Council
Third Quarter
December 1, 2016 to February 28, 2017

Dispositions by Case

	YTD					
	Q1	Q2	Q3	Q4	Current	Previous
Complaint Withdrawn		1			1	0
Closed – no jurisdiction					0	0
In Abeyance					0	0
Incapacity Investigation					0	0
Other – Advice	3	2	5		10	12
Other - Advice with Undertaking					0	0
Other - Take no Further Action	2	8	11		21	23
Other - Take no Further Action and Undertakings					0	0
Other - Oral Caution					0	2
Other - Oral Caution and Undertakings					0	1
Other - Undertaking (Health Inquiry)	1				1	0
Other - Oral Caution and SCERP*					0	1
Other - Written Caution	2		3		5	10
Other - Written Caution and Undertakings	1				1	2
Other - Written Caution and SCERP*	1	1			2	2
Referral to the Discipline Committee	1		1		2	0
Take No Action, if Complaint Frivolous, Vexatious, Made in Bad Faith, Moot or otherwise an Abuse of Process	1	1	4		6	15
Total:	12	13	24	0	49	68

*Specified Continuing Education or Remedial Program

**ICRC Report to Council - Third Quarter
December 1, 2016 to February 28, 2017**

	Withdrawal	Take No Further Action F&V	Take No Further Action	Advice	Advice with UT	Written Caution	Written Caution & UT	Oral Caution	Oral Caution & UT	Oral Caution & SCERP*	Written Caution & SCERP*	SCERP*	Refer to Discipline
Inaccurate information		1	2										
Inadequate data to support conclusions		3	6	2		2							
Inadequate feedback													
Inadequate handling of termination			1			1							
Inappropriate advertising and announcements													
Inappropriate conduct toward a colleague		1											
Inappropriate conduct toward a student													
Inappropriate conduct toward an employee			1										
Incapacity			1										
Incompetence			1										
Insensitive treatment of clients			1										
Lack of adherence to undertaking or agreement													
Lack of objectivity			1			1							
Misrepresentation of Non-Member													1
Non-Sexual Abuse													
Problematic statements made at trial													
Providing services while impaired		1											
Quality of services			1										
Record keeping Problems			1										1
Sexual abuse			1										
Sexual harassment		1	1										
Sexual misconduct			1										
Unauthorized Services			1										

*Specified Continuing Education or Remedial Program



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Quality Assurance Committee

Report to the Council

March 24, 2017

Committee Members:

Judy Cohen	Public Member
Agnieszka Gajdzis	College
Elizabeth Levin	Council
Donna Ferguson (Chair)	College
Patricia Minnes	Council

The Committee met on January 19, 2017.

Peer Assisted Review (PAR)

All of the outstanding 14 Peer Assisted Reviews from the 2015-16 year have now been completed. The Committee reviewed the final reviewer reports and did not form any concerns about the practices of these 14 members.

Following a discussion about the sufficiency of information obtained in one case, the Committee directed that reviewers be required to review a minimum of two client files from a member's practice. The Committee also discussed limits on the type of relationship between an individual being reviewed and a reviewer, whether the reviewer is College assigned or member nominated. It directed that members not be permitted to nominate an individual with whom they are in a relationship in which a power imbalance exists, including a relationship in which either the reviewer or person being reviewed is in an evaluative relationship of any kind with the other.

Mandatory Continuing Professional Development (CPD) Development

The Committee finalized the requirements for the Mandatory CPD Program based upon member feedback. These were provided to the Executive Committee of the College for their meeting of February 3, 2017. With the approval of Council for the distribution of this material, the program will take effect this spring or in early summer.

Donna Ferguson
Chair: Quality Assurance Committee
March 14, 2017



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Client Relations Committee

Report to Council

March 24, 2017

Committee Members:

Francine R. Layton (Chair)	College
Gilles Hébert	Council
Denise Milovan	Council
Kristin Bisbee	Council, Public Member
Jaffar Hayat	Council, Public Member
Leah Stein-Sagi	College

The Client Relations Committee met on January 30, 2017.

Standards of Professional Conduct Review

The Committee considered the submissions of members and other stakeholders with respect to the proposed amendments of the *Standards of Professional Conduct*. After making some changes to the *Standards*, based upon the submissions, the Committee's recommendations were provided to the Executive Committee for review.

Funding for Clients Who Have Been Sexually Abused by Members

At this time, there are three individuals who have been deemed eligible and are receiving funding in relation to sexual abuse by members. There have been no requests for funding since the last Council meeting.

Respectfully submitted,

Francine Roussy Layton (Chair)

March 9, 2017

COLLEGE OF PSYCHOLOGISTS OF ONTARIO
STRATEGIC DIRECTION 2017 - 2022
Updated February 3, 2017

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.

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"> • 	<ul style="list-style-type: none"> • <i>Briefing Note</i> on Implementation of Council’s March 2013 decision respecting future of psychology regulation in Ontario submitted to Ministry (November 2016)
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"> • 	<ul style="list-style-type: none"> • Review of Standards of Professional Conduct underway (Fall 2016)
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"> • 	<ul style="list-style-type: none"> •
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 <i>e-Bulletin</i> quarterly • Staff presentations to students and members (ongoing) • Strategic Direction 2017 – 2022 to members 	<ul style="list-style-type: none"> • Executive Committee Reception with London members (May 2017)
M5	<ul style="list-style-type: none"> • Supporting and assisting members to meet high standards 	<ul style="list-style-type: none"> • Practice advisor service (ongoing) • Barbara Wand Symposium (December 2016) 	<ul style="list-style-type: none"> • Barbara Wand Symposium (May 2017) • Review of Standards of Professional Conduct underway (Fall 2016) • Continuing Professional Development Program

			Implementation <ul style="list-style-type: none"> Examination and Corporation Fee Reductions Proposed for June 2017
M6	<ul style="list-style-type: none"> Responding to changing needs in new and emerging practice areas 	<ul style="list-style-type: none"> 	<ul style="list-style-type: none">
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) 	<ul style="list-style-type: none">
M8	<ul style="list-style-type: none"> Acting in a responsibly transparent manner 	<ul style="list-style-type: none"> Posting of Council materials package before meetings on website (June 2016) 	<ul style="list-style-type: none">
M9	<ul style="list-style-type: none"> Advancing the Council's governance practices 		<ul style="list-style-type: none"> Revision to Role of the Executive Committee Agenda to Reflect Strategic Direction of Item

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 Registrar since January 2017 as activities undertaken in service of the College's Strategic Directions 2017 - 2022



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Briefing Note – March 2017 Council

Proposed Amendments to By-Law 18: Fees

Strategic Direction Reflection

Supporting and assisting members to meet high standards

Motion for Consideration re: Recommendation from Executive Committee

That the proposed amendments to *By-Law 18: Fees* be approved.

Moved By TBD

Rationale

One of the philosophical underpinnings of self-regulation is that the profession funds regulatory processes and functions. The Council approves budgets and expense forecasts and proposes fee increases or decreases based on the financial resources required for the College to regulate.

The decrease in examination fees was proposed as it was believed that the fees for the various examinations can prove to be a hardship for many candidates for registration. This includes the fees charged for the Jurisprudence and Ethics Examination (JEE) and the Oral Examination. The College currently subsidizes these examinations as both are offered below cost. Even given this however, it was felt that further assistance would be both beneficial to these individuals and acceptable to the larger membership. It should be noted that the third examination required for registration, the Examination of Professional Practice of Psychology (EPPP) is administered by the Association of State and Provincial Psychology Boards (ASPPB). As a result, the College does not have any control over fees charged.

A review of the fees for initial application and annual renewal of professional corporations was also undertaken. It was noted that these fees were set about a decade ago when professional corporations first became possible for members. At that time, fees were based on what other a number of other Colleges decided to charge as there was no experience upon which the College could draw to determine an appropriate fee. It has been determined that these can be reduced to more accurately reflect the costs incurred to process initial applications and renewals and to administer the registration and regulation of professional corporations.

Background

Amendments to the *By-Law 18: Fees* were approved by Council for circulation, for the required 60 days, at its September 2016 meeting. The consultation was distributed to members on October 7, 2016 with a request that feedback to be received by December 15, 2016. The following fee reductions were recommended by Council:

- Jurisprudence Examination fee reduced from \$270 to \$200
- Oral Examination fee reduced from \$740 to \$550

- Professional Corporation Application fee reduced from \$500 to \$350
- Professional Corporation Renewal fee reduced from \$350 to \$250

The College received responses from 58 members and a summary was provided to Council at the December meeting. In recommending the amendments to By-Law 18: Fees, the Executive Committee carefully considered all responses received.

Budgetary Implications

The financial impact on the College would be reduction in the annual revenues of approximately \$81,350.

Additional Note

Housekeeping amendment: In reviewing *By-Law 18: Fees* it was noted that section 18.4 was written to include a change to be made at the time of the enactment of the new Registration Regulation. As this occurred in April 2015, it is recommended that the original section 18.4 be deleted.

Next Steps

Upon approval of the proposed amendments to the *By-Law 18: Fees*

- College By-laws will be revised and posted on the College's website; and,
- Fee changes will be implemented effective June 1, 2017.

Attachments

1. Revised *By-Law 18: Fees* with tracked changes

Contact for Questions

Dr. Rick Morris, Registrar & Executive Director

BY-LAW 18: FEES

[Approved by Council December 1999; amended March 2001; amended February 2002; amended March 2003; amended March 2004; September 2005, March 27, 2009; December 13, 2013; December 2014, [March 2017](#)]

This by-law is made under the authority of the Regulated Health Professions Act, 1991 as amended, and the Psychology Act, 1991 as amended.

Note: The requirements for each certificate of registration are set out in the Registration Regulation.

Membership

- 18.1 Every member shall pay an annual membership fee in accordance with this by-law for each membership year.
- 18.2 A membership year begins on June 1 in one year and ends on May 31 of the following year.
- 18.3 (a) The annual fee for membership must be paid on or before June 1 in the membership year.
 (b) Notwithstanding subsection (a), the annual fee for a member holding a Certificate of Registration Authorizing Supervised Practice is payable in two equal instalments on or before June 1 and December 1 in the membership year.
- 18.4 The annual fee for membership is,
 (a) \$795 for members who hold a certificate of registration for regular status;
 (1) effective June 1, 2015, \$550 for members who hold a Certificate of Registration Authorizing Supervised Practice
 (b) \$238.50 for members who hold a certificate of registration for inactive status;
 (c) \$50 for members who hold a certificate of registration for retired status; and
 (d) \$397.50 for members who hold a certificate of registration for academic status.

Effective the date that the amended registration regulation comes into force, section 18.4 is repealed and the following substituted:

- 18.4 The annual fee for membership is,
 (a) \$795 for members who hold
 (1) a Certificate of Registration Authorizing Autonomous Practice,
 (2) a Certificate of Registration Authorizing Interim Autonomous Practice, or
 (b) (1) before June 1, 2015, \$795 for members who hold a Certificate of Registration Authorizing Supervised Practice
 (2) effective June 1, 2015, \$550 for members who hold a Certificate of Registration Authorizing Supervised Practice;
 (c) \$238.50 for members who hold an Inactive Certificate of Registration;
 (d) \$50 for members who hold a Retired Certificate of Registration; and
 (e) \$397.50 for members who hold an Academic Certificate of Registration.
- 18.5 No later than 30 days before an annual fee is due, the Registrar shall notify the member of the amount of the fee and the day on which the fee is due.
- 18.6 A member who fails to pay an annual fee on or before the day on which it is due shall pay a penalty of 10 per cent of the annual fee, in addition to the annual fee.

Quality Assurance Program

18.7 A fee of \$25.00 shall be paid by any member who is sent a second reminder letter notifying the member of failure to complete the mandatory Declaration of Completion related to the Self-Assessment Guide and Professional Development Plan.

Examinations

18.8 The fee for the Examination for Professional Practice in Psychology is the fee set by the Association of State and Provincial Psychology Boards and its contractors.

18.9 The fee for the Jurisprudence and Ethics Examination is ~~\$270~~200.

18.10 The fee for the oral examination is ~~\$740~~550.

Interviews

18.11 The fee for an interview is \$500.

Applications

18.12 (a) The fee for an application for a Certificate of Registration Authorizing Supervised Practice is \$230.

(b) Notwithstanding subsection (a), the fee for an application for a Certificate of Registration Authorizing Supervised Practice is \$100, if the applicant holds a Certificate of Registration Authorizing Autonomous Practice as a Psychological Associate.

18.13 (a) The fee for an application for a Certificate of Registration Authorizing Interim Autonomous Practice is \$100.

(b) Where section 22.18 of the Code applies, the fee for an application for a Certificate of Registration Authorizing Autonomous Practice is \$100.

