

## *DUTY TO WARN*

### *A Discussion Paper for Consultation*

*The Council of the College of Psychologists of Ontario has approved a draft standard respecting the establishment of a "Duty to Warn" obligation on members. Many questions arise when considering the concept of duty to warn as such an obligation has serious implications for both clients and practitioners. The following presents an overview and discussion regarding duty to warn as well as a number of points for your consideration and review.*

*The Council is interested in your comments and encourages members to consider the issues raised and to discuss this paper with colleagues. Members are encouraged and invited to provide their feedback to the College by October 31, 1997. All written submissions will be reviewed and provided in their entirety or in summary form to the Council for discussion at the meeting in December 1997.*

#### SHOULD THE COLLEGE IMPOSE A "DUTY TO WARN" UPON MEMBERS?

##### *Institute for Clinical Evaluative Studies Report*

In 1996, a medical expert panel of the Institute for Clinical Evaluative Studies (ICES) focused its attention on situations in which a patient reveals to a physician that the patient plans to harm a third party and, if this threat is carried out, an individual or class of individuals could experience serious harm. The panel's deliberations concerned whether there is any obligation or duty on the part of physicians to inform authorities or the potential victim(s) about the information obtained from the patient.

The ICES panel concluded that physicians have a duty to inform when a patient reveals that he or she intends to do serious harm to another person or persons and it is more likely than not that the threat will be carried out. It asserted that the need to protect the public from likely risk of serious harm supercedes a physician's duty to keep patient information confidential. The panel went on to make specific recommendations respecting the development of a standard of practice requiring the duty to warn.

#### *Response of the College of Physicians and Surgeons of Ontario*

The Council of the College of Physicians and Surgeons of Ontario (CPSO) considered the ICES report at its meeting in June 1996. Specifically, it reviewed the recommendation of the expert panel that a standard of practice be established

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providing that a physician has a duty to notify the police and, where appropriate, the intended victim(s). The duty to warn would be triggered where a person under the physician's care makes threats to do serious bodily harm to an individual or group in circumstances where: a clear and detailed plan is described; the plan is practical and able to be carried out; the intended victim is available immediately or at the time mentioned in the threat; and, the physician is of the opinion it is likely the threat will be carried out.

The Council of the CPSO approved *in principle* the recommendations of the ICES panel respecting duty to warn. It is anticipated the CPSO will consider a regulation amendment to permit the release of confidential information in certain circumstances where a physician believes there is a clear risk of harm to a third party.

### *Legal Issues*

Currently, Canadian law is unclear on whether a psychologist/psychological associate has a duty to warn a third party of potential harm. Whether or not there is a clear duty to warn may depend on the particular nature of the risk posed by the client, the predictability of future behaviour giving rise to the risk, and the ability to identify the person or class of persons at risk. Consideration might be given to a balancing of the duty of confidentiality the member has to his or her client with any duty of care to third parties. The potential for undermining therapeutic relationships by requiring members to reveal communications, made by the client in confidence, to warn a third party about a threat might lead to insistence upon a strict standard being met before the member is required to warn.

It is a legal issue rather than a regulatory issue as to whether a psychologist or psychological associate would be found liable for damages, to an identifiable third person who is harmed by a client, for failing to take steps to protect that person, through warning the authorities, the person or through other means, where the psychologist or psychological associate has reasonable grounds to believe the client presents a serious danger of violence to that person.

### *College of Psychologists of Ontario*

At its September 1996 meeting, Council directed that a proposed policy respecting duty to warn be prepared for Council consideration at the November 1996 meeting. An ad hoc committee was assigned to prepare a draft policy.

