

## HEALTH PROFESSIONS LEGISLATION REVIEW: IMPLEMENTING THE RECOMMENDATIONS

In November 1982, the Minister of Health at the time, Mr. Larry Grossman, announced that legislation governing all health professions was to be reconstructed and that the process would take about two years. In a subsequent meeting with Ministry officials we were informed that the first step would be to introduce a Health Professions Procedures Act governing the functions common to the professions included under the procedural act. The second step would result in legislation specific to each profession, dealing with internal matters such as size of governing body, elections, electoral districts, the procedures for registration, etc. In our announcement of these developments in the April 1983 issue of *The Bulletin*, the Board indicated it would endeavor to keep psychologists informed of the progress of the discussions that would take place.

In the eight years that have passed since Mr. Grossman's announcement we have devoted space in fourteen issues of *The Bulletin* to what is now known as the Health Professions Legislation Review (HPLR). During these years the Board has made eleven submissions to the Review and held numerous meetings with government officials, other professional groups, as well as with the Review team itself.

Late in 1988, Mr. Alan Schwartz, Coordinator of the Review, submitted his report to the Minister, Mrs. Elinor Caplan. Entitled *Striking a New Balance: A Blueprint for the Regulation of Ontario's Health Professions*, the report included a rationale for the proposed legislation, a draft Health Professions Procedures Code, or Act, and drafts of 21 professional Acts to govern 24 health professions. The Report was tabled in the Legislature in January 1989.

We now understand the Minister intends to introduce in the Spring session of the Legislature in 1990 legislation implementing the Review's recommendations.

With the submission of his report to the Minister, Mr. Schwartz concluded what has been referred to as the consultative phase of the Review. His team was disbanded at the end of 1988 and the members have taken on other responsibilities. In the next phase it is intended that the recommendations, or their modifications, would be implemented. Staff support for the implementation of the recom-

mendations is provided in part by the Professional Relations Branch in the Ministry of Health under the direction of Mr. Alan Burrows and in part by the Ministry of the Attorney General. Ms. Linda Bohnen, a lawyer previously involved with the work of the HPLR, carries responsibilities divided between the two ministries.

At this point in the process, the Board believes it to be important for psychologists in Ontario to be aware of issues that remain unresolved in respect to the legislative proposals; in particular, those issues affecting the practice of psychology. For in proposing new legislation the government, and the bureaucracy as well, will be required to deal with an array of political pressures.

**THE NATURE OF THE RECOMMENDATIONS**  
Interim recommendations of the HPLR, accepted by the Minister in April 1986, included the deregulation of one profession, naturopathy, presently regulated under legislation; and the regulation of seven professions presently unregulated. Occupational therapy, speech pathology and audiology are notable examples of the latter.

The Review recommends a regulatory system in which "Every professional act contains a general statement describing, but not licensing, the profession's scope of practice" (p.3).

The scope of practice statement proposed for psychology is as follows:

The practice of psychology is the assessment of behavioral and mental conditions, the diagnosis of neuropsychological disorders and dysfunctions and psychotic, neurotic and personality disorder and dysfunctions and the prevention and treatment of behavioral and mental disorders and dysfunctions and the maintenance and enhancement of physical, intellectual, emotional, social and interpersonal functioning.

That this statement may lack something in style or content is a reflection of the fact that it is a compromise arrived at through negotiation, and not simply a description of what psychologists do. Many regret that the statement omits reference to the maintenance or enhancement of group functioning.

In the recommended system, "All potentially harmful acts and procedures are licensed" and performed only by qualified

health professionals authorized by their Professional Act to perform them" (p.4).

In this system, the procedural code "makes it an offence to treat, offer to treat, or advise in respect to any human health condition in circumstances in which the treatment, offer of treatment or advice (or any omission from them) may result in harm." However, "an exception is granted to health professionals acting within their scope of practice" (p.4). Moreover, the recommendations provide for stiff penalties for such offences.