18.14 (a) The fee for an application for each of the following certificates is \$100:(1) Academic Certificate of Registration;

(2) Inactive Certificate of Registration;

(3) Retired Certificate of Registration;

(b) Where an applicant for a Certificate of Registration Authorizing Autonomous Practice holds one of the certificates listed in subsection (a), the fee for the application is \$100.

Professional Corporations

18.15 The fee for the application for, and issuance of, a certificate of authorization, including any reinstatement of a certificate of authorization, for a professional corporation is ~~\$500~~350.

18.16 The fee for the annual renewal of a certificate of authorization is ~~\$350~~250.

18.17 A professional corporation or a member listed in the College's records as a shareholder of a professional corporation shall pay an administrative fee of \$50 for each notice sent by the Registrar to the corporation or member for failure of the corporation to renew its certificate of authorization on time. The fee is due within 30 days of the notice being sent.

18.18 The fee for the issuing of a document or certificate respecting a professional corporation, other than the first certificate of authorization or the annual renewal of a certificate of authorization, is \$50.

Other Matters

18.19 The fee for issuance of a document confirming a member's registration status is \$25.



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Briefing Note – March 2017 Council

Continuing Professional Development Requirements – Distribution

Strategic Direction Reflection

Developing, establishing and maintaining standards of knowledge and skill and programs to promote continuing evaluation, competence and improvement among members

Motion for Consideration

That the Continuing Professional Development (CPD) program and requirements, as set out by the Quality Assurance (QA) Committee, be implemented.

Moved By TBD

Rationale

As set out in the *Health Professions Procedural Code*, which is Schedule 2 of the *Regulated Health Professions Act, 1991*, Continuing Professional Development is designed to: promote continuing competence and continuing quality improvement among members; remedy gaps in knowledge and skills identified in members' professional development plans; address changes in practice environments; and, incorporate standards of practice and advances in technology. Psychologists and psychological associates must maintain their competencies based on published advances in theory, practice and empirical research. The new CPD program includes mandatory minimum requirements for members that afford the opportunity to maintain competence through a combination of professional activities and participation in both formal and informal continuing education workshops and seminars.

Background

Beginning in 2009, the College undertook a process to revise the QA Regulation which included provisions for mandatory participation in a CPD program.

After much time and effort, over many years, on the part of the Quality Assurance Committee, amendments to the College's Quality Assurance Regulation came into force in April 2015. During the development of the amended QA Regulation the QA Committee consulted with the membership on a number of occasions and obtained input into the proposed changes.

The College also relied on extensive research conducted by the Association of State and Provincial Psychology Boards (ASPPB) in developing the CPD program. The structure of the program is based upon the model recommended by the ASPPB. The

minimum number of CPD credits required by the College is within the range of requirements of other North American Psychology Regulatory Boards and Colleges.

In September 2016, the QA Committee proposed specific mandatory requirements and, again, conducted extensive consultation with College members. The QA Committee reviewed member and professional association submissions and made some adjustments to the requirements based on the comments received. The final mandatory requirements were reviewed by the College Executive Committee in January 2017 which recommended that Council approve distribution of the requirements and implementation of the program in the spring of 2017.

Options

1. Approve distribution and implementation of the CPD program requirements as set out by the QA Committee; or,
2. Provide additional feedback or guidance to the QA Committee before approving distribution and implementation of the program requirements.

Budgetary Implications

Initial budgetary implications for implementation of the CPD program relate primarily to the development of a voluntary tracking system for member use. Resources to undertake this work are in the current and proposed budgets. Monitoring the implementation of the program may result in an increase in the workload of the QA Committee however such expenses are not anticipated to be material. While there may be an initial increase in member inquiries regarding the program, current staffing levels are expected to be sufficient to provide guidance to members.

Next Steps

Upon approval for distribution of the program requirements

- Provide members with the CPD program requirement to be implemented during the spring or early summer of 2017
- Prepare resource materials for members to assist in the early stages of implementation

Attachments

1. Mandatory Continuing Professional Development Program
2. Mandatory Continuing Professional Development (CPD) Program; Questions and Answers

Contact for Questions:

Barry Gang, MBA, Dip. C.S., C.Psych.Assoc.
Deputy Registrar/ Director of Professional Affairs

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Mandatory Continuing Professional Development Program

Description and Expectations of the College's CPD Program

This program affords members the opportunity to fulfill the mandatory requirements for continuing professional development (CPD) set out below through a combination of professional activities along with participation in both formal and informal continuing education workshops and seminars. The CPD program is to be used in conjunction with the self-assessment which members are already required to conduct every two years, such that the CPD activities will directly address those areas identified for development in members' CPD plans as well as capture additional professional development activities undertaken over the course of the two year reporting cycle.

Most practitioners currently acquire more than the number of credits required by the CPD program and the program is not meant to discourage this.

Expectations

1. Continuing Professional Development shall be undertaken in activities related to: professional development; knowledge and skills in a member's area(s) of practice; and legislation, professional standards and ethics.
2. Continuing Professional Development shall be tracked on a two year cycle.
3. Continuing Professional Development shall be undertaken from a combination of activities in Category A - Professional Activities and Category B - Continuing Education Activities. [See attached Chart] Any single activity may be used to fulfill only one of the minimum Continuing Professional Development requirements in either Category A or Category B and only to the maximums noted, per two year cycle.
4. A member shall obtain at least 50 credits of Continuing Professional Development every two years. In many cases, credits are equivalent to hours however there are some categories of Continuing Professional Development that are not "hourly".
5. In accumulating the required 50 credits of Continuing Professional Development every two years a member shall undertake a minimum of 10 credits from Category A - Professional Activities and a minimum of 10 credits from Category B - Continuing Education Activities. (See attached chart).

6. To ensure maintenance of knowledge related to jurisprudence, a minimum of 10 credits of Continuing Professional Development activities undertaken shall pertain to legislation, professional standards and ethics related to the profession. These may be from either Category A or Category B or a combination of these.
7. At the end of each two year cycle, the member shall attest to the completion of the required Continuing Professional Development in a manner required by the Committee. The member shall provide the Committee with documentation of the Continuing Professional Development undertaken and/or other related documentation, as the Committee may require and in the form required by the Committee.

CONTINUING PROFESSIONAL DEVELOPMENT CHART

Members are required to obtain a minimum of 50 CPD credits every two years. At least 10 credits must be obtained from each of sections A and B. At least 10 out of the total of 50 credits must be related to the ethical practice of psychology and these can be earned within section A and/or B. An electronic version of this chart, allowing for easy tracking of CPD credits is available from the College.

The requirements set out below refer to the minimum number of credits members are required to obtain over a two year cycle. It is believed that most members will likely exceed these requirements. Maximums noted below refer only to the maximum number of credits one may use from each section to satisfy the overall requirements of the program.

A	SECTION A - PROFESSIONAL ACTIVITIES (Minimum 10 Credits/ Maximum 40 Credits)
A1	<p>Professional Consultation /Interaction 1 hour = 1 credit to maximum of 20, with no more than 10 credits for any one type of activity Examples:</p> <ul style="list-style-type: none"> • Colloquia, attending invited speaker sessions, professional development meetings • Case conferences • Grand Rounds • Journal discussions with professional peers • Interactive professional list serve participation • Providing or receiving supervision or peer consultation • Being Peer Reviewed(either having been required or voluntarily) • Mentorship or shadowing • Other similar activities that would lead to impact on your professional practice with clients • May involve interaction either face to face or mediated by technology • May be interdisciplinary
A2	<p>Teaching 10 credits per semester course to a maximum of 20 Examples:</p> <ul style="list-style-type: none"> • Teaching a university or community college course • May include teaching a practicum course or supervising student research

A3	<p>Delivering Workshops, Conferences and Presentations 1 hour = 1 credit to a maximum of 10 Examples:</p> <ul style="list-style-type: none"> • Developing, teaching and/or presenting workshops, seminars or other courses • Other similar activities
A4	<p>Writing, Reviewing, Editing Maximum of 20 Credits</p>
A4a	<p>Professional Scientific Paper 1 publication = 10 credits to a maximum of 20 Examples:</p> <ul style="list-style-type: none"> • Professional or scientific paper • Book, chapter, journal, relevant to psychology • Other similar activities
A4b	<p>Other Writing, Including Writing for and Consulting with Media, Editing and Reviewing 1 hour = 1 credit, to a maximum of 10 Examples:</p> <ul style="list-style-type: none"> • Professional e- writing, (blogs, website posts) • Popular media • Other similar activities, excluding reports and documentation prepared in the course of providing care to clients
A5	<p>Formal Research 1 hour = 1 credit , to a maximum of 10 Designing, implementing, collecting and analyzing research data</p>
A6	<p>College/Association Involvement Maximum of 15 credits</p>
A6a	<p>Serving on College Council or Committee or Psychological Association Board or Committee 5 credits per membership on Council, Board or Committee to a maximum of 15</p>

A6b	Serving as oral examiner or Quality Assurance Committee Peer Reviewer 1 hour = 1 credit to a maximum of 10
A6C	Participation in College Consultations 1 credit per consultation to a maximum of 5
A7	Practice Outcome Monitoring 1 hour = 1 credit, to a maximum of 10 Assessing individual or group client outcomes using questionnaires or other formal outcome measures
A8	General Attendance at Conferences, Workshops, Seminars and Conventions 1/2 day = 1 credit, to a maximum of 5 Reflects attendance at conferences in which there is live interaction with other participants May be counted in addition to those credits associated with the educational content acquired at events reported in B1 and B2, below

SECTION B CONTINUING EDUCATION ACTIVITIES (Minimum 10 Credits/ Maximum 40 Credits)	
B1	<p>Approved Continuing Education where Formal CE Credits are Provided 1 hour = 1 credit, to a maximum of 20 Examples:</p> <ul style="list-style-type: none"> • Professionally relevant workshops, seminars, sessions • May be undertaken in person or via technology <p>Any structured CE program relevant to the practice of psychology would be acceptable; CPO does not pre-approve or endorse any specific CE programs; generally, appropriate CPD activities will have a structured agenda, learning objectives, attendance (either on-site or on line) and a specified number of required hours of attendance. Members are expected to use their own judgment in determining the appropriateness of specific CE crediting organizations</p>
B2	<p>Programs/Courses/Workshops where Formal CE Credits are not Provided 1 hour =1 credit to a maximum of 20 Examples:</p> <ul style="list-style-type: none"> • Professionally relevant programs, workshops or courses offered at an educational institution or professional or scientific meeting • May be undertaken in person or via technology
B3	<p>Self Directed Learning 1 hour = 1 credit, to a maximum of 10 Examples:</p> <ul style="list-style-type: none"> • Reading professional literature (journals, books, College e- Bulletins, manuals for new tests, therapy tools, etc.,) • Viewing archived webinars/podcasts related to professional activities • Other similar activities

Reference:

ASPPB Guidelines for Continuing Professional Development, as revised (2014), retrieved from:

http://c.ymcdn.com/sites/www.asppb.net/resource/resmgr/guidelines/asppb_guidelines_for_continu.pdf?hhSearchTerms=%22CPD%22

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MANDATORY CONTINUING PROFESSIONAL DEVELOPMENT (CPD) PROGRAM

Questions and Answers

1. How was it determined that the college would require 50 credits of continuing professional development every two years?

The College decided to quantify CPD using credits, as opposed to hours. While some professional development activities like attending a lecture, lend themselves easily to measurement in units of time, such activities as writing or undergoing a Peer Assisted Review by the Quality Assurance Committee may not.

In determining the minimum number of credits required to ensure that every College member participates in adequate CPD, the Quality Assurance Committee of the College reviewed the research based recommendations regarding CPD of the Association of State and Psychology Boards (ASPPB)¹. The College sought to bring its expectations within the range of expectations of other North American psychology regulators. It must be emphasized that 50 credits every two years is the minimum number of credits members are expected to obtain and it is recognized that many members will accumulate more than 50 credits every two years.

2. How was it decided which activities are eligible for CPD credit?

The College attempted to ensure that all of the different kinds of relevant and appropriate activities in which members to maintain competence qualify for credit. It also wished to allow as many opportunities for each member to obtain as wide a variety of different experiences as possible, as this is believed to enhance learning.

3. Does the list of activities indicate all of the activities that could be included as professional development?

The list is comprehensive and it is expected that all of one's CPD efforts can be recorded within the activities listed in Categories A and B. By providing examples of the activities within each of the categories, we have attempted to convey the range of activities members may count. It should be noted that these lists are examples and are not intended to be all inclusive. Members are expected to use their own judgment in deciding whether the particular activities they choose meet their professional development needs, as identified in the Self-Assessment Guide, and which particular requirements of the CPD program each activity will satisfy.

4. What is the difference between Category A (Professional Activities) and Category B (Continuing Education)?

Category A (Professional Activities) includes activity-based experiences believed to enhance professional development by developing competencies in the multifaceted areas related to one's practice. In addition to keeping abreast of scientific knowledge, members are encouraged to include other components of service enhancement in their CPD activities. Examples of these include, but are not limited to, reviewing evidence for the purpose of evidence-based decision making, keeping up to date with technology and enhancing interpersonal and multicultural competence.