The ad hoc committee appointed by the Council of the College of Psychologists of Ontario noted that:

- Council had approved an amendment to the Professional Misconduct Regulation which, if approved by the Ministry, would explicitly permit breach of confidentiality "in circumstances of actual or possible physical harm or death";
- neither the regulations nor the standards require that the member warn anyone if the member believes there is a possibility of physical harm.
- in the Canadian Code of Ethics for Psychologists (1991), which the College adopted in December 1995 for the guidance of members, there is an ethical obligation to maintain confidentiality except "as required or justified by law, or in circumstances of actual or possible serious physical harm or death." (I.40);
- the Code of Ethics (II.36) goes beyond simply permitting breach of confidentiality and establishes an *ethical obligation* to, "Do everything reasonably possible to stop or offset the consequences of actions by others when these actions are likely to cause serious physical harm or death. This may include reporting to appropriate authorities (e.g., the police) or an intended victim, and would be done even when a confidential relationship is involved." (Italics added)

While the Code of Ethics creates the obligation to take action to prevent or minimize harm by doing everything reasonably possible, it does not prescribe what steps to take, but simply suggests possibilities.

At the November 1996 meeting, Council was asked to consider:

- a) whether the College should affirm a duty to "stop or offset" possible harm; and
- b) whether the College should specify how this is to be done, that is, specific actions to be taken.

The ad hoc committee cited the following reasons for recommending that the College establish a duty to warn:

- 1) The ethical obligation to take reasonable action is already enshrined in the Code of Ethics adopted by the College;
- 2) It would better serve the protection of the public to require members to warn rather than to simply permit it;

Although the potential cost of such action could be foreseen as disruption of the client-professional relationship, the committee considered it difficult to argue that the client-professional relationship was more important than protecting the safety of others;

- 3) It would provide guidance to members respecting their obligations. In the view of the ad hoc committee, the boundaries would still be grey and professional judgement would still be necessary. The College could expect of members that they exercise reasonable professional judgement.
- 4) The College would be communicating the message that while confidentiality remains very important, public/personal safety is more important.

Having considered the recommendation of the ad hoc committee, Council approved the following motion at the November 1996 meeting.

**"That a new standard be developed on duty to warn for consultation to the membership, the first draft will appear as follows:**

**Where a client threatens to cause serious physical harm to an individual or group and where the member is of the opinion that there is a reasonable possibility that the threat will be carried out, the member should warn appropriate authorities (which may include police, parents or other authorities who may prevent the action) or the intended victim."**

*Member Consultation - Suggested Points for Discussion:*

- 1) What are the implications of requiring rather than permitting a duty to warn?
- 2) As noted, the College has submitted an amendment to the Professional Misconduct Regulation to the Ministry. If approved, this regulation would permit a member to provide confidential information in certain circumstances. The original wording "or in circumstances of actual or possible physical harm or death" may be redrafted and clarified by the Legal Services Branch of the Ministry to permit confidential information to be provided if a member believes there is "an imminent risk of serious physical harm to the client or to a third party".

Should the College permit disclosure of confidential information in case of danger to a third party as suggested in the current regulation amendment or should such disclosure be mandatory? Is permitting disclosure sufficient to accomplish the desired end of public protection without potentially impairing the confidential therapeutic relationship through the imposition of a mandatory duty to warn?

- 3) How should confidentiality for the individual client be balanced with the public interest relative to the possibility of serious physical harm?
- 4) A requirement to disclose confidential communications could significantly affect the professional-client relationship. How important is it not to undermine the obligation for confidentiality by creating too broad an obligation to warn? Should consideration be given to adding the adjectives "identified" or "identifiable" before the words "individual or group" so that the proposed standard would read: "Where a client threatens to cause serious physical harm to an identified or identifiable individual or group..."? Such language would be intended to require more concrete rather than generalized threats to minimize the harm to the therapeutic relationship from disclosure of nonspecific threats.
- 5) If the College imposes a mandatory duty to warn when a member has reasonable grounds to believe the client may harm someone, this could serve to affect the court's perception of what a reasonable member of the profession would be expected to do in such a circumstance. Could this influence legal decisions respecting the professional's duty of care and create a higher standard than may presently exist?
- 6) Who should be warned?
- 7) Should a similar duty to warn, either mandatory or permitted, be in place when a member has reasonable grounds to believe that a client may pose a danger of serious physical harm or death to himself/herself?