In respect to the use of titles, Mr. Schwartz in his report asserts that "Members of the public must be able to identify different health care providers" (p.16), and that "Restrictions on the use of professional titles are the primary method of enabling consumers to make these important distinctions" (p.16). In addition to protecting such titles as nurse, dentist, or psychologist it is intended that the use of the title, doctor, will also be "highly controlled" (p.16). The proposal would limit the use of the title to physicians, dentists, optometrists, chiropractors and psychologists. Although the Board did not recommend the imposition of this restriction, we objected to any proposal that might limit psychologists' use of their earned titles.

### CONTENTIOUS ISSUES

Although the system recommended by the Review would include for each profession a statement describing its scope of practice, the Review did not consider it appropriate for the entire scope of practice of a profession to be licensed. Instead, it proposed that licensure be limited to specific "acts or procedures," potentially harmful if carried out incompetently.

This aspect of the proposal met with some criticism, particularly from the College of Physicians and Surgeons who argue that this system effectively deregulates the practice of medicine by opening to unqualified practitioners those activities of physicians that go beyond the "acts and procedures" licensed to medicine.

Although the Review has included a comprehensive list of acts to be licensed (to medicine, dentistry, and selected others) that seems to have received broad acceptance, it also included "diagnosis," unqualified and without a rationale, as a licensed act for medicine and dentistry. In their initial pro-

posal the Review recommended that only physicians and dentists be licensed to diagnose. The absence of any qualifier to "diagnosis" would have extended the licence to the diagnosis of any condition, whether or not an understanding of the condition was required in the training of physicians or dentists.

More seriously for psychologists, this provision threatened to cut psychologists off from significant areas of the practice of their own profession. In the course of discussion, the Board and the OPA were able to convince the Review that diagnosis is a legitimate act in the practice of psychology. After several months of negotiation the following was agreed upon as a licensed act for psychology:

Diagnosis of neuropsychological disorders and dysfunctions and psychologically based psychotic, neurotic and personality disorders and dysfunctions. (Section 2.01A, p.326).

We understand that some concerns remain with this licensed act, proposed for psychology, among the members of some groups, such as occupational therapy and speech pathology, who are apprehensive that this provision would restrict their own practices, and within the psychiatric membership of the Ontario Medical Association, although not among its other members.

As readers of *The Bulletin* are aware, the organizations representing psychology have had some difficulty in persuading the Review that the title, psychologist, warrants protection. We have now been reassured that the Review believes the title, psychologist, should be protected and, indeed, Mr. Schwartz in his Report has indicated that restriction on the use of professional titles is essential to his proposed system.

In the procedural code the Review has included an additional restriction (Section 29.03 c) that the Review agreed "should apply to all the health professions."

take or use any name, title or description implying or calculated to lead people to infer that the person is qualified or recognized by law as a member of a health profession (p.17).

Nevertheless, among the 22 profession-specific acts proposed by the Review, only the Acts for chiropractic, dentistry, medicine and optometry include this provision. We trust this omission was unintentional in preparing the final draft of the Report.

### **ENTRY REQUIREMENTS**

In the regulatory system proposed by the Review, the requirements for entry to practise a health profession would be set out in Regulations under each professional Act. This would represent a significant change for

psychology; the Psychologists Registration Act, presently in force, contains the academic requirement for registration in the body of the Act, in Section 6.

The significance of this difference derives from the ease with which changes may be made in regulations, in contrast to the difficulties in amending an Act. Amendments to an Act must be presented to the Legislature where they are submitted to debate; whereas amendments to regulations are considered by a committee of the Legislature and may receive quick approval.