Category B (Continuing Education) contains activities which are believed to specifically help members obtain information based knowledge. Credits in this category will be earned through the acquisition of information typically acquired through attendance at courses, seminars and workshops.

5. What is meant by “peer” in reference to activities that involve peers?

A peer can be a professional in the field of psychology or a person who is qualified as a professional in a field relevant to the practice of psychology. Interdisciplinary interaction is encouraged by the College.

6. What is meant by “professionally relevant programs/workshops”?

Professionally relevant programs/workshops are those events that enhance knowledge relevant to the psychological services a member provides. Content need not be primarily psychological in nature but must be directly related to the services provided by the member. For example, a member working within the correctional system might benefit from an educational event provided by correctional officers regarding the management of offenders within the prison system.

7. What is the difference between a “CE Credit” (in Category B) and credit for attendance at conferences (in Category A)?

Credit for attendance at conferences and conventions is meant to reflect the value, in and of itself, of interacting with colleagues and participating in the social, interpersonal, professional and scientific activities which are part of the milieu of conferences and conventions. It is believed that being among peers enhances professional development as this leads to awareness of the practices of colleagues and of the ideas, problems and challenges that are present in the professional environment.

8. Can I claim credit for both interacting with peers at a conference or convention and “CE” at the same event?

Those obtaining their “CE” credits by attending events like conferences and conventions may claim credit for attendance at the conference or convention under Category A and also for the specific time they spend within the presentations as CE credits in Category B. For example, if attending a convention from 9 a.m. until 4 p.m., one could claim one credit for spending the day with peers under Category A and an additional 4 credits under Category B for the 4 hours spent listening within the lectures.

9. Does a poster presentation count as delivering a workshop, conference or presentation?

Yes.

10. Will there be audits of the CPD program?

The Quality Assurance Committee is considering the concept of conducting random member audits for compliance with the CPD Program.

11. If I am required to participate in a Peer Assisted Review will the peer reviewers have access to information about my CPD activities?

Yes. If you are selected for a Peer Assisted Review, the reviewer will request access to your record of CPD activities.

12. How can I obtain my 10 credits related to ethics?

Examples of how to satisfy this requirement include participating in any professional activity or continuing education activity related to ethical issues, including those addressing local jurisdictional issues. The following are a few examples of the many ways one may earn these credits:

- Attending the Barbara Wand Symposiums, in person or by webinar, or watching the archived recordings
- Attending an event run by a local professional group or attending other organized discussion groups that address professional ethics
- Working with a workplace ethics committee
- Participating in a college or professional association activity related to ethical practice
- Attending, or watching webcasts of, public lectures that are relevant to professional ethics which are offered by universities and other educational organizations
- Reading books and articles relevant to professional ethics
- Registering for online continuing educational programs offered by professional associations

Members are encouraged to look into opportunities to explore current issues in legislation and social policy which impact on ethical practice.

13. Are the required 10 credits of Continuing Professional Development related to ethics separate from the credits required in categories A and B?

No, the 10 credits related to ethics are not additional credits. One must ensure that a minimum of 10 of the credits earned in satisfaction of the 50 credits required in total are related to professional ethics.

14. How can I satisfy my CPD requirements if I am not in active practice?

All members, except those who hold a Certificate of Registration with “Retired” status, are expected to maintain competence, in anticipation of their return to practice. Upon return to practice it is expected that a member who was inactive is at the same level of competence as one who has maintained competence continuously.

Members who are unable to attend live CPD events may earn many of their credits through distance learning or self-directed learning, if required. Any member experiencing circumstances that make it impossible to satisfy the requirements of the program should contact the College to discuss this.

15. Why may I earn CPD credits for teaching?

Teaching psychology requires ongoing research, up to date knowledge and an ongoing exchange of information between teachers and students. For this reason it is regarded as valuable CPD.

16. Can practice outcome monitoring be conducted on either an individual or organizational level?

Formally monitoring progress towards specific outcome goals, either for individual clients or on an organizational level, can be a useful mechanism for determining whether an approach to practice is effective or not. Active participation in either activity is considered to be valuable CPD.

17. When conducting formal research, is writing included within the available credits?

It is recognized that Conducting Formal Research is a distinct activity and that not all of those involved in conducting research are responsible for writing about it. Additional credit may be obtained for this in section A4: Writing, Reviewing, Editing.

18. Can competence in a new area of practice be achieved through the mandatory Continuing Professional Development program?

No. CPD is intended to ensure that one maintains competence within existing areas of practice. The development of competence in new areas of practice is expected to be undertaken through a much more comprehensive and rigorous process, beyond what would ordinarily be required to satisfy the CPD requirements. Members who are seeking to expand their areas of authorized practice are encouraged to contact the College.

19. Am I required to use the electronic tracking sheet to record my CPD credits?

No. The electronic tracking tool has been developed as an aid to members who wish to use it. So long as members maintain an accessible record of their activities, they may keep track of them in any manner they wish.

20. How long must I keep records related to my CPD?

Members must retain their records for at least five years.

¹ The College wishes to acknowledge the work of the Association of State and Provincial Psychology Boards (ASPPB) which provided guidelines that informed a number of the ideas and concepts adopted by the College's Quality Assurance Committee. The ASPPB Guidelines for Continuing Professional Development are available for review at:

http://c.ymcdn.com/sites/www.asppb.net/resource/resmgr/guidelines/asppb_guidelines_for_continu.pdf?hhSearchTerms=%22continued+and+professional+and+devel%22



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Briefing Note – March 2017 Council

Topic/Subject

Standards of Professional Conduct – Revision for Approval

Strategic Direction Reflection

Enforcing standards fairly and effectively through developing, establishing and maintaining standards of practice and professional ethics for all members

Motion for Consideration

That the revised *Standards of Professional Conduct* be adopted as the standards of the profession to be effective September 1, 2017.

Moved By TBD

Rationale

The current *Standards of Professional Conduct (Standards)* have been in use since September 1, 2005, with some minor revisions made in March 2009. A review of the *Standards*, which began in the fall of 2014, suggested that the majority of the content continued to be relevant and appropriate to contemporary psychological practice. There was, however a need to address such issues as the heightened awareness of sexual abuse of patients; members' and clients' increasing use of emerging technology, including telepsychology; and, challenges in the practice of supervision provided by members.

Background

The Client Relations Committee was charged with the responsibility of reviewing the *Standards* in 2014. The review included an initial member consultation in which members were asked to comment on the continued relevance or need for change of the current *Standards* as well as areas in which *Standards* may be required.

Those items within the *Standards* related to supervision were reviewed by the Supervision Task Force, which was struck by the College to specifically review the supervision requirements.

The Client Relations Committee, with the assistance of staff, integrated the recommendations of the Supervision Task Force with other proposed amendments and created the proposed revision to the *Standards*. Integration was guided by the values of public interest and protection, clarity, freedom from ambiguity for the profession and the public, and ease of enforceability.

Draft revisions to the *Standards*, approved by Council in September 2016, were provided to the membership and other stakeholders in October 2016, with an invitation to make submissions to the College. Approximately 230 submissions were received. The Client Relations Committee considered the submissions at its meeting in January 2017 and made some revisions to the draft *Standards* based on the feedback received. In February 2017 the *Standards* were reviewed by the Executive Committee.

The attached *Standards of Professional Conduct; Revisions for Council Approval* contain “tracked changes” of revisions made since the *Standards* were approved by Council for consultation in the fall. Non-substantive changes have not been identified. These include such things as grammatical and syntactical changes required to accommodate the substantive changes. Certain conventions were also adopted to ensure consistency. For example “shall” and “will” have been changed to “must” or “may” throughout.

Supplementary Notes which accompanied the current version of the *Standards* will be replaced by *Practical Application (PA)* notations. The *Practical Applications* will be incorporated within the *Standards* and subject to updates and changes by staff when required. Sample *PA*'s have been included in the version attached.

Options

1. Approve the amended *Standards of Professional Conduct* as applicable to members, to become effective on September 1, 2017
2. To make further amendments to and approve the *Standards of Professional Conduct*, to become effective September 1, 2017
3. To give further direction to the Client Relations Committee

Budgetary Implications

None

Next Steps

- Provide members with the revised *Standards of Professional Conduct* as soon as possible, to be implemented on September 1, 2017
- Prepare resource information for members to assist in the adoption of the revised *Standards of Professional Conduct*

Attachments:

1. *Standards of Professional Conduct; Revisions for Council Approval* with “Tracked Changes” since 2016 Member/Stakeholder Consultation

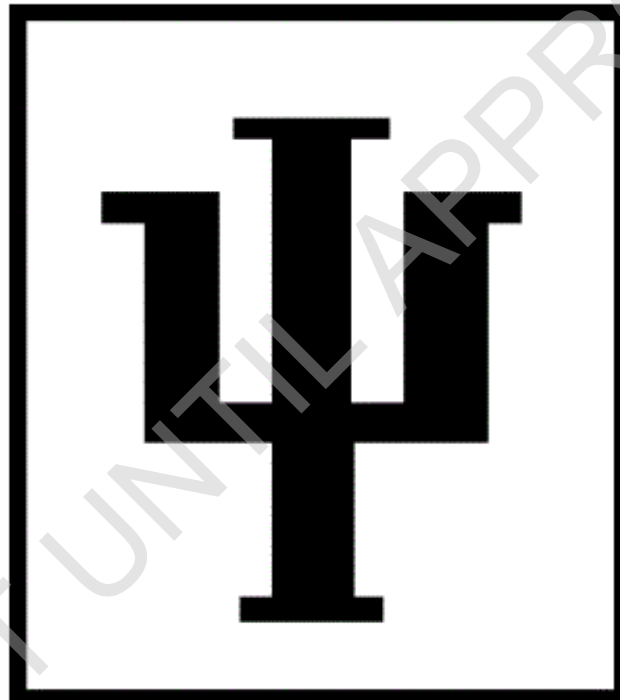
Contact for Questions

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THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO

STANDARDS OF PROFESSIONAL CONDUCT

**Revisions for Council Approval with “Tracked Changes”
since 2016 Member/Stakeholder Consultation**



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THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO

STANDARDS OF PROFESSIONAL CONDUCT

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PRACTICAL APPLICATIONS have been developed to provide clarity and guidance for some Standards. The Practical Applications can be accessed by following the link following the Standard to which they apply.

APPLICABILITY

For the purposes of Ontario Regulation 801/93 Professional Misconduct, section 1.2., these Standards are to be considered “standards of the profession”.

DEFINITIONS

Administration means the administration of psychological services as opposed to administrative duties that are of a clerical or business related nature. For greater clarity, administration of psychological services refers to the planning, implementation, monitoring and evaluation of items a) through h) under “Psychological Services” below.

Best Efforts means taking, in good faith, all steps that would not require undue hardship that a reasonable member would take in the circumstances, depending on the facts of the particular case and the level of risk that would result from inaction, to achieve an objective and carry out the process to its logical conclusion.

The College ~~refers means to~~ the College of Psychologists of Ontario.

Consultation means the provision of information, within a relationship of professionals of relatively equal status, generally based upon a limited amount of information that offers a point of view that is not binding with respect to the subsequent professional behaviour of the recipient of the information.

Client means an entity receiving psychological services, regardless of who has arranged or paid for those services. A client can be a person, couple, family or other group of individuals with respect to whom the services are provided. A person who is a client is synonymous with a “patient” with respect to the administration of the *Regulated Health Professions Act (1991)*. ~~An Individual Client is the recipient of psychological services where the services are directed towards a person, couple, family or other group of individuals.~~

Formal Correspondence means documents that contain information about a psychological service that is intended for use beyond the practice or organization.

Fulfilling the Requirements to Become a Member of a College means obtaining the necessary education, training or experience required for registration with that College.

Member means an individual registered with the College of Psychologists of Ontario to provide psychological services, including those holding a certificate of registration authorizing autonomous practice, interim autonomous practice or supervised practice; or those holding an academic, inactive or retired certificate of registration.

~~A Corporate Organizational Client is means~~ an organization, such as a business, community or government that receives services that are directed primarily at the organization, rather than to the individuals associated with that organization.

Public Statements mean statements in any medium that include, but are not limited to: paid or unpaid advertising, grant and credentialing applications, brochures, printed matter, directory listings, personal resumes or curricula vitae, comments for use in media including print and electronic transmission, statements in legal proceedings and contained in the public record, lectures and public presentations, and published materials.

Psychological Records ~~are deemed~~ mean records that ~~to~~ include all forms of information collected in relation to the provision of psychological services, regardless of the nature of the storage medium.