*References*

- 1) Canadian Code of Ethics for Psychologists (Revised 1991): Principle I.40 and II.36.
- 2) College of Physicians and Surgeons of Ontario: Proceedings of Council, June 10 and 11, 1996.

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# President's Report

Over the past few months, the College has embarked on some very important initiatives which are anticipated to have a significant impact on the College and through this, a very positive and beneficial effect for both members and the public.

The Strategic Planning meeting was held on July 21 and 22, 1997 at the College offices. Preliminary information gathered from members, complainants and staff was combined with input from a group of ten member participants selected to represent a broad spectrum of those concerned with the College's functioning. It was an exciting, productive and successful two days that produced a draft Mission Statement, Vision Statement and an action plan for implementation. Following a review by the College Executive and Council, consultation will begin with members and other stakeholder groups. The Strategic Planning process should provide a clear sense of direction and priority for the College for at least the next three years. Results from the planning meeting will also provide guidance for the upcoming organizational review.

At the June meeting, Council approved an external organizational review of the College and Requests for Proposals were sent out. On June 24th, a bidder's meeting, attended by a number of the respondent firms, was held. To make their proposals both relevant and cogent, interested firms will be provided with the preliminary results of the Strategic Planning Process.

The objectives of the external review are to ensure that the College's structures, policies, procedures and management practices are effective in enabling the College to fulfill its mission and achieve its objectives under the Regulated Health Professions Act (1991). All aspects of College functioning, including Council, Committees and staff will be reviewed. We expect the results to provide prioritized recommendations which could improve the College's ability to serve the public interest.

Members of the College Executive met with the Executive of the Ontario Psychological Association to continue discussions of areas for collaborative work. Both organizations have been preparing and sharing information designed for public education and public protection. In this regard, the College has prepared two brochures, samples of which are included in this issue of the Bulletin. A variety of issues affecting both the College and the OPA were reviewed and plans developed for collective action.

In October 1996, the College conducted a Survey on Delegation to which 687 members responded. The data from the survey are now being analysed and summarized for upcoming Executive and Council meetings and we anticipate having this summary information available for the next issue of the Bulletin.

With the results of the Strategic Planning Process evolving and the pending external organizational review, we anticipate a very busy, yet productive year. I will continue to provide you with updates and progress reports as these processes move ahead.§

John T. Goodman, Ph.D., C.Psych.  
President

## Tricky Issues Feature: Retention of Records

Questions regarding the current standard pertaining to the retention of clinical files are frequently asked by members working both in private practice as well as agency or institutional settings. The following written inquiry regarding record retention was recently received. It is reproduced below, with the permission of the member, along with the response by the College, for the information of the membership. In keeping with the College policy respecting confidentiality with regard to member inquiries, the identity of the member and his or her organization have been removed.

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June 1997

Dear Dr. Morris:

*I am writing to seek clarification of the requirements of the College of Psychologists for the retention period for client's psychological files, especially where the client was a child under 18 years of age at the time of service.*

*In the Ontario Board of Examiners in Psychology (OBEP) Bulletin, Vol. 19(2), December 1992, the Board advised registrants that:*

*"until the fate of Bill 99 (an Act to revise the Limitations Act) is clear, the practice of routinely destroying client records after six years should be suspended. Psychologists should retain all client records of whatever age for the time being."*

*In a telephone conversation, the College confirmed this to mean "don't destroy any files".*

*The lawyer for our institution informed me that Bill 99, the Act to revise the Limitations Act had first reading in the House in December 1992, but has not proceeded.*

*The Regulations, Standards of Professional Conduct and Guidelines of the College of Psychologists of Ontario, were published after this advice, in December 1995. Principle 7.4(3) requires that the psychological record:*

*be retained, unless otherwise required by law, for at least:*

(a) *ten years following the client's last contact; or*

(b) *if the client was less than eighteen years of age at the time of his or her last contact, ten years following the day the client became or would have become eighteen.*