The placement of entry requirements in regulations under new legislation may or may not exacerbate an existing problem that the profession of psychology must face. Among the 75 provider groups, referred to by Mr. Schwartz (p.6) as participating in the Review, has been the Ontario Association of Consultants, Counselors, Psychometrists, and Psychotherapists (OACCPP). Early in the Review we understood that this group consisted of roughly 135 persons, most of whom held a master's degree in psychology. We understand that the membership now numbers somewhere between two and three hundred. Although the qualifications and the work settings of the members of the OACCPP have not been revealed to us, the group has actively sought to obtain entry for its members to registration as a psychologist. As the years have passed, the group has presented briefs to the Review and begun to lobby actively through letters to the Ministry of Health, directors of boards of education and hospital administrators. We have recently received a copy of a brief entitled "Response to the Final Recommendations of the Health Professions Legislation Review," dated June 1989, prepared by the OACCPP and directed, we assume, to the Ministry of Health. The Board believes psychologists should be aware of the reasons the OACCPP gives for its contention that the entry to practise standards should permit the registration of non-doctoral providers of psychological services.

The recommendations of the Review made no reference to qualifications for entry to any of the professions. We understand, however, that the question of non-doctoral providers of psychological services was mentioned to the Minister by the Review team as an unresolved issue. During the course of the Review the Board and the Ontario Psychological Association each presented its reasons why the doctoral degree should be retained as a requirement for registration as a psychologist. However, both organizations expressed willingness to discuss the question of registration of persons with a master's degree in psychology under another title, such as psychological associate. The Board

met five times with representatives of the OACCPP and in our last meeting, in May 1988, we suggested that the OACCPP prepare some proposals for the registration of master's-level persons at a second level under a psychology Act. No response to our suggestion has been received from the OACCPP since that time. Moreover, on reading the June 1989 brief of the OACCPP it becomes clear that the aim of this group is not registration as a psychological associate, but as a psychologist.

### **THE OACCPP BRIEF**

**The group they claim to represent.** In their brief, the Association represents itself as "a substantial number of unregulated practitioners" who are an "integral part" of the profession of psychology (p.2). They claim that in Ontario "there are well over 3,000 professionals providing psychological services but are not registered" (p.5) and that, therefore, they "outnumber psychologists by a ratio of 2 to 1" (p.8). This claim is restated throughout their brief and forms the cornerstone of the argument that non-doctoral practitioners should be registered as psychologists.

Notwithstanding the assertions of the OACCPP, it is and has been difficult to determine who they may be talking about. As for their own two to three hundred members, we have not been shown a membership list. We do not know where they work or what their qualifications are. We are told that some of their members hold a B.A.; and it is not clear how many of their members who hold a master's degree, hold that degree in psychology. It is clear, however, that the figure of 3,000 is fallacious. Moreover, we are collecting data to demonstrate this. We are already aware that psychologists outnumber psychometrists in the hospitals of Ontario, both public and provincial, by a ratio of 3 to 2; and in the correctional institutions by 4 to 1. Our next step is to survey the psychological services in the school systems and in the agencies and institutions funded by COMSOC.

**The nature of their practice.** The second claim made by this group is that their body of knowledge and professional skills are the same as psychologists (p.2); that they provide a "wide range of assessment and treatment services" (pp.5-6), including "neuropsychological evaluation and/or personality diagnosis" (p.7), with "nominal, strictly peer, or no supervision" (p.7); that they are seen and introduced by physicians, social workers and school principals as "the psychologist on our team" (p.7); and that they are hired to do the same work as their ... registered colleagues ... other than administrative roles" (p.7).

# AUDIT REPORT

**MEMBERS OF THE BOARD:**


We have examined the balance sheet of The Ontario Board of Examiners in Psychology as at May 31, 1989 and the statements of stabilization fund, revenue, expenses and surplus and changes in financial position for the year then ended. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such test and other procedures as we considered necessary in the circumstances.


In our opinion, these financial statements present fairly the financial position of the Board as at May 31, 1989 and the results of its activities and the changes in its financial position for the year then ended in accordance with the accounting policies described in Note 1 applied on a basis consistent with that of the preceding year.