Psychological Services means services of a psychological nature that are provided by or under the supervision of a member. Psychological services include, but are not limited to, one or more of the following:

- a. Evaluation, diagnosis and assessment of individuals and groups;
- b. Intervention with individuals and groups, including but not limited to, therapy, counselling, crisis intervention and psychoeducation;
- c. Consultation;
- d. Program development and evaluation;
- e. Supervision;
- f. Research;
- g. Education and training;
- h. Scholarly activities;
- i. Administration.

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

~~"Best efforts" means taking, in good faith, all steps that a reasonable member would take in the circumstances depending on the facts of particular case and the level of risk that would result from inaction to achieve the objective and carry the process to its logical conclusion.~~

~~"Reasonable Efforts" means efforts that a member would take in the circumstances, depending on the facts of particular case and the level of risk that would result from inaction, and do not require undue hardship.~~

Note: Capitalized terms not defined in these *Standards* shall have the meaning ascribed to them in the *Psychology Act, 1991*, the regulations made thereunder, and/or the bylaws of the College.

1. Acceptance of Regulatory Authority of the College

1.1 Compliance with College Authority

A member of the College must comply with the regulatory authority of the College.

1.2 Responding to a College Request

When requested by the College, a member must promptly provide an account of his/her activities, responsibilities and functions. When employed by an institution or other non-member, the member must also provide a description of the organization and the types of service that the organization provides.

1.3 Agreements with the College

A member must adhere to any undertaking or agreement that the member has made with the College.

1.4 Participation in Quality Assurance

A member must participate fully in all mandatory aspects of the College's Quality Assurance Program.

1.5 Provision of Regulatory Information to Clients

If requested by a client, a member must provide information regarding the mandate, function, location and contact information of the College, and provide information about where the client can obtain:

- a) the statutes and regulations that govern the provision of psychological services; and
- b) the College's standards, guidelines, and codes of ethics.

2. Compliance with Statutes and Regulations Relevant to the Provision of Psychological Services

2.1 General Conduct

A member must conduct himself/herself so that his/her activities and/or those conducted under his/her direction comply with those statutes and regulations that apply to the provision of psychological services.

PA: A hierarchy of rules applies to the services of members. When reviewing one's obligations one should apply the following hierarchy:

- 1. Legislation*
- 2. Regulations under the legislation*
- 3. The Standards of Professional Conduct*
- 4. The Canadian Code of Ethics for Psychologists*
- 5. Other ethical guidelines*

3. Meeting Client Needs

3.1 Responsibility for Psychological Services

3.1.1 Private Practice Settings

A member, whether working individually, in partnership or as a shareholder of a psychological corporation, must assume responsibility for the planning, delivery, supervision and billing practices of all the psychological services he/she provides to a client.

3.1.2 Employment Settings

A member must assume responsibility for the planning, delivery, and supervision of all the psychological services he/she provides to a client. Members working as employees must make ~~reasonable-best~~ efforts to ensure that their work setting adheres to the Standards of Professional Conduct in the planning, delivery, supervision and billing practices of all psychological services provided.

3.2 Clarification of Confidentiality and Professional Responsibility to Individual Clients and to Organizations

In situations in which more than one party has an ~~appropriate~~ interest in the psychological services rendered by the member to a client or clients, the member must, to the extent possible, clarify to all parties prior to rendering the services the dimensions of confidentiality and professional responsibility that must pertain in the rendering of services. The provision of psychological services on behalf of an organizational ~~corporate~~ client does not diminish a member's obligations and professional responsibilities to individual clients.

PA: The need for clarification may arise, for example, in the provision of an assessment of a claimant in an insurance matter, where the insurer has retained the assessor. Regardless of the wishes of the insurer, the member is under all of the obligations that pertain to a client within these Standards and the relevant privacy legislation, including providing access to the individual or his/her authorized representative of his/her personal information and any reports or records which the member has in his/her possession.

4. Supervision

4.1 Responsibility of Supervisors of Psychological Service Providers

If a member is supervising psychological services provided by a member holding a certificate for supervised practice or any other unregulated or regulated service provider who is not an autonomous practice member of the College, the client is considered to be a client of the supervisor.

Members must assume responsibility and accountability for, and review, the actions and services of all supervised providers of psychological services who are not authorized by the College to provide those services autonomously. Supervising members therefore must be authorized to provide the relevant services with the relevant populations.

~~This includes but is~~ These provisions apply to, but are not limited to, supervisees who are employees, students, trainees, members holding certificates of registration authorizing supervised practice, members holding certificates of registration authorizing autonomous practice who are providing services for which they are not authorized and service providers who are not members.

The responsibilities and obligations of the supervisor depend on the qualifications of the supervisee; that is whether the supervisee is a Supervised Practice member, a non-member or an Autonomous Practice member. The requirements for all supervision undertaken, as well as the additional/alternate responsibilities are set out below. ~~Supervisors must ensure that:~~

4.1.1 All Supervision:

- a) the supervising member must be competent to provide the services undertaken by the supervisee;
- b) the supervising member must assess the knowledge, skills and competence of the supervisee and provides supervision as appropriate to the knowledge, skills and competence of the supervisee, based on this assessment;
- c) the supervising member must keep a record of supervision activities and contacts between the supervisor and supervisee and such a record must include, at a minimum:
 - i. the date and length of time of each supervision meeting;
 - ii. the names of clients discussed at each supervision meeting;
 - iii. a summary of discussions regarding each assessment and intervention matter occurring at each supervision meeting;
 - iv. a summary of discussions regarding any relevant ethical, professional and jurisprudence issues discussed at each supervision meeting;
 - v. a notation of any directives provided to the supervisee at each supervision meeting; and
 - vi. notation of any of the supervisee's strengths and needs for further development occurring at each supervision meeting;
- d) supervision records must be retained for a minimum of two years past the date of the last supervisory contact;
- e) the supervising member must ensure that there is an individual supervision agreement, signed by both supervisor and supervisee, for each supervisory relationship and such an agreement must include, at a minimum:
 - i. the date upon which the agreement is effective and the expected date upon which it will expire;
 - ii. the specific duties and obligations of the supervisee;
 - iii. any limitations imposed upon the activities of the supervisee;
 - iv. the specific duties and obligations of the supervisor;
 - v. the expected frequency and length of supervision meetings;
 - vi. the nature of the manner in which the supervisor will be directly involved in the planning, monitoring and evaluation of the services provided to clients
 - vii. contact information and emergency contact information for both the supervisor and supervisee;
 - viii. confirmation that the supervisee must comply with all requirements under the legislation and regulations relevant to the service and the Standards of Professional Conduct; and
 - ix. identification of a plan for appropriate support for the supervisee in the event of a supervisor's unavailability

In institutional settings such as school boards, hospitals and correctional facilities, employment contracts which address the terms of supervision referred to in these *Standards* may be considered to constitute a supervision agreement.

- f) the supervising member must not make supervisory arrangements for the sole purpose of facilitating billing and payment for services by a third-party payer;
- g) the supervising member's name, clearly identified as the supervising member, and his/her contact information, must be clearly identified on all psychological reports and formal correspondence related to psychological services;
- h) 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, ~~title and qualifications~~ relevant degrees and professional designations of the supervised psychological service provider; and

- i) the supervising member must make best efforts to ensure that the supervisory relationship is conducive to professional development and in the best interests of the supervisee.

PA: A service provider for the purpose of this standard is a person who provides psychological services. The supervision Standards are not intended to apply to situations in which, for example, an employee of a member provides support or assistance to a member who is providing the service. Examples of those working under the direction of a member but not subject to the formal requirements under this section are staff members performing administrative tasks, supervising children in a waiting room or assisting in the administration of tests for a member. It's important to note that when a member providing psychological services receives assistance from a non-member, the member remains fully responsible for ensuring that all services which he/she has been assisted with comply with the Standards of Professional Conduct, pursuant to Standard 3.1 (Responsibility for Psychological Services).

PA: A supervision agreement must set out the nature of the supervisor's direct involvement and reflect consideration of the education, skill and training of the supervisee.

PA: Delivery of Applied Behavioural Analysis (ABA) and Intensive Behavioural Intervention (IBI) services in Ontario must conform to the guidelines set by the Ontario Ministry of Children and Youth Services

4.1.2 Supervision of Supervised Practice Members:

In addition to the responsibilities outlined in 4.1.1:

- a) the supervising member, when acting as primary or alternate supervisor for a member holding a certificate authorizing supervised practice, must provide reasonable training and mentoring to assist the supervised member in the registration process; and,
- b) the supervising member must co-sign all psychological reports and formal correspondence related to psychological services prepared by supervisees.

4.1.3 Supervision of Non-Members:

In addition to the responsibilities outlined in 4.1.1:

- a) the supervising member must co-sign all psychological reports and formal correspondence related to psychological services provided by non-member supervisees;
- b) unless the psychological service provided is provided in the context of an organized program where supervisors are accountable for the services by legislation, the supervising member, when supervising an individual who is not engaged in fulfilling the requirements to become a member of the College, must have a direct supervisory relationship with the supervisee who is the service provider; and
- c) such supervisee are not permitted to assign services to or to supervise another service provider;

~~a) the supervising member, when supervising an individual who is not engaged in fulfilling the requirements to become a member of the College, must have a direct supervisory relationship with the supervisee who is the service provider; such a supervisee is not permitted to assign services to, or to supervise, another provider; and,~~

For the purposes of this part, in addition to those services defined within these Standards as Psychological Services, any services provided by a supervisee under the supervision of a member that falls within the scope of practice of psychology as defined in the Psychology Act, 1991 is deemed to be Psychological Services.

4.1.4 Supervision of Autonomous Practice Members of the College

- a) All of the requirements under 4.1.1 are applicable to supervisors of Autonomous Practice members who are seeking to provide services outside of their authorized areas of practice and/or client groups, with the exception of g) (identification of supervisor) and h) (billing and receipts); and,
- b) Supervisors are not required to sign final drafts of reports and formal correspondence but must approve them and document such approval.

~~b) Supervisors will approve final drafts of all reports and formal correspondence.~~

4.1.5 Members Providing Non-Supervisory ~~Guidance~~ Consultation and Other Services

Members providing formal, ongoing ~~guidance~~ consultation regarding psychological matters to ~~individuals~~ other service providers who ~~are~~ may or may not be ~~not~~ members of the College, but are not providing supervision to them, must have a clear agreement, signed by both parties, ~~ensuring~~ confirming the understanding that the member is not taking on the responsibility for client care and that the person receiving such ~~guidance~~ consultation retains responsibility for individual client and organizational client care. Notwithstanding the above, members should be aware that in all circumstances they are accountable for providing competent information.

4.2 Informing Clients

Supervising Members must confirm that clients have been informed of the following at the onset of service provision:

- a) the professional status, qualifications, and functions of the individual providing the service; ~~and~~
- ~~a)~~ b) that all services are reviewed with, and conducted under the supervision of, the supervisor;
- ~~b)~~ c) the identity of the supervisor and how the supervisor can be contacted;
- ~~e)~~ d) that meetings with the supervisor can be arranged at the request of the client, supervisor, and/or supervisee; and,
- ~~d)~~ e) with respect to the limits of confidentiality, that the supervisor must have access to all relevant information about the client.

4.3 Controlled Acts

Only members of the College may perform the controlled acts which they are legally authorized to perform and members must not permit non-members to perform them ~~under any circumstances~~ except as described in 4.3.1 below.

PA: At such time as section 27.(2) 14 of the Regulated Health Professions Act (1991) regarding the controlled act of psychotherapy is proclaimed in force, for the purposes of these Standards, all of the following elements must be present in order for the service to be considered the Controlled Act of Psychotherapy:

1. Treating,
2. by means of psychotherapy technique,
3. delivered through a therapeutic relationship,
4. an individual's serious disorder of thought, cognition, mood, emotional regulation, perception or memory
5. that may seriously impair the individual's judgement, insight, behaviour, communication or social functioning.

In other words, it is possible that a person could provide psychotherapy that is not the “controlled act of psychotherapy”. It may help to avoid confusion when providing services which don’t contain all of the elements listed above, to select another name for the activity, for example: “therapy” or “psychological therapy”.

4.3.1 Supervision of Members Holding Certificates Authorizing Supervised Practice and Other Individuals who are in the Course of Fulfilling the Requirements to become a Member of ~~the~~ a College whose Members are Authorized to Perform a Controlled Act

Supervising members may permit only those members holding certificates authorizing supervised practice and other individuals who are in the course of fulfilling the requirements to become a member of ~~the~~ College—a College whose members are authorized to perform the relevant controlled act and who demonstrate the knowledge, skills and competencies required, to perform the controlled acts. 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. Regardless of the requirements or expectations of any other professional body, the client is considered to be the client of the supervisor.

Supervising members shall permit only those members of the College who demonstrate the knowledge, skills and competencies required to perform the controlled acts. The supervising member shall be responsible for determining the process for the performance of the controlled acts taking into consideration the knowledge, skills and competence of the supervisee.