*My questions is whether the advice of OBEP of 1992, that we retain all client records of whatever age, indefinitely, still holds. It appears that Principle 7.4(3)(a) and (b) of the Standards, published in 1995, no longer requires or advises indefinite retention. I am asking at this time, since we are reviewing and sorting files for possible destruction.*

*Thank you for your help. I look forward to your reply.*

*Sincerely,*

*A Member*

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July 1997

Dear Member:

Re: Retention of Records

Thank you for your letter of June 1997 seeking clarification on the College's position with respect to the retention of client records. As you noted in your letter, the Standards of Professional Conduct related to this issue, specifically Principle 7.4(3) requires records be retained, unless otherwise required by law, **for at least**:

- (a) ten years following the client's last contact; or
- (b) if the client was less than eighteen years of age at the time of his or her last contact, ten years following the day the client became or would have become eighteen.

As you correctly pointed out, it had been the College's position to advise members to retain records indefinitely. With the revision of the Standards of Professional Conduct in December 1995, this was changed to the current wording. A critical component in the revised principle are the words I have bolded, **for at least**. The Principle provides for a required minimum retention period. Many members incorrectly interpret this Principle to mean that one should destroy records

after this period. Rather, the College's position is that one must keep records for at least the period prescribed and one may, based on professional judgement and experience, choose to keep records longer, even indefinitely.

The College has set the minimum retention period as specified in the standards. Members may decide, in consultation with their lawyers, that without legislation to the contrary it is prudent to keep records indefinitely.

There may be a number of reasons why a member may decide to retain a particular file past the minimum retention period. For example, if the file contains information regarding past sexual abuse of a client, the practitioner may decide to retain the file to have it available should the client choose, in the future, to pursue the abuse through the courts. Another situation could be one where a member may, based on their experience with a particular client, decide it would be prudent to maintain the file as a record of what occurred in the therapeutic relationship if there are concerns that the client could, in the future, make allegations against the member. In this case, the file may be of value to the member in answering the allegations.

There are probably other reasons why a member may choose to retain particular records for a longer time dependent upon the nature of his or her practice and client population. As noted, some members choose to consult their lawyer in setting a general policy for their practice or with respect to particular cases.

I hope this letter addresses your inquiry. If you wish to discuss this issue further or have other questions, please do not hesitate to contact me. §

Yours truly,

Rick Morris, Ph.D., C.Psych.  
Director of Professional Affairs

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***Continued from page 3***

- 3) College of Psychologists of Ontario: Minutes of Council Meeting 95.03, September 15 and 16, 1996 and Minutes of Council Meeting 95.04, November 29 and 30, 1996.
- 4) Ontario Regulation 801/93, Professional Misconduct, and the amendment approved by Council in September 1995 and submitted to the Ministry;
- 5) Standards of Professional Conduct of the College of Psychologists of Ontario (December 1995): Principle 2.19 and Principle 7.5(1)(a); the latter being part of the proposed regulation on Records submitted to the Ministry in 1994.

The concept of permitting and/or requiring a "duty to warn" is a very important policy issue with significant implications for the profession. Members as well as professional and public interest groups are invited and encouraged to comment on the proposed standard as approved by Council in November 1996. The College is interested in your feedback with respect to this proposal and your opinions on desirability, appropriateness, strengths and weaknesses and the implications for clients, providers and the public at large.

Written submissions are invited until October 31, 1997. All submissions will be reviewed and provided in their entirety or in summary form to the Council for discussion at its meeting of December 5 and 6, 1997. §

# Queries Regarding the Practice of Psychology: A Year in Review

One of the services offered by the College is to respond to queries, regarding the practice of psychology, from members as well as the public. Queries span a broad range of topics dealing with all aspects of the regulations, standards, guidelines and ethics of practice. In some cases members request specific information regarding a standard; *How long must files be retained?*, while other calls are prompted more by an ethical dilemma; *If I see a client in this situation, am I in a conflict of interest? or Do I have a duty to warn in the following scenario?* In some cases the answer is very straightforward while others involve a complex discussion of the interplay of factors and concepts to be considered in making a professional judgement or arriving at a difficult decision.