Markham, Ontario  
October 3, 1989

*P. A. Gould & A. J. Kelly*

CHARTERED ACCOUNTANTS

<u>THE ONTARIO BOARD OF EXAMINERS IN PSYCHOLOGY</u>			
<u>BALANCE SHEET</u>			
As at May 31, 1989			
(With Comparative Figures for 1988)			
<u>A S S E T S</u>			
	1989	1988	
Cash	\$ 12,845	\$ -	
Short-term investments	737,276	559,799	
Sundry assets	11,053	9,784	
Leasehold improvements - Net of accumulated amortization \$54,616 (1988 - \$40,962) - Note 1(a)	<u>13,654</u>	<u>27,308</u>	
	<u>774,828</u>	<u>596,891</u>	
<u>L I A B I L I T I E S</u>			
Bank indebtedness	-	24,804	
Accounts payable and accrued liabilities	33,483	35,373	
Registration fees received in advance	<u>428,242</u>	<u>352,455</u>	
	<u>461,725</u>	<u>412,632</u>	
<u>A C C U M U L A T E D S U R P L U S</u>			
Stabilization fund - Note 2	12,000	-	
Surplus	<u>301,103</u>	<u>184,259</u>	
	<u>313,103</u>	<u>184,259</u>	
	<u>\$ 774,828</u>	<u>\$ 596,891</u>	
Approved on Behalf of the Board:			
<i>Robert G. Gough</i>		<i>A. H. Phillips</i>	
See accompanying Notes			
			

<u>THE ONTARIO BOARD OF EXAMINERS IN PSYCHOLOGY</u>	
<u>STATEMENT OF STABILIZATION FUNDS</u>	
For the Year Ended May 31, 1989	
BALANCE - Beginning of year	\$ -
Transfer from surplus - Note 2	<u>12,000</u>
<u>BALANCE - End of year</u>	<u>\$ 12,000</u>
See accompanying Notes	
	

THE ONTARIO BOARD OF EXAMINERS IN PSYCHOLOGY

STATEMENT OF REVENUE, EXPENSES AND SURPLUS

For the Year Ended May 31, 1989  
(With Comparative Figures for 1988)

	1989	1988
<b>REVENUE:</b>		
Registration fees	\$ 507,428	\$ 485,786
Examination fees	35,900	43,900
Interest and other income	<u>46,976</u>	<u>27,323</u>
	590,304	557,009
<b>EXPENSES:</b>		
Salaries	205,839	170,116
Employees benefit costs	26,688	22,498
Travel and meetings - Board members	25,830	24,558
Legal and investigation fees	21,103	65,068
Audit fees	3,074	3,138
Rent and occupancy costs	53,321	55,674
Printing and distribution costs	38,519	31,686
General and office expenses	22,010	18,610
Directory advertising	11,555	10,328
Telephone	4,171	4,560
Examination costs	34,295	45,209
Office furniture and equipment	1,401	9,606
Amortization of leasehold improvements	<u>13,654</u>	<u>13,654</u>
	461,460	474,705
<b>EXCESS OF REVENUE OVER EXPENSES</b>	128,844	82,304
<b>SURPLUS - At beginning of year</b>	<u>184,259</u>	<u>101,955</u>
	313,103	184,259
Less: Transferred to stabilization fund	<u>12,000</u>	-
<b>SURPLUS - At end of year</b>	<u>\$ 301,103</u>	<u>\$ 184,259</u>

See accompanying Notes

PG&G  
PAL GOLD & GOLDBERG  
Chartered Accountants

THE ONTARIO BOARD OF EXAMINERS IN PSYCHOLOGY

STATEMENT OF CHANGES IN FINANCIAL POSITION

For the Year Ended May 31, 1989  
(With Comparative Figures for 1988)