4.3.2 Supervision of Non-member Providers who are Not Authorized to Perform the Controlled Act of Communicating 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.

Please also see Standard 6.4 (Public Announcements) and 9.1.2 (Record Keeping)

5. Competence

5.1 Practising Within Areas of Competence

A member may only provide services within his/her authorized areas of practice and authorized client populations, and then only when competent to provide those particular services.

A member wishing to provide services that are beyond his/her competence but are within his/her authorized areas of practice and with his/her authorized client populations may only do so under the professional guidance of a member who is authorized and competent to provide the services being delivered.

PA: In deciding whether one is authorized and competent to provide a service, the nature of the client’s presenting difficulties will generally determine whether the member has the appropriate and required authorization. For example, if a client who has suffered a traumatic brain injury has been referred because of a need to assess the nature of their neuropsychological deficits, it is expected that the member providing the assessment would have clinical neuropsychology as an authorized area of practice. If the person was referred because of difficulty performing activities of daily living or occupational

requirements, it is expected that the member would be authorized to work in the area of rehabilitation psychology. If the person was referred because of suspected anxiety or depression then it is expected that the member would be authorized to practice in clinical psychology.

In cases where the focus of the services is not the person's neuropsychological functioning, as long as the member has obtained the opinion of someone authorized in the area of clinical neuropsychology that the person's symptoms are not caused primarily by problems attributable to their neuropsychological functioning, and that the intervention would be appropriate to use with a person with such injury, it may not be necessary to have authorization in the area of clinical neuropsychology, although this would be preferable.

PA: There are not always clear demarcations with respect to population groups, particularly with respect to age. Members are expected to use their professional judgment to determine whether in all of the circumstances, the person's status is consistent with the status of those they are authorized to work with. For example, when trying to determine whether a client is a child or adolescent, it would be important to think about whether the person's abilities, life circumstances and challenges are consistent with those which would normally be expected within the population groups the member is authorized to work with.

5.2 Changing/Expanding Areas of Competence

A member planning to change or expand his/her professional practice to include a new area, client group or activity, beyond the his/her existing authorized area of practice and/or client group, must inform the College, undertake appropriate training, education and supervision, and satisfy any other formal requirements specified by the College.

A member wishing to provide services outside of his/her authorized areas of practice or his/her authorized populations may do so only under supervision.

6. Representation of Services

6.1 Presentation of Qualifications

In the presentation of his/her qualifications, a member must conform to the following practices:

- a) a member must show his/her registration certificate to a client upon request;
- b) a member must represent himself/herself to the public as a member of the College by the use of the title Psychologist or Psychological Associate. This may be abbreviated to C. Psych. or C. Psych. Assoc., or a member may indicate that he/she is a "Member of the College of Psychologists of Ontario";
- c) any of the following applicable limitations must immediately follow a member's title: "Supervised Practice", "Retired" or "Inactive"
- d) the highest academic degree upon which registration is based must immediately precede the professional title;
- e) only where a member has been registered as a Psychologist on the basis of a doctoral degree, may the member use the title "Doctor" or a variation, abbreviation or equivalent in another language in the course of providing or offering to provide, psychological services;
- f) clarification of area of psychological practice may be made by the addition of a qualifier either to the title Psychologist or Psychological Associate (e.g., Clinical Psychological Associate, Clinical Neuropsychologist) or by citing one or more areas of practice (e.g., practice in school psychology, practice limited to school psychology). The qualifier or citation must be consistent with one or more of the areas of practice in the registration guidelines;

- g) other degrees or professional titles, such as MBA, P.Eng., must be specified when the area of study is relevant to the member's psychological practice;
- h) a member must not qualify his/her title by citing membership in professional associations (e.g., OPA, OAPA, CPA, APA, CRHSP); and
- i) a member may qualify his/her title by citing a credential relevant to the practice of psychology in Ontario and issued by a recognized professional credentialing body where that organization conducts a formal written or oral examination of each applicant's knowledge, skills and qualifications.

PA: Members may not use titles or designations such as "sport psychologist" or "community psychologist" as these titles are not recognized in O. Reg. 75/14 Registration, under the Psychology Act, 1991, as areas of practice. Members with expertise in these areas may, however, use descriptors such as or "having expertise in..." or "practice restricted to..."

6.2 Accuracy of Public Statements

A member must not knowingly make public statements that are false, misleading or fraudulent, concerning his/her psychological services or professional activities or those of persons or organizations with which he/she is affiliated. Accordingly, a member must not misrepresent directly or by implication his/her professional qualifications such as education, experience, or areas of competence. Moreover, a member must not misrepresent his/her qualifications by listing or displaying any affiliations with an organization that might be construed as implying the sponsorship or certification of that organization. A member may list or display an affiliation only if such sponsorship or certification does, in fact, exist.

6.3 Promotion of Professional Practice

Members may advertise their practices. A paid advertisement must be identified, or be clearly recognizable, as an advertisement. Members who engage others to create or place advertisements or public statements that promote their professional practice, products, or activities retain professional responsibility for such statements. *Any advertisement of a member's practice must comply with the O.Reg. 209/94 General Regulation: Quality Assurance; Advertising) under the Psychology Act, 1991.*

6.4 Public Announcements

Public announcements of psychological services and fees must be offered in the name of an autonomous practice member of the College.

6.5 Compensation for Publicity

A member must not compensate a representative of the media, in any way, in return for free publicity.

6.6 Provision of Information to the Public

A member who provides information, advice or comment to the public via any medium must take precautions to ensure that:

- a) the statements are accurate and supportable based on current professional literature or research;
- b) the statements are consistent with the professional standards, policies and ethics currently adopted by the College; and
- c) it might reasonably be expected that the individual member of the public receiving this information understands that these statements are for information only, that a professional

relationship has not been established and that there is no intent to provide professional services to the individual.

7. Consent to Services

7.1 Limits of Confidentiality

At the onset of the provision of psychological services, or at the earliest reasonable opportunity, a member is responsible for ensuring that clients are informed ~~informing clients~~ of the limits of confidentiality maintained by the member and anyone he/she may supervise, in accordance with the legislation relevant to the service.

PA: In some settings, informing clients of the limits of confidentiality may be performed by other staff, for example, intake workers. In such situations, members must confirm that the procedures for performing this function are in accordance with the standards of the profession and legislation relevant to the service and if they are not, the member must ensure that clients are appropriately informed about the limits of confidentiality.

7.2 Obtaining Consent

A member is responsible for ensuring that ~~shall obtain~~ informed consent is obtained with respect to the delivery of all psychological services unless otherwise permitted or required by law.

PA: In some settings, informed consent may be routinely obtained by others in the organization, for example, intake workers. In such situations, members must confirm that the procedures for performing this function are in accordance with the standards of the profession and legislation relevant to the service and if they are not, the member must ensure that consent is appropriately obtained.

8. Privacy of Personal Information and Personal Health Information

8.1 Collection, Use and Disclosure

A member ~~shall obtain consent~~ is responsible for ensuring that consent is obtained with respect to the collection, use and disclosure of personal information and personal health information in a manner required by legislation applicable to the relevant service.

PA: In some settings, decisions concerning collection, use and disclosure of information may be made by others in the organization, for example, intake workers and/or records personnel. In such situations, members must determine who the health information custodian is, under the relevant privacy legislation, and who is responsible for obtaining such consent and entitled to make such decisions.

8.2 Access by Client or Client's Authorized Representative

A member is responsible for ensuring that ~~shall provide~~ access to a person's personal or personal health information is provided to ~~by~~ an individual and/or his/her authorized representative ~~to that person's personal information and personal health information contained in the relevant records~~ unless prohibited by law or the member is otherwise permitted to refuse access.

PA: In some settings, decisions concerning access to information may be made by others in the organization, for example, records personnel. In such situations, members must determine who the health information custodian under the relevant privacy legislation is and who is responsible for obtaining such consent and entitled to make such decisions.

9. Records and Record Keeping

9.1 General Conditions

A member must make best efforts to ensure that the member's records are complete and accessible; this applies whether the record is kept in a single file or in several files and whether the record is housed in one location or at several locations.

If a member is supervising psychological services provided by a psychology intern, trainee, member holding a certificate for supervised practice or any other unregulated or regulated service provider who is not an autonomous practice member of the College, the ~~client is the supervisor's. Therefore~~ the supervising member is responsible for the protection and retention of all individual client and organizational client records.

9.1.2 Members Responsible for Supervising Supervised Practice Members and Non-Members

Members supervising Supervised Practice members and non-members are responsible for the security, accessibility, maintenance and retention of records.

9.1.3 Use of Technology in Maintaining Records, for example, Electronic Record Keeping

Members are required to ensure the security of records kept in an electronic form and are required to maintain current knowledge of risks and associated risk mitigation strategies and to apply this knowledge to all technologies they may use to ensure that all records are secure and accessible to the member for the required retention period.

9.2 Individual Client Records

- (1) A member must keep a record related to the psychological services provided by the member for each client who has engaged the member to provide psychological services, or for whom such services have been authorized; and
- (2) The record must include the following:
 - a) the client's name(s), address(es) and (if available) telephone number(s), as well as any other identifying information needed to distinguish the client from other clients;
 - b) the client's date of birth;
 - c) the date of every relevant and material contact between the member and the client;
 - d) the date of every material consultation, either given or received by the member, regarding service to the client;
 - e) a description of any presenting problem and of any history relevant to the problem;
 - f) relevant information about every material service activity related to the client that is carried out by the member or under the responsibility of the member, including, but not limited to: assessment procedures; resulting assessment findings; diagnoses; goals or plans of service developed; reviews of progress on the goals and/or of the continued relevance of the plan of

service; activities related to crises or critical incidents; and interventions carried out or advice given;

- g) relevant information about every material service activity that was commenced but not completed, including reasons for the non-completion;
- h) relevant information about every controlled act, within the meaning of Section 4 of the *Psychology Act, 1991* and subsection 27(2) of the *Regulated Health Professions Act, 1991*, and the regulations under both statutes, performed by the member;
- i) all reports or correspondence about the client, received by the member, which are relevant and material to the member's service to the client; members may choose to return information that is not relevant or material to the member's service to the party that provided the information or to securely destroy that material after confirming that the sender has retained a copy of the material;
- j) all reports and communications prepared by the member regarding the client;
- k) a copy of every written consent and/or documentation of the process of obtaining verbal consent related to the member's service to the client; and
- l) relevant information about every referral of the client, by the member, to another professional.

(3) All information recorded and/or compiled about an individual client must be identifiable as pertaining to that particular client.

(4) All information recorded and/or compiled must be dated and the identity of the person who made the entry must be identifiable.

(5) Despite the requirements of Section 3, members are not required to retain personally identifiable information on persons receiving prevention, public education, group training, emergency or post emergency group services, or group screening services.

PA: The decision about whether to retain a document might be answered by one's response to the question: "Could the reliability of my conclusions or the reasonableness of my actions be confirmed without reference to the information in the document?"

9.3 ~~Corporate~~ Organizational Client Records

- (1) A member must keep a record related to the services provided to each ~~corporate~~ organizational client.
- (2) The record must include the following:
 - a) the name and contact information of the ~~corporate~~ organizational client;
 - b) the name(s) and title(s) of the person(s) who can release confidential information about the ~~corporate~~ organizational client;
 - c) the date and nature of each material service provided to the ~~corporate~~ organizational client;
 - d) a copy of all agreements and correspondence with the ~~corporate~~ organizational client; and
 - e) a copy of each report that is prepared for the ~~corporate~~ organizational client.

9.4 Retention of Records

Unless otherwise required by law:

- (1) The individual client record must be retained for at least:
 - a) ten years following the client's last relevant clinical contact; or
 - b) if the client was less than eighteen years of age at the time of his/her last relevant clinical contact, ten years following the day the client became or would have become eighteen.

(2) The ~~corporate~~[organizational](#) client record must be retained for at least ten years following the ~~corporate~~[organizational](#) client's last contact. If the ~~corporate~~[organizational](#) client has been receiving service for more than ten years, information [contained in the record](#) that is more than ten years old may be destroyed if the information is not relevant to services currently being provided to the client.

9.5 Billing Records

A record of fees charged to and received from clients must contain the following information: the payer, the recipient of psychological services, the service provider(s), the date, nature, and unit fee of the service, the total charged, the payment received and the date of payment. Such records must be maintained on the same retention schedule as the individual or ~~corporate~~[organizational](#) client record.

9.6 Security of Client Records

9.6.1 Storage

A member must make ~~reasonable~~ [best](#) efforts to ensure that client records are secure and protected from loss, tampering or unauthorized use or access.

9.6.2 Transmission and Disclosure

A member must make ~~reasonable~~ [best](#) efforts to ensure that the disclosure or transmission of information protects the privacy of the client record.

9.7 Client Records in a Common Filing System

A member must exercise appropriate care when placing information in a common record in an effort to ensure that his/her reports and recommendations are not misunderstood or misused by others who may have access to the file.