These inquiries are handled primarily by Dr. Rick Morris, Director of Professional Affairs while some queries are directed to the Registrar, Dr. Catherine Yarrow. The following is an overview of the types of practice queries received by the Director of Professional Affairs between June 1, 1996 and May 31, 1997. The majority of questions are received by telephone, however some members prefer to make their inquiries in writing through either conventional mail or E-mail.

During the reporting period, a total of 1207 queries were received; 829 from members of the College and 378 from the public. Some members contacted the College once, while others had occasion to make more than one inquiry. Approximately 27% of the members took advantage of the opportunity to make these types of inquiries of the College at least once. Callers may choose to identify themselves or remain anonymous. In making their inquiries, only 12 (2%) members of the College did not wish to identify themselves, while 45 (13%) members of the public wished to remain anonymous.

Following chart, over half the queries received related to Interpretation of Standards of practice. The next most common questions fit into the Other or miscellaneous category while a

Queries Received June 1, 1996 - May 31, 1997	
<b>ISSUES IN ORGANIZATIONS</b>	
Professional conflict	9
Administration vs. professional supervision	2
subtotal - Issues in Organizations	11
<b>ISSUES IN PRIVATE PRACTICE</b>	
Advertising and announcements	62
Partnerships and incorporation	5
Billing and collection	63
Referrals	3
Title of a practice	5
Individual vocational designation	2
Selling/moving a practice	5
subtotal - Issues in Private Practice	145
<b>INTERPRETATION OF STANDARDS</b>	
Complaints and discipline	22
Supervision	84
Testing/report writing	69
General	18
Records and confidentiality	88
Consent, release of information	168
Obligation to parents	3
Right of client to see report	14
Retention of files/record keeping	38
Obligation to provide raw data/member's right to retain	46
Expert testimony	2
Closing a practice	4
Dual relationship/conflict of interest	59
subtotal - Interpretation of Standards	615
<b>LEGAL QUESTIONS</b>	
Psychologists Registration Act or RHPA - General	19
Use of title	45
Delegation	17
Fitness to practice	1
Freedom of Information or Privacy Act	0
Reporting child abuse/sexual abuse	39
Subpoena to testify	13
Protection of court testimony	0
Professional misconduct	2
Specialty designation	4
Renting office space/fee splitting	3
Psychological services	4
Liability insurance	10
Health Care Consent Act	14
Communicating a diagnosis	36
subtotal - Legal Questions	207
<b>OTHER</b>	
Miscellaneous	190
Quality assurance	39
subtotal - Other	229
<b>TOTAL</b>	<b>1207</b>

When a query is received, it is coded according to subject. The College currently uses five main categories, each of which is divided into subcategories. As can be seen from the fol-

lowing chart, over half the queries received related to Interpretation of Standards of practice. The next most common questions fit into the Other or miscellaneous category while a similar number of questions related to Issues in Private Practice and Legal Issues. Few queries were coded as Issues in Organizations.

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From the chart one can readily see the nature of the most common queries. By far, questions regarding consent, release of information and confidentiality, including the release of raw data, were most common. Other frequently asked questions about standards related to supervision issues, dual relationships or conflicts of interest, and record retention. Questions regarding advertising and promotion, as well as billing and fee collections were the most commonly raised queries in the Issues in Private Practice category.

Within the Legal Questions category a variety of queries were posed. The most common were questions about mandatory reporting of child abuse or sexual abuse of a client by a member of a regulated health profession, followed by queries about the controlled act of communicating a diagnosis. Other members had questions about being subpoenaed to testify although this category overlapped with those related to confidentiality and release of information. About 19% of the questions fell into the Other category. Some of these related specifically to the Quality Assurance program being developed while the others covered a broad range of topics. For example, a number of members called to discuss a particular client situation with respect to issues of duty to warn. Others asked about their obligation, if any, to report incapacity or fitness to practice of either a member of this or another College when one is providing service to other professionals. A number of members inquired about the procedure to follow when considering changing or expanding their current areas of competency. In addition, member's call to the College to discuss articles published in the Bulletin or to provide suggestions for future articles are coded in this category.