	1989	1988
<b>CASH PROVIDED BY OPERATIONS:</b>		
Excess of revenue over expenses	\$ 128,844	\$ 82,304
Amortization of leasehold improvements	<u>13,654</u>	<u>13,654</u>
	142,498	95,958
<b>CHANGES DURING THE YEAR IN:</b>		
Sundry assets	(1,269)	(5,014)
Bank indebtedness	(24,804)	24,804
Accounts payable and accrued liabilities	(1,890)	(23,921)
Registration fees received in advance	<u>75,787</u>	<u>123,490</u>
	47,824	119,359
<b>CASH PROVIDED BY OPERATIONS</b>	190,322	215,317
<b>NET CASH INCREASE</b>	190,322	215,317
<b>CASH AND SHORT-TERM INVESTMENTS</b> - Beginning of year	559,799	344,482
<b>CASH AND SHORT-TERM INVESTMENTS - End of year</b>	<u>\$ 750,121</u>	<u>\$ 559,799</u>

See accompanying Notes

PG&G  
PAL GOLD & GOLDBERG  
Chartered Accountants

NOTES TO THE FINANCIAL STATEMENTS  
May 31, 1989

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

(a) Fixed Assets

Purchases of fixed assets consisting of office furniture and equipment, are fully expensed in the year of acquisition.

Leasehold improvements are being amortized over the term of the lease.

(b) Dues Income

In accordance with the regulations of the organization, annual registration fees cover a period of twelve months commencing June 1, of each year. Registration fees received prior to May 31, 1989 covering the subsequent period from June 1, 1989 to May 31, 1990 have been deferred.

2. SIGNIFICANT BOARD INFORMATION:

In order to fulfill its mandate the Board must be able to carry out its regulatory responsibilities at all times. Certain costs incurred in carrying out disciplinary investigations and hearings can vary significantly and consequently cannot always be accurately predicted and budgeted for in advance. Accordingly the Board has instituted a stabilization fund to finance future legal costs significantly in excess of those budgeted. The maintenance of this fund is also intended to stabilize the level of fees charged to licensees over time.

3. COMMITMENTS:

Under the terms of a lease expiring June 30, 1990, the Board is liable for minimum rental payments of \$30,000 per annum and a proportionate share of operating costs.

In part, this claim may derive some dubious credibility from the job descriptions, or "class series," used by OPSEU in salary negotiations for psychometrists employed by the Ontario government; developed without consultation with representative psychologists and introduced without the knowledge of the governing body. We are presently investigating this, investigating this.

This group, partially trained in psychology, exhibits in its arguments a lack of understanding of the nature of a psychologist's responsibilities and appears to assume that the exercise of isolated skills, of particular assessment or intervention techniques, constitutes the practice of the profession. That the skills and responsibilities of psychologists are not mainly located in the use of these techniques is demonstrated by the job analysis of psychologists reported in the Board's submission to the HPLR in June, 1984.

#### ***The relative competence of psychologists.***

The OACCPP raises questions about the competence of the psychologists who provide the presumed "nominal" supervision, charging that "in some settings non-registered individuals have more skill and expertise in certain areas than their registered supervisors" (p.9). In making this point, the OACCPP reinforces the impression that their understanding of psychology is limited to the techniques they use under supervision, and to the settings in which they use them.

This limited view extends to pointing out that the doctorate in psychology "in no way guarantees that an individual is competent to provide clinical psychological services to the public" (p.7). Although true, this statement ignores, perhaps wilfully, the fact that not all doctoral programs are intended to provide clinical competency, and that the regulatory body, in carrying out its mandate, operates to ensure that psychologists practise within the limits of their competence, whether it is clinical competence, competence in industrial psychology or in some other special area.

***Psychologists' failure to supervise.*** In addition to asserting that the supervision their members receive is nominal, they claim that they are the "front-line providers of psychological services" (p.8), and that "the concept of supervision in psychology is a relative fiction" (p.8). As a consequence, they say, "with specific areas of expertise, non-regulated personnel are being expected to train incoming staff, Ph.D. students, candidates for registration, or even currently registered psychologists" (p.9). In some cases, the registered psychologist "is geographically removed from the service loca-

tion, or supervises many non-registered individuals" (p.9).