9.8 Client Records of Members Who Cease to Provide Psychological Services

9.8.1 In Private Practice Settings

- (1) A member who plans to, or ceases to, provide psychological services must:
 - a) take ongoing responsibility for the maintenance and security of client records or make arrangements for the security and maintenance of client records. Members must make best efforts to ensure that the designate is a member of the College;
 - b) ensure that former clients have access to the client record for the prescribed retention period; and,
 - c) inform the College of these arrangements prior to ceasing to provide psychological services or at the earliest reasonable opportunity.
- (2) A member in private practice must make arrangements for the security and maintenance of private practice client records in the event of the member's incapacity or death. The member must inform the College of these arrangements. Members must make best efforts to ensure that the designate be a member of the College.

[For the purposes of \(1\) and \(2\) above, if the member is unable to designate a member as custodian of the records, then the member must make best efforts to designate another regulated health professional and if unable to that, then a person who is familiar with the requirements of the applicable legislation.](#)

9.8.2 In Employment Settings

- (1) A member who plans to or ceases to provide psychological services must:
 - a) take reasonable steps to ensure the maintenance and security of client records;
 - b) take reasonable steps to ensure that former clients have access to the client record for the prescribed retention period.

10. Assessment and Intervention

10.1 Familiarity with Tests and Techniques

Members must be familiar with the standardization, norms, reliability, and validity of any tests and techniques used and with the proper use and application of these tests and techniques.

10.2 Familiarity with Interventions

Members must be familiar with the evidence for the relevance and utility of the interventions used and with the proper use and application of these interventions.

10.3 Rendering Opinions

A member must render only those professional opinions that are based on current, reliable, adequate, and appropriate information.

10.3.1 Review Without Evaluation

When, as part of a psychological service, a member conducts a review of a client record and the evaluation of the client is not necessary, the member must document this and indicate the sources of information used to form his/her opinions.

10.4 Identification of Limits of Certainty

A member must identify limits to the certainty with which diagnoses, opinions, or predictions can be made about individuals or groups.

10.4.1 Documentation of Sources of Data

In situations in which all reasonable attempts have been made to conduct an evaluation of a client but a complete evaluation is not possible, a member must ensure that the efforts made to conduct the evaluation and the obstacles encountered are documented. Additionally, a member must indicate the extent to which the availability of only limited information influenced the certainty of his/her opinion.

10.5 Freedom from Bias

A member must provide professional opinions that are clear, fair and unbiased. A member must make ~~reasonable~~ best efforts to avoid the appearance of bias.

10.6 Clarity of Communication

A member must make ~~reasonable~~ best efforts to present information in a manner that is likely to be understood by the client.

10.7 Use of Computer-Generated Reports

Information obtained from ~~Computer~~computer-generated assessments, reports or statements must not be substituted for a member's professional opinion.

10.8 Protection of Test Security

A member must protect the security of tests and respect test copyright. To this end a member must distinguish between test data and test materials. When reasonable and appropriate, raw data from standardized psychological tests and other test data must, upon request and with proper authorization, be released to clients and others. Test material, such as test questions and stimuli, manuals, and protocols should not be released, except as required by law.

11. Fees/Contract for Services

11.1 Fees and Billing Arrangements

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

PA: Fees for services should be determined on a consistent basis, regardless of the payer. A member may, however, offer pro bono services or apply a sliding scale in order to ensure access to services and affordability.

11.2 Ancillary Charges

11.2.1. Interest and Missed Appointments

A member may charge:

- a) interest on an overdue account; or
- b) a fee for a missed appointment or late cancellation when prior notice is not given within an agreed upon period of time, ~~provided that the client is informed at the time when billing arrangements are discussed.~~

The client must be informed of such charges at the time that billing arrangements are discussed.

11.2.2. Administrative Fees

A member may charge a fee for other services such as:

- a) preparing special reports;
- b) copying records; or,
- c) completing forms ((e.g., disability tax credit forms, insurance forms).

Such fees must be discussed prior to the service being undertaken

11.3 Collection of Unpaid Fees

A member must inform the client of the intention to use a collection agency or other legal options to collect fees and must provide an opportunity for payment to be made before doing so.

11.4 Retainers

A member ~~shall not ask~~ must not require a client to prepay for any psychological services including preparation of reports. ~~Funds may be held in trust if agreed to by the client and the member. Members may request retainer funds in advance, but these funds must be held in a segregated account, separate from the member's practice operating account funds or personal funds.~~ These ~~trust~~ segregated funds must only be applied to services rendered, when such services are rendered and invoiced, and any excess segregated funds must be returned to the client following the termination or conclusion of services.

12. Impairment

12.1 Impairment Due to Health Factors

A member must not undertake or continue to provide psychological services when the member is, or could reasonably be expected to be, impaired due to mental, emotional, physiological, or pharmacological or substance abuse conditions. If such a condition develops after psychological services have been initiated, the member must discontinue the psychological services in an appropriate manner. The member must make ~~reasonable~~ best efforts to ensure that clients are notified and assisted in obtaining replacement services to ensure continuity of care.

13. Professional Objectivity

13.1 Compromised Objectivity, Competence or Effectiveness Due to Relational Factors

A member must not undertake or continue to provide psychological services with an individual client when the objectivity, competence or effectiveness of the member is, or could reasonably be expected to be, impaired because of the member's present or previous familial, social, sexual, emotional, financial, supervisory, political, administrative, or legal relationship with the client or a relevant person associated with the client. This prohibition does not apply if the services are delivered to an corporate/organizational client and the nature of the professional relationship is neither therapeutic nor vulnerable to exploitation.

13.2 Compromised Objectivity, Competence or Effectiveness Due to Other Factors

A member must not undertake or continue to provide psychological services when personal, scientific, professional, legal, and financial or other interests could reasonably be expected to:

- a) impair his/her objectivity, competence or effectiveness in delivering psychological services; or
- b) expose the client to harm or exploitation.

13.3 Avoidance of Undue Influence on Clients

A member must not persuade or influence a client to make gifts or contributions of any kind.

13.4 Avoidance of Exploitation

- (1) A member must not use information obtained during the provision of psychological services to directly or indirectly acquire advantage over or exploit the client or to improperly acquire a benefit.

- (2) A member must not exploit persons over whom he/she has supervisory, evaluative or other authority such as clients, students, supervisees, research participants or employees.

13.5 Relations with Current or Former Clients

A member must not enter or make plans to enter into an intimate or sexual relationship with a current client or a former client where the psychological services were provided within the previous two years. Even after two years, a member must not enter into an intimate or sexual relationship with a former client when the member knows or reasonably ought to know that the former client is vulnerable to exploitation or may require future service or some other professional involvement specifically from them. This does not apply to relationships with employees of an corporate organizational client unless the psychological service provided to the particular individual was either intended to be therapeutic or the individual is vulnerable to exploitation.

13.6 Gifts from Clients

A member must not accept a gift of more than token value from a client. In accepting even a small gift, the member must carefully consider the potential clinical implications of this.

14. Harassment, Abuse and Sexual Relationships

14.1 Sexual Harassment

A member ~~shall~~must not engage in sexual harassment in any professional context. Sexual harassment includes, but is not limited to, any or all of the following:

- a) the use of power or authority in an attempt to coerce another person to engage in or tolerate sexual activity including, but not limited to, ~~Such uses include~~ explicit or implicit threats of reprisal for noncompliance or promises of reward for compliance;
- b) engaging in deliberate and/or repeated unsolicited sexually oriented comments, anecdotes, gestures, or touching, where the member knows or ought to know that such behaviours are offensive and unwelcome, or creating an offensive, hostile, or intimidating professional environment; and
- c) engaging in physical or verbal conduct of a sexual nature when such conduct might reasonably be expected to cause harm, insecurity, discomfort, offence, or humiliation to another person or group.

14.2 Other Forms of Abuse and Harassment

A member must not engage in any verbal or physical behaviour of a demeaning, harassing or abusive nature in any professional context.

14.3 Sexual Relationships with Students and Psychology Interns, Psychology Trainees and Supervisees,

A member must not engage in a sexual relationship with an individual with whom the member has a current evaluative relationship or with whom the member might reasonably expect to have a future evaluative relationship.

15. Use of Technology in the Provision of Psychological Services

The College has adopted the Association of Canadian Psychological Regulatory Organization (ACPRO) Model Standards for Telepsychology Practice as a Practice Advisory for all members which are reflected in the following *Standard*:

Regardless of the modality used for service delivery, members are expected to practice according to all of the statutes, regulations, *Standards*, and Codes of Ethics applicable to them in Ontario ~~their home jurisdictions~~ and those in which any of their clients receive their services.

In addition to the general responsibilities for providing psychological services as noted above, the following must be observed in the provision of services via telepsychology:

15.1 Registration in Ontario ~~Home Jurisdiction~~

Members must be authorized in Ontario to provide any service they are providing outside of Ontario, licensed in “good standing” within the jurisdiction in which they reside. When practicing outside of Ontario, members must conform to any and all rules, regulations, and Standards established within Ontario ~~the home jurisdiction~~. As with any other service, Supervised Practice members ~~If holding provisional/candidate licensure, psychologists~~ must be supervised in all telepsychology practice by a member authorized to provide such services. psychologist licensed in “good standing” within the jurisdiction. As such the expectation is that psychologists conform to any and all rules, regulations, and standards established within the home jurisdiction.

15.2 Services Outside of Ontario ~~Home Jurisdiction~~

Members delivering telepsychology services to individuals who are located outside of Ontario ~~their home jurisdiction~~ must ensure they are legally entitled to do so.

PA: The College does not have the authority to determine what is permissible in outside jurisdictions. If after making efforts, a member is unable to obtain permission from a jurisdiction in which the provision of psychological services is restricted by legislation, a member may choose, in exceptional circumstances, to prevent harm to vulnerable clients by providing such services on a short term basis. The College cannot, however, provide permission to members to contravene statutes in another jurisdiction.

PA: A member who wishes to provide services to individuals outside of Ontario where there is a lack of clarity regarding jurisdiction, for example, in military or diplomatic situations, is advised to obtain independent legal advice before providing those services.

15.3 Complaints

Members must inform clients that the College of Psychologists of Ontario is the regulatory body with authority to address any complaints about the services received and must provide contact information for the College on request. ~~about who they may complain to if there is a problem with the services received, providing the contact information for the responsible regulatory body.~~

15.4 Familiarity with Jurisprudence

Members must be familiar with the local jurisprudence and standards for practice in the jurisdiction in which the service is being delivered. Where there is a conflict between such laws/regulations/standards and those of Ontario, members’ home jurisdiction members must act according to the higher standard.

15.5 Liability Insurance

Members delivering telepsychology services outside of [Ontario](#) ~~their home jurisdiction~~ must ensure they carry appropriate liability insurance with respect to such service.

15.6 Competence in Use of Technology

Members must be competent in the [use of the](#) technology of the service delivery medium.

15.7 Privacy

To minimize the possibility of someone impersonating a client and gaining access to confidential health information, or influencing a psychologist's assessment or opinion of the client, members must use some form of coded identification of the client in cases where live visual verification is not possible.

15.8 Technological Failure

Members must make plans with clients regarding what will happen in the event of technological failure.



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Briefing Note – March 2017 Council

New Policy: *Conflict of Interest and Reasonable Perception of Bias (JEEC) & Jurisprudence and Ethics Examination (JEE) Staff and Contributors Agreement Respecting Confidentiality & Conflict of Interest*

Strategic Direction Reflection

Advancing the Council's governance practices

Motion for Consideration re: Recommendation from Executive Committee

That Policy II-10(ii): *Conflict of Interest and Reasonable Perception of Bias (JEEC)* and the corresponding *Jurisprudence and Ethics Examination (JEE) Staff and Contributors' Agreement Respecting Confidentiality & Conflict of Interest* be approved.

Moved By TBD

Background and Rationale

An external audit of the Jurisprudence and Ethics Examination Program was completed in April 2014. While concluding that the JEE program was sound, a number of recommendations were made; recommendations which the JEEC have been addressing. One of the recommendations was to implement a comprehensive conflict of interest and reasonable perception of bias policy specifically for all staff, Committee members and contributors involved in the JEE. While it was recognized that the College Policy I-6: *Conflict of Interest* was the overarching policy, the uniqueness of the JEE suggested that a more detailed policy was required. This would require that a specific agreement accepting the terms of the policy be signed by all staff, Committee members or contributors who work on, or had access to, the JEE.

Budgetary Implications

None

Next Steps

Upon approval of the proposed policy

- The College's Policy and Procedure Manual will be revised;
- The policy will go into effect as of March 24, 2017; and,
- Current Committee members will be asked to review the policy and sign the agreement at the next JEEC meeting.