A review of the questions posed by non-members finds that many of the callers were interested in the standards related to confidentiality and release of information; *Can I receive a copy of the report written about me by the psychologist/psychological associate I saw?*, and retention of records; *I want to have the original of my file returned to me with no other record of my involvement maintained, is this acceptable in psychological practice?* The College also received numerous queries from lawyers and insurance companies requesting information on standards of professional conduct with respect to psychological practice.

As noted, over 27% of the membership took advantage of the opportunity to call the College to ask a question or discuss an issue related to standards, ethics or other aspects of psychological practice. The College views this as very important role for it to play and members are encouraged to make use of this service. In answering the numerous telephone and written inquiries received, efforts are made to respond in a timely fashion. Given the volume of inquiries however, we sometimes fall behind. If you begin to feel that your voicemail message or letter may have been 'lost in the shuffle', a follow up call would be appreciated.

For a fuller discussion of *What Happens When I Call the College with a Query?* members are referred to the article by that title published in the Bulletin in October 1996. §





## ALTERNATIVE DISPUTE RESOLUTION (ADR)

*The following Case Summary describes a complaint from a member of the public which was resolved through the Alternative Dispute Resolution (ADR) process. It is presented for the education of the profession without identifying either the member or the complainant. Where necessary, some details may have been altered to protect the privacy of the parties involved and references to regulations, standards or codes updated to conform to the most recent published materials.*

### SUMMARY OF THE COMPLAINT

Mr. A and Ms. B were involved in a custody and access dispute. Mr. A approached Dr. X to prepare reports for his use in legal proceedings between himself and Ms. B. Mr. A provided Dr. X with personal documents belonging to Ms. B which Dr. X reviewed and utilized in forming opinions and recommendations about Ms. B. These documents included Ms. B's writings, diary notes, letters and faxes as well as writings provided to Ms. B by others. In completing the assessment and reports, Dr. X did not attempt to verify these sources. Ms. B did not provide consent for Dr. X to review these documents nor to include statements from them in the reports prepared.

In conducting the assessment and providing diagnostic services regarding Ms. B, Dr. X did not contact Ms. B or other relevant sources, and did not meet the child involved. As well, in response to Mr. A's request, Dr. X amended the draft report and incorporated large portions of a letter written by Mr. A.

The reports prepared by Dr. X contained conclusions and recommendations about Ms. B, and her ability to satisfy the best interests of the child. At no time did Dr. X provide Ms. B with information about the results of the assessments. Through the custody and access court process, Dr. X's reports were made available to Ms. B who lodged a complaint with the College regarding the services provided by Dr. X.

### COMPLAINTS COMMITTEE'S VIEW

The Complaints Committee reviewed the issues raised by Ms. B together with the information provided by Dr. X in response, and found a number of areas of concern.

The Committee was concerned that Dr. X did not ensure he/she had conducted an adequate investigation in providing professional opinions about the best interests of the child, and about Ms. B's ability to meet the child's needs. It was noted that Dr. X relied on information provided by Mr. A to reach conclusions about Ms. B and her relationship with the child and failed to validate the conclusions with other important external sources, including Ms. B. The Committee determined that Dr. X should have considered the possibility of bias in relying only on Mr. A and his sources of information. The Committee was also concerned that Dr. X signed psychological reports which contained statements that Dr. X knew or ought to have known were false, misleading or improper and did not take reasonable measures to determine the

*The Committee was concerned that Dr. X did not ensure he/she had conducted an adequate investigation in providing professional opinions about the best interests of the child, and about Ms. B's ability to meet the child's needs.*

accuracy of the contents.

It was also of concern to the Committee that Dr. X did not obtain Ms. B's consent to review her personal documents and to include information from them in the reports. The Committee found that Dr. X allowed pressure placed on him/her by Mr. A to affect his/her professional judgment in persuading him/her to rely on this information, and was con-

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cerned that Dr. X permitted his/her professional position and services to be used inappropriately.