***OACCPP argument for registering their members.*** The argument that non-doctoral practitioners are as competent as psychologists to provide psychological services autonomously to the public is followed in the brief by an outline of the reasons why they should have access to registration as psychologists and the consequences to the public if they do not.

To the arguments presented above regarding their numbers, their competence, their independence of supervision and the broad range of services they offer, the OACCPP claims that, as their members are unregulated, they are not accountable (p.11). However, insofar as they report to a supervisor who is accountable, the Board would not be persuaded by this argument. If, however, they practise independently, nothing they do has any necessary connection with psychology.

In this brief, the OACCPP suggests that the doctoral requirement for registration as a psychologist is "an American phenomenon" (p.11) and is, therefore, not a valid requirement for psychologists in Canada. Here it is necessary to point out that the doctorate has been a requirement for registration in Ontario for 23 years; is a requirement for registration in five Canadian provinces, and will be in a sixth when the grandfather clause expires in Newfoundland. Moreover, the doctorate is a requirement for full membership in both the Canadian Psychological Association and the Ontario Psychological Association.

Failure to admit MAs to registration as psychologists is seen by the OACCPP as leading to hardship for MAs. This is hard to countenance insofar as, registered or unregistered, there is nothing to prevent them holding their present positions.

At several points in the brief, the OACCPP holds that failure to register their members is confusing to the public. We maintain that, for those who work in departments of psychology, the confusion is no greater than that between nurses and nursing assistants, physicians and medical residents or interns, or between lawyers and law clerks. The confusion in organized accountability systems, such as hospitals, is relatively benign, and could be reduced if their psychologist supervisors were to institute appropriate procedures to identify staff, and were to exercise some vigilance over their implementation.

By restricting the use of the terms psychologist, psychological and psychology, the government in passing the Psychologist's Registration Act in 1960 intended that there should be no confusion in the public mind.

Independent practitioners who violate the provisions of this Act risk prosecution. Nevertheless, by their own admission the members of the OACCPP appear to be willing to collude in this obfuscation. It is alleged by the OACCPP that the public will suffer additional hardship because there are supposedly too few psychologists to meet the great demand for psychological services. The Board's annual survey indicates that, although very few psychologists are actually unemployed, the demand for them does not warrant the statement made in the brief. That many psychologists may be underemployed, or employed in a position that is not of their first choosing, is borne out by information provided by psychologists on the temporary register, many of whom are employed only part time.

The lack of psychological services in northern Ontario is mentioned, but the brief neglects to point out that there are, as well, very few positions for psychologists in the north. In this instance, the supply can hardly be held accountable for the demand.

The remainder of the brief is devoted to criticizing the recommendations of the Review. The strong title protection proposed by the Review for all professions to be regulated appears to be acceptable to the OACCPP only if their members can be designated psychologists under the legislation.

In supporting the recommendations of the Review and in holding that the doctorate is the appropriate entry requirement for registration as a psychologist, the Board and the Ontario Psychological Association are seen by the OACCPP to be displaying only vested interest and attempting to restrict trade, with the result that the public is denied access to psychological services. This argument ignores the fact that the proposed legislation would not license the practice of psychology. It will merely limit the use of the title, psychologist. Under new legislation MAs will continue to be able to do what they do. They will not be able to diagnose, but according to Mr. Schwartz's argument, diagnosis is not an act they presently engage in. We would hold that access to psychological services will not be affected by the proposed new legislation.

Nor will new legislation affect the services unregulated practitioners provide, only the titles they use when providing them. However, the review has included in its proposals a powerful penalty clause for any unregulated practitioner offering a health service that results or may result in a risk of harm. Although neither the Board nor the OPA is the author of the restriction on diagnosis or the penalty set out in Section 27 of the Procedural Code, the OACCPP see this as a potential restriction on their freedom to practise

independently. We agree that it is, and see this restriction as appropriate.

### **IN CONCLUSION**

Thus far the OACCPP has rejected the Board's offer to discuss the registration of persons holding a master's degree in psychology at a second level under a title such as psychological associate.