Attachments

1. Policy II-10(ii): Conflict of Interest and Reasonable Perception of Bias (JEEC)
2. Policy II-10(ii)(a): Jurisprudence and Ethics Examination (JEE) Staff and Contributors' Agreement Respecting Confidentiality & Conflict of Interest

Contact for Questions

Dr. Rick Morris, Registrar & Executive Director

College of Psychologists Policy and Procedure Manual			
SECTION: COUNCIL and COMMITTEES			POLICY #: II – 10(ii)
POLICY: Conflict of Interest and Reasonable Perception of Bias (JEEC)		COVERAGE: Jurisprudence and Ethics Examination Committee, Staff and Contributors	
CREATED: January 2017	REVISED:	NEXT REVIEW: 2020/2021	PAGE #: 1 of 6

POLICY STATEMENT:

All Staff and Contributors associated with the College’s Jurisprudence and Ethics Examination (JEE) program will discharge their duties fairly, objectively and impartially taking reasonable steps to identify actual or potential conflicts or situations which might reasonably give rise to the perception of bias. When such circumstances are identified, individuals will take steps to avoid or mitigate conflicts of interest or situations in which a possible conflict of interest might arise, or which might reasonably give rise to the perception of bias.

It is in the interest of the JEE program to have item writers and Jurisprudence and Ethics Examination Committee (JEEC) members with expertise in the subject areas which form the content of the examination. It is important to avoid or mitigate actual or potential conflicts or situations which might reasonably give rise to the perception of bias. Subsets of members of the JEEC serve as key validators for a specific administration of the examination and are involved in setting the cut score for that administration.

DEFINITIONS:

Jurisprudence and Ethics Examination Committee: The College maintains a Jurisprudence and Ethics Examination Committee 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.

Conflict of Interest: A situation in which a decision-maker or any person providing services on behalf of the College is in a position to positively or negatively influence outcomes that unfairly benefit themselves or any other person or entity either directly or indirectly. In relation to the Jurisprudence and Ethics Examination, a conflict of interest may exist when individuals who teach or supervise potential or current applicants for registration with the College view exam content.

Reasonable Perception of Bias: A situation in which an informed person, viewing the matter realistically and practically – and having thought the matter through – would reasonably conclude that the matter might not be decided fairly and impartially. In relation to the Jurisprudence and Ethics Examination, individuals who train or supervise, by virtue of the expertise required for the JEE, may serve on the JEEC or as item writers, translators or proctors. This lack of separation between training and supervision and the examination is a potential threat to impartiality.

Staff: Staff are employees of the College of Psychologists of Ontario.

Contributors: All individuals, other than College Staff, who provide their time and expertise in the development and administration of the JEE. This includes, but is not limited to: JEEC members, translators, proctors and item writers.

External Providers: Persons other than College staff who are paid to provide service to the College. External providers are also considered contributors (but not all contributors are external providers).

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Examples of external providers include exam consultant(s) and external auditor(s) of the examination program.

Teaching: All activities of an educational nature undertaken by a person, regardless of specific circumstances. This includes teaching in an academic and/or clinical setting and providing guidance, coaching and evaluation, for example, of supervisees.

PROCEDURE:

The College Policy I-6 *Conflict of Interest and Reasonable Perception of Bias* is the overarching policy on which the following policy and procedures are based.

Where an actual or potential conflict of interest has been identified, steps shall be taken to avoid or mitigate the conflict of interest. All persons involved in any exam-related activity shall be provided with a copy of the JEE Policy II-10(ii) *Conflict of Interest and Reasonable Perception of Bias* and will be required to sign the *Staff and Contributors' Agreement Respecting Confidentiality & Conflict of Interest* [JEE Policy II-10(ii)(a)]. This agreement will apply to each and all exam-related activities in which the individual participates. As appropriate, additional orientation may be provided to some contributors. As some contributors are involved with the process for a number of years they may be required to periodically review and re-sign the *Agreement*. Specific additional mitigation procedures are indicated below for each type of contributor.

Any exception to this policy, mitigation procedures or signed agreements indicated requires the explicit written authorization of the Registrar.

1. Item writers

An item writer has access to a subset of potential examination questions during an item writing workshop. An item writer may be engaged in teaching and supervision of current or future test takers.

Procedure

Orientation - at the beginning of an item writing workshop, all item writers will:

- a) receive a presentation on the JEEC Policy II-10(ii) *Conflict of Interest and Reasonable Perception of Bias*;
- b) receive a copy of the *Policy*; and,
- c) sign, if they have not already done so as JEE Committee members, the *Staff and Contributors' Agreement Respecting Confidentiality & Conflict of Interest*.

Agreement

Item writers agree to:

- a) not disclose or discuss any exam item or any combination of exam items with anyone at any time other than to another person engaged in working on the same items during the specific item writing workshop; and,
- b) not teach to the exam other than to provide publically available information provided by the College such as the rationale for the examination and sample questions.

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2. Proctors

A proctor potentially has access to an entire exam at the time of the exam administration. A proctor may also be exposed to one or more individual exam items should a candidate ask a question about an exam item.

Procedure

Prior to the exam administration: all proctors will:

- a) receive initial orientation to the role and the JEEC Policy II-10(ii) *Conflict of Interest and Reasonable Perception of Bias*;
- b) receive a copy of the *Policy* and,
- c) sign the *Staff and Contributors' Agreement Respecting Confidentiality & Conflict of Interest*.

Prior to the exam administration:

- a) College staff will cross-check the names of test takers with proposed or assigned proctors to determine whether there is any professional, supervisory or personal relationship between any proctor and any candidate on file; and
- b) if a professional, supervisory or personal relationship is identified, College staff will appoint an alternate proctor to replace the proctor for whom a potential conflict has been identified.

Agreement

Proctors agree to:

- a) not view the examination and to leave the examination in sealed envelopes intended for individual candidates;
- b) not copy by any means any examination materials;
- c) not disclose or discuss with anyone at any time any exam item to which the proctor may be exposed by virtue of a candidate question about an item;
- d) not assist any candidate in interpreting or answering an exam item;
- e) provide a declaration that the proctor has reviewed the list of test takers for the specific exam administration and to the best of his or her knowledge does not have a current or prior professional, supervisory or personal relationship with any test taker that might lead to a reasonable apprehension of a conflict of interest.
- f) If, despite providing the declaration above, the proctor identifies at the time of the exam that a test taker is someone with whom the proctor has or had a professional, supervisory or personal relationship, the proctor will take reasonable steps to avoid influencing the test taker's performance on the exam. He or she will also document the actual or potential conflict and the steps taken to mitigate it in a report to the College's Director, Registration.

3. Translators

A translator may have access to a substantial portion of the item bank for the examination.

Procedure

Prior to receiving a copy of exam items for translation, each translator will

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- a) receive a copy of JEEC Policy II-10(ii) *Conflict of Interest and Reasonable Perception of Bias* and an explanation of its provisions; and,
- b) sign the *Staff and Contributors' Agreement Respecting Confidentiality & Conflict of Interest*.

Agreement

Professional translator(s) whose services are provided by the Government of Ontario or purchased privately by the College agree to:

- a) not disclose or discuss any exam item or any combination of exam items with anyone who is not a contributor to the JEE, at any time.

Translator(s) who is(are) a member of the College agree to:

- a) not disclose or discuss any exam item or any combination of exam items with anyone who is not a contributor to the JEE, at any time; and
- b) not teach to the exam other than to provide publically available information provided by the College such as the rationale for the examination and sample questions.

4. External Exam Consultant(s)

The exam consultant has ongoing access to the full item bank, instructions to proctors, the marking schema, the form of the exam and all other materials related to administration of the examination.

He or she is also involved in the setting of pass point for each exam administration.

Procedure

Each external exam consultant will:

- a) receive a copy of JEEC Policy II-10(ii) *Conflict of Interest and Reasonable Perception of Bias* and an explanation of its provisions; and,
- b) sign the *Staff and Contributors' Agreement Respecting Confidentiality & Conflict of Interest*.

Agreement

Exam consultant(s) agree to:

- a) not copy by any means any examination materials for distribution outside the College or Committee members;
- b) not disclose or discuss with anyone who is not a contributor to the JEE, at any time, any exam item to which the exam consultant may be exposed; and
- c) not disclose or discuss, without authorization, with anyone who is not a contributor to the JEE, any information regarding the individual or cumulative exam performance of JEE candidates.
- d) not teach to the exam other than to provide publically available information provided by the College such as the rationale for the examination and sample questions

5. Committee

Committee members have access to the full item bank, instructions to proctors, the marking schema, the form of the exam, all other materials related to administration of the examination and de-identified candidates' results.

College of Psychologists Policy and Procedure Manual			
SECTION: COUNCIL and COMMITTEES			POLICY #: II – 10(ii)
POLICY: Conflict of Interest and Reasonable Perception of Bias (JEEC)		COVERAGE: Jurisprudence and Ethics Examination Committee, Staff and Contributors	
CREATED: January 2017	REVISED:	NEXT REVIEW: 2020/2021	PAGE #: 5 of 6

Procedure

Each Committee member will:

- a) prior to or at their first meeting of the JEEC, and at least every three years thereafter, receive orientation to the JEEC Policy II-10(ii) *Conflict of Interest and Reasonable Perception of Bias*;
- b) receive a copy of the Policy; and,
- c) sign the *Staff and Contributors' Agreement Respecting Confidentiality & Conflict of Interest*.

Agreement

JEE Committee members agree to:

- a) not copy by any means any examination materials;
- b) not disclose or discuss with anyone who is not a contributor to the JEE, now or in the future, any information regarding the individual or cumulative exam performance; any exam item to which committee members may be exposed;
- c) not disclose or discuss, without authorization, with anyone who is not a contributor to the JEE, now or in the future, any information regarding the individual or cumulative exam performance of JEE candidates.; and
- d) not teach to the exam other than to provide publically available information provided by the College such as the rationale for the examination and sample questions.

6. Auditor

The exam auditor will have access to all exam items, marking scheme, instructions to proctors and all other materials related to administration of the examination.

Procedure

An auditor will:

- a) receive a copy of JEEC Policy II-10(ii) *Conflict of Interest and Reasonable Perception of Bias* and an explanation of its provisions; and,
- b) sign the *Staff and Contributors' Agreement Respecting Confidentiality & Conflict of Interest*.

Agreement

The auditor(s) agree to:

- a) not copy by any means any examination materials without the express written authorization of the Registrar of the College of Psychologists of Ontario;
- b) not disclose or discuss with anyone who is not a contributor to the JEE, at any time, any exam item to which the auditor may be exposed; and
- c) not disclose or discuss, without authorization, with anyone who is not a contributor to the JEE, any information regarding the individual or cumulative exam performance of JEE candidates.

PROFESSIONAL AND BUSINESS ACTIVITIES:

It is a conflict of interest for current JEE item writers, translators, external exam consultant(s) and committee members to be concurrently involved in professional or business activities external to the College, such as the development of a JEE preparation course, that would benefit from the specific content knowledge they have gained as a JEE contributor.

College of Psychologists Policy and Procedure Manual			
SECTION: COUNCIL and COMMITTEES			POLICY #: II – 10(ii)
POLICY: Conflict of Interest and Reasonable Perception of Bias (JEEC)		COVERAGE: Jurisprudence and Ethics Examination Committee, Staff and Contributors	
CREATED: January 2017	REVISED:	NEXT REVIEW: 2020/2021	PAGE #: 6 of 6

Similarly, former item writers, translators, external exam consultant(s) and JEE Committee members are prohibited from engaging in such professional or business activities for a period of three years after their involvement as a JEE contributor has ended.



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Jurisprudence and Ethics Examination (JEE)

Staff and Contributors' Agreement Respecting Confidentiality & Conflict of Interest

This agreement must be signed by each person who works on the College's Jurisprudence and Ethics Examination (JEE). This includes, but is not limited to, persons engaged in: item development; item review and revision; item translation; standard setting; administration/proctoring; scoring; or auditing the examination.

Confidentiality

In addition to my obligations of confidentiality under section 36.(1) of the *Regulated Health Professions Act, 1991*:

1. I understand and acknowledge that the content of the Jurisprudence and Ethics Examination is confidential in nature.
2. I acknowledge that the Jurisprudence and Ethics Examination and the items therein are the exclusive property of the College of Psychologists of Ontario.
3. I agree to maintain the confidentiality and security of the Jurisprudence and Ethics Examination and test questions.
4. I agree that I will not disclose or discuss the specific examination items, except with other JEE contributors, by any means, now or at any time in the future,.
5. I agree that I will not directly prepare JEE candidates on the specific content of the examination.

Conflict of Interest and Reasonable Perception of Bias

1. If engaged in administering/proctoring the Jurisprudence and Ethics Examination, I will do so in accordance with the written instructions provided by the College of Psychologists of Ontario.
2. At no time will I provide information or engage in any behaviour which might be reasonably perceived as assisting one or more candidates in answering any question on the examination or gaining any type of advantage in their examination performance.

I have read the College's Policy II-10(ii) *Conflict of Interest and Reasonable Perception of Bias*. I understand it and will act in good faith in compliance with this policy. If at any time I am uncertain about whether I am in a conflict of interest or whether a reasonable person might perceive that my actions may be biased, I will seek appropriate consultation with the Director, Registration, as early as possible, before taking any action which may be, or reasonably perceived to be, in breach of this policy.

Name (print): _____

Role(s) in relation to the JEE – please select all that apply:

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> CPO staff | <input type="checkbox"/> External exam consultant |
| <input type="checkbox"/> Item writer | <input type="checkbox"/> Committee member |
| <input type="checkbox"/> Proctor | <input type="checkbox"/> Auditor |
| <input type="checkbox"/> Translator | |

Signature: _____ Date: _____

I understand that if I continue in any role related to the JEE I will be required to renew this agreement at intervals determined by the College.



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Briefing Note – March 2017 Council

Proposed Amendments to Policy II-1(i) Executive Committee: Terms of Reference/Role

Strategic Direction Reflection

Advancing the Council's governance practices

Motion for Consideration re: Recommendation from Executive Committee

That the proposed amendments to Policy II-1(i): *Executive Committee: Terms of Reference/Role* be approved.

Moved By TBD

Rationale

Good governance results in good decisions that are consistent with the College's mandate. The Executive Committee believes that the attached revised role will enhance its work and, in doing so, enhance the Council's efficiency in its current and future work.

Background

Following the audit of the Executive Committee by Richard Steinecke much time and effort has gone into reviewing the role of the Executive Committee. This has included numerous Executive Committee discussions to consider the audit recommendations, gathering of information from other Colleges and input from Council. In December 2016, Council reviewed and approved, in principle, a draft revision to the Terms of Reference of the Executive Committee and an expanded role description. The attached draft policy contains the statements approved by Council in December 2016, presented in the standard policy format.

Budgetary Implications

None

Next Steps

Upon approval of the proposed amendments to Policy II-1(i) *Executive Committee: Terms of Reference/Role*

- The College's Policy and Procedure Manual will be will be revised; and,
- The policy will go into effect as of March 24, 2017.

Attachments:

1. Revised Policy II-1(i): *Executive Committee: Terms of Reference/Role* with tracked changes

Contact for Questions

Dr. Rick Morris, Registrar & Executive Director

College of Psychologists Policy and Procedure Manual			
SECTION: COUNCIL and COMMITTEES			POLICY #: II – 1(i)
POLICY: Executive Committee: Terms of Reference/Role		COVERAGE: Members of the Executive Committee	
CREATED: March 2007	REVISED: June 2013 <u>March 2017</u>	NEXT REVIEW: 2013/2014 <u>2019/2020</u>	PAGE #: 1 of 2

POLICY STATEMENT:

The Executive Committee shall exercise its authority and fulfil its responsibilities as set out in the Regulated Health Professions Act, the Bylaws and policies approved by Council.

PROCEDURE:

1. Normally, the Executive Committee will meet at least four times annually between Council meetings.
2. In addition to its statutory responsibilities and authorities, the Executive will deal with other matters including but not limited to:

College Committees:

- a. Appointing, removing or reassigning Committee Members and Committee Chairs for the statutory and non-statutory committees of the College in accordance with the Bylaws.
- b. Being responsible for the oversight of College Committees, including deciding how these Committees are evaluated
- c. Facilitating the presentation of Committee work to the Council.

Financial Management:

- a. Oversees reports from the Finance & Audit Committee on a quarterly basis and makes recommendations to Council.
- b. Receiving draft budgets from the Registrar and the Finance and Audit Committee in accordance with the financial policies of the College and makes recommendations to Council.

Policy Development and Strategic Planning:

- a. Developing in-house policy and procedures as per Policy I-1.
- b. Facilitating policy review and development regarding issues raised by Committees or others. These issues would be brought to the Executive which would prioritize this work based on available time/budget. The Executive would then direct either a Committee or a task force to address this work.
- c. Facilitating regulatory policy development.
- d. Directing the Strategic Planning process and the Annual Review of the strategic plan.

Registrar & Executive Director

- a. Participating in the Registrar's Performance Review in accordance with the policy on the Registrar's Performance Review (I – 12).
- b. Reviewing and maintaining the currency of the Registrar's role description.
- c. Playing a role in supporting the Registrar when considering HR policies and staff compensation.

College of Psychologists Policy and Procedure Manual			
SECTION: COUNCIL and COMMITTEES			POLICY #: II – 1(i)
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CREATED: March 2007	REVISED: June 2013 <u>March</u> <u>2017</u>	NEXT REVIEW: 2013/2014 <u>2019/2020</u>	PAGE #: 2 of 2

d. Acting as an advisory board in supporting and assisting the President and Registrar with communications to stakeholders, such as associations and government, and for outreach events.

~~a) Considering proposed pre-hearing resolutions in accordance with the Discipline Committee Rules of Procedure.~~



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Briefing Note – March 2017 Council

Draft Budget 2017 2018

Strategic Direction Reflection

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

Motion for Consideration re: Recommendation from Executive Committee

That the Budget for 2017–2018 be approved.

Moved By TBD

Rationale

The proposed Budget for 2017-2018 shows a deficit of \$36,260. This includes a projected decrease in revenue of \$81,350 reflecting the amount anticipated not to be received due to the reduction in the fees to be charged for examination and corporations. This is on the agenda for Council approval at the current meeting.

In planning the budget, Senior Staff were very aware of the trend, in the past, to “over budget” often resulting in significant year-end savings to budget. In the current budget, efforts were made to forecast expenditures based on previous actual spending, taking into account known potential areas for increased spending (e.g., Discipline/Fitness to Practice Hearings or Funding for Therapy). It is recognized that in doing so, there is more potential for ‘over-expenditures’ as the year progresses but this is seen as more desirable than ongoing under-expenditures.

Background

The draft Budget 2017–2018 was reviewed and approved by the Finance and Audit Committee. Subsequent to this, it underwent further review by the Executive Committee. Following this review, the Executive Committee recommended that the draft Budget 2017-2018 be presented to Council for approval.

Next Steps

Upon approval of the draft Budget 2017–2018, including Council revisions if any,

- The budget will take effect June 1, 2017

Attachments:

1. Draft Budget 2017 - 2018

Contact for Questions

Dr. Rick Morris, Registrar & Executive Director

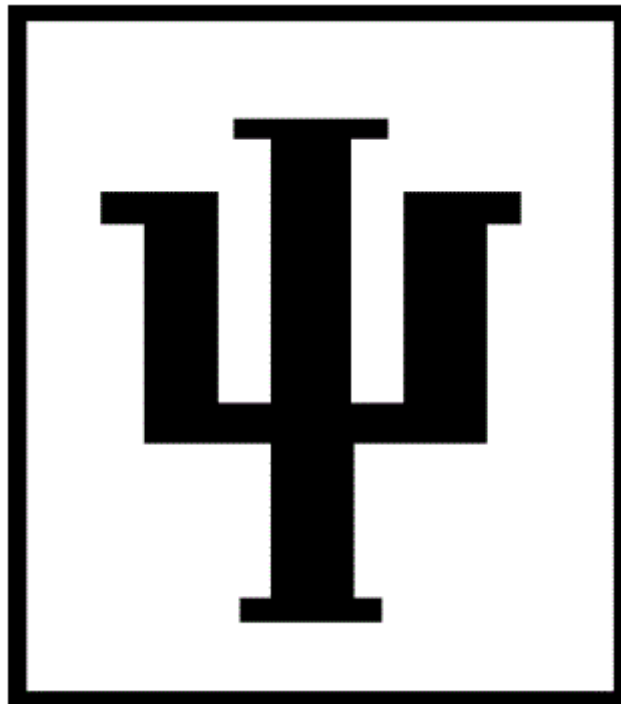
Page 96
The College of Psychologists of Ontario
Proposed Budget: 2017 - 2018

	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	PROJECTED	PROPOSED
	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	YEAR-END	BUDGET
							2016-2017	2017-2018
REVENUE	2,849,890	2,983,381	3,151,017	3,248,043	3,336,866	3,380,747	3,352,799	3,412,450
COST OF SALES	158,204	158,105	224,787	267,711	272,053	269,801	273,700	258,000
GROSS MARGIN	2,691,686	2,825,276	2,926,230	2,980,332	3,064,813	3,110,946	3,079,099	3,154,450
EXPENDITURES:								
Goverance	89,037	77,422	96,770	107,975	86,923	90,895	99,100	101,200
Registration	59,798	52,564	43,860	79,035	57,327	98,882	101,400	95,000
Client relations, communication and education	76,959	66,378	42,927	44,604	78,333	96,011	33,200	33,450
Quality assurance	26,955	24,903	15,240	16,391	7,310	5,501	25,400	29,750
Investigations and resolutions	124,625	57,859	58,721	90,850	122,493	83,368	121,075	112,100
Hearings	145,520	159,252	186,562	348,129	175,297	163,390	240,650	249,400
Liaison (Professional Organizations)	28,151	26,856	25,104	28,850	32,295	32,420	38,014	35,675
Administration	2,111,712	2,203,287	2,109,173	2,160,167	2,322,140	2,292,667	2,443,300	2,534,135
Total Expenditures	2,662,757	2,668,521	2,578,357	2,876,001	2,882,118	2,863,134	3,102,139	3,190,710
REVENUE LESS EXPENSES	28,929	156,755	347,873	104,331	182,695	247,812	- 23,040	- 36,260
VARIANCE AS PERCENT OF REVENUES	1%	5%	11%	3%	5%	7%	-1%	-1%

Projections for the 2016-2017 fiscal year are based on end of November 2016 figures.

THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO

FOR YOUR INFORMATION



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e-mail: cpo@cpo.on.ca website: www.cpo.on.ca

**Ministry of Health
and Long-Term Care**

Office of the Minister

10th Floor, Hepburn Block
80 Grosvenor Street
Toronto ON M7A 2C4
Tel. 416 327-4300
Fax 416 326-1571
www.ontario.ca/health

**Ministère de la Santé
et des Soins de longue durée**

Bureau du ministre

Édifice Hepburn, 10^e étage
80, rue Grosvenor
Toronto ON M7A 2C4
Tél. 416 327-4300
Télééc. 416 326-1571
www.ontario.ca/sante



FEB 17 2017

Ms. Judy Cohen

Dear Ms. Cohen:

Congratulations on your reappointment to the Council of the College of Psychologists of Ontario. I am looking forward to your continued service beginning March 23, 2017 until March 22, 2020.

I am very pleased that you have again taken on this important responsibility to serve the people of Ontario. We expect that you will continue to be committed to the principles and values of public service and that you will perform your duty with integrity.

I have enclosed a copy of the Order in Council which was approved on January 19, 2017.

Again, please accept my congratulations.

Yours sincerely,

A handwritten signature in blue ink, appearing to read "E. Hoskins".

Dr. Eric Hoskins
Minister

Enclosure

c: Registrar
The Honourable Glen Murray, MPP

Executive Council of Ontario/Conseil exécutif de l'Ontario

[Bilingual]



Ontario

**Order in Council
Décret**

On the recommendation of the undersigned,
the Lieutenant Governor of Ontario, by and
with the advice and concurrence of the
Executive Council of Ontario, orders that:

Sur la recommandation de la personne
soussignée, la lieutenant-gouverneure de
l'Ontario, sur l'avis et avec le consentement du
Conseil exécutif de l'Ontario, décrète ce qui
suit :

PURSUANT TO clause 6(1)(b) of the *Psychology Act, 1991*,

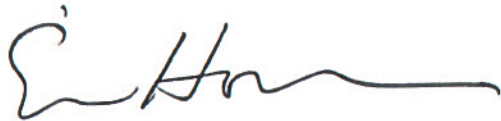
Judy Cohen of Toronto

be reappointed as a part-time member of the Council of the College of Psychologists of Ontario for a
period of three years, effective March 23, 2017 to and including March 22, 2020.

EN VERTU DE l'alinéa 6 (1) b) de la *Loi de 1991 sur les psychologues*,

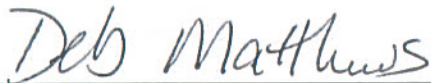
Judy Cohen de Toronto

est reconduite au poste de membre à temps partiel du Conseil de l'Ordre des psychologues de l'Ontario pour une durée fixe de trois ans à compter du 23 mars 2017 jusqu'au 22 mars 2020 inclusivement.



Recommended: Minister of Health and Long-Term Care

Recommandé par : le ministre de la Santé et des Soins de longue durée



Concurred: Chair of Cabinet

Appuyé par : le président/la présidente du Conseil des ministres

Approved and Ordered:
Approuvé et décrété le :

JAN 19 2017


Lieutenant Governor
La lieutenante-gouverneure