**THE OUTCOME**

The Complaints Committee found that Dr. X failed to maintain the standards of practice of the profession in a number of areas. Dr. X did not obtain consent to review Ms. B's personal documents and to include information from these in his/her reports. He/she provided professional opinions about Ms. B and her parenting based on information from Mr. A, which appeared to be a selective sample of information that supports Mr. A's view of the situation, without taking adequate steps to verify the validity of the information. Dr. X then signed psychological reports without taking reasonable measures to determine the accuracy of all the contents. In doing so, Dr. X signed psychological reports which contained statements which he/she knew or ought to have known were false, misleading or otherwise improper. As well, the Committee found that Dr. X failed to be alert to the pressures from a client and this led Dr. X to lose objectivity as a psychologist.

This matter was resolved through the Alternative Dispute Resolution process. It was agreed that the Committee would issue a "Caution" to Dr. X upon receipt of his/her signed agreement to certain undertakings which included supervision of future practice, further training, and an apology to Ms. B and her family. The Complaints Committee determined that certain safeguards were necessary in this particular case to protect the public interest.

Among other things, Dr. X agreed to conduct psychological assessments and prepare assessment reports only under the supervision of a psychologist, approved by the Registrar, until such time as the supervisor and the Registrar were satisfied that supervision was no longer required. The supervisor would review the last five assessment reports prepared by Dr. X and the entire clinical record maintained with respect to these reports. As well, the supervisor would review the reports that were the subject of the complaint to assist Dr. X in understanding the Committee's concerns and to insure he/she did not make similar errors in the future.

In reviewing these reports, the supervisor would provide Dr. X with education as to whether the opinions, conclusions and recommendations were substantiated by the data he/she had obtained and as to whether the reports were thorough, objective, and impartial. Dr. X would follow through with all recommendations made by the supervisor and would accept responsibility for the payment of these supervisory services.

Dr. X acknowledged that the purpose of this supervisory period was to ensure his/her understanding that, in all types of psychological assessments, psychologists/psychological associates have an obligation to ensure they obtain adequate data to support the professional opinions, conclusions and recommendations set out in the assessment report and to ensure that objectivity and impartiality are maintained in conducting assessments.

Dr. X also agreed to forward a letter to Ms. B, Mr. A and their lawyers, withdrawing the psychological reports and indicating that he/she failed to conduct the necessary investigation prior to formulating the opinions and conclusions contained in those reports. As well, Dr. X agreed to send a formal written apology to Ms. B and any family members referred to in the reports, for providing opinions and recommendations about them, without obtaining adequate data and without their knowledge or consent.

In addition, Dr. X agreed to complete graduate level courses, approved by the Registrar, in assessment and report writing, and ethics.

*While the proceedings of the Complaints Committee and the Alternative Dispute Resolution process are confidential, it is hoped that non-identifying summaries of this type will assist members in their interpretation of the Regulations, Standards of Professional Conduct and Code of Ethics.§*

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**The Barbara Wand Symposium - Your Thoughts Please**

The College is preparing for the next Barbara Wand Symposium on Professional Practice to be held in February. Last year the symposium was videotaped. While there was positive response to this format, others indicated a preference for audiotaping. Feedback would be appreciated on which format would be preferred for this year. Please call Stephanie at (416) 961-8817 or e-mail to cpo@cpo.on.ca if you have an opinion on this or if you have suggestions for a topic. It would be appreciated if topic feedback could be received by the next Council meeting to be held on September 12 and 13.

**Upcoming Council Dates:**

Council meetings have been set for the following dates:  
 September 12 and 13, 1997  
 December 5 and 6, 1997  
 March 27 and 28, 1998

Members of the College as well as the public are welcome to attend. As we have limited seating, we ask that you call in advance.

# Changes to the Register

The College would like to congratulate and welcome 21 new psychological associate members and 37 new psychologist members.

Admitted to the Permanent Register since March 1997

*Psychological Associates*

Cheryl Boyes	Cynthia Lanigan
Claire Chapdelaine	Denise Pedwell
Barbara Dibkin	Maxine Petersen-Lee
Christina Gray	Harvey Segal
Elaine Handelman	William Small
Lynne Hoevenaars	Isaac Smith
Joseph Hulshof	Karen Steinbach
Nancie Im	Janis Stewardson
Ann Johnston	Connie Valeriote
Linda Kempa	Judith Virta
Andrei Kozlowski	

Admitted to the Temporary Register since October, 1996

*Psychologists*

Michael Balthazor	Monique Lefebvre
Jo-Ann Birt	Miroslav Lojkasek
Sidney Bergersen	Shelley McMMain
Roland Chretien	Sandra McNally
Alan Eisenstat	Felicia Otchet
Linda Ennis	Anna Palucka
Health Faulkner	Sian Phillips
Marie-Clair Forgeron	Joyce Radford
Nancy Freeman	Suzanne Regimbal
Cyma Gauze	Joel Rosenberg
Amanda Gold	Louise Rouillard
Robyn Irving	Martin Rovers
Jerry Jedrzkiewicz	Laurel Townsend
Anna Johnson	Julie Torrance-Perks
Natalka Junyk Sharman	Liza Weiser
Barbara Kelly	David Worling

*Psychological Associates*

Alan Clarke  
Zehra Süer

Admitted to the Permanent Register since May 1997

*Psychologists:*

Louise Balfour	Kathleen Lung
Catherine Bart	Nancy Malloy
Melanie Barwick	David MacPhee
Elizabeth Bosman	Patricia Meinhold
Nancy Botyanski	Lynette Monteiro Musten
Shauna Corbin	Norman Park
Deborah Cowman	Suzanne Popham
Mavash Elmpak	Neil Rector
Cindy Ford	Graham Reid
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Linda Iny Lempert	Katherine Short
Martin Lalumière	Giuseppe Spezzano
Mary Lees	Nicole Walton-Allen
Alexander Loucks	Rebecca Ward
	Barbara Woody

*The College wishes to thank those members who generously provided their time and expertise to act as primary and alternate supervisors for candidates admitted to the permanent register.*

## Deceased

The College has learned with regret of the death of the following members and extends its condolences to their families, friends and professional colleagues:

Pierre Baron  
Sidney Folb  
Gerald Gladkowski

## Invitation to Participate in the Field Testing of the Written Jurisprudence Examination

In October 1998, a written jurisprudence examination will replace the current jurisprudence component of the oral examination. As part of the process of developing this examination, the College has scheduled the first field test of jurisprudence items for Wednesday, October 8, 1997.

The field testing of the written jurisprudence examination will be conducted at the same locations, and on the same day, as the administration of the Examination for Professional Practice in Psychology (EPPP). Examination centres are being set up in London, Ottawa, Sudbury and Toronto. The EPPP is held in the morning and the jurisprudence examination field test will begin at 2:30 p.m. at each of the centres. Light refreshments will be available at each site before the commencement of the written jurisprudence examination.

This is an opportunity for members of the College, registration candidates, and graduate students in psychology

ethics courses to test their knowledge of jurisprudence relevant to the practice of psychology in Ontario. The field test will consist of 120 questions with three hours of writing time allotted. Each participant will receive written feedback following the field-testing session. Testing procedures are parallel with those used for the EPPP and participants will be asked to present signed photo identification, such as a driver's licence, upon admission to the examination centre.

To ensure there is as much data as possible available for use in the examination construction, the College is encouraging as many individuals as possible to take the test examination. The field testing is being offered free of charge to the participants. Enclosed with this Bulletin you will find a list of the legislation, standards and guidelines which represent the knowledge base to be tested by the jurisprudence examination. Also included is a form for you to complete and return to the College indicating your attendance at the October field testing. §

## COLLEGE BROCHURES

The College is pleased to announce the publication of two brochures for use by members and the general public. A copy of each brochure is enclosed with this issue of the Bulletin.

*Psychologist? Psychological Associate? Who Provides the Psychological