It is not clear what the next step in resolving this issue will be. Some knowledge of the identity of the members of the OACCPP could lead to the conclusion that they are not

primarily employed in facilities funded by the Ministry of Health, and therefore might more appropriately seek registration through another Ministry. The Board intends to study the issue and examine whether or not there is a genuine need to regulate this group. As well, the Board intends to develop a paper setting out the reasons why it is not prepared to entertain a proposal to alter the admission requirements for registration as a psychologist. The ultimate decision, however, is the responsibility of the Ministry of Health and

the legislators. The Board believes that, by diverting their energies to attacking the profession of psychology, the OACCPP has served neither the interests of the MAS presently providing psychological services nor the interests of the public. ■

*A paper presented by Barbara Wand to the Section of Psychologists in Education of the Ontario Psychological Association, Ottawa, Ontario, October 27, 1989.*

## **ADDITION TO THE STANDARDS OF PROFESSIONAL CONDUCT**

At its meeting of July 7, 1989, the Board decided that the prohibition against providing advice through the media should be removed. The Board agreed that Principle 4.13 should therefore be added to the *Standards of Professional Conduct*.

4.13 Individual diagnostic and therapeutic services are provided only in the context of a professional psychological relationship. When personal advice is given by means of public lectures or demonstrations, newspaper or magazine articles, radio or television programs, or similar media, the psychologist utilizes the most current relevant data and exercises the highest level of professional judgment. Psychologists may refer listeners or readers to a community agency for assistance in obtaining a referral for psychological services, but may not name individual practitioners or offer their own services through the media. ▶

## **PERSONS WHOSE CERTIFICATES OF REGISTRATION HAVE LAPSED DUE TO RETIREMENT OR UNPAID FEES AND WHOSE NAMES ARE WITHDRAWN FROM THE REGISTER**

Marilyn Ain  
Jean Beniskos  
Laraine Birnie  
Harold Blackwell  
William Blair  
Dawne Burron  
Elizabeth Campbell  
Vladimir Cervin  
Roland Chrisjohn  
Hildegard Corbet  
William Craig  
Mary Crerar  
John Fisk  
Jack Fox

Myrna Francis  
Lela Garyfalow  
Alice Gaukrodger  
Sara Gelfand  
Robert Glueckauf  
Marvin Kaplan  
Martha Keller  
Bernard Lacombe  
James Lane  
Paul Lerner  
Brian MacLean  
John Malone  
William Marshall  
Charles McInnis

James Morrison  
Mark Pancer  
Edwin Peacock  
Miri Peer  
Donald Read  
Barbara Roback  
Gloria Roberts-Fiati  
Ronald Samuda  
Betty Stehelin  
Louis Stokes  
Frank Wake  
Jean Wallace  
Gayle Way

This principle overrides Principle 4(j) of the *Ethical Standards of Psychologists* (1977 Revision) which sets the prohibition on giving advice through the media. ■

## **ADDITIONS TO THE TEMPORARY REGISTER SINCE JULY, 1989**

Emanuel Alkalay  
Joanne Belair Lockhead  
Santosh Bhalla  
Ralph Bierman  
Rodney Brandvold  
Allan Brenman  
Diane Caron-Bourbonnais  
Karen Cohen  
David Fontaine-Prendergast  
Sharon Francis Harrison  
Gail Gonda

Peter Henderson  
Ronald Holden  
Gordon Hope  
Eileen Kaplan  
Marianne Kristofferson  
Charles LaChance  
Bertrand Levesque  
Judy Makin  
Jeff Martzke  
Erich Mohr  
Robert Nolan

Erik Petersen  
Mark Redston  
Allen Rollie  
Judith Shapiro  
Karen Smith  
Susan Sundberg  
Lynn Swanson  
George Tasca  
Laura Thomson  
Lucia Williams

## **The BULLETIN**

The Bulletin is a publication of the Ontario Board of Examiners in Psychology.

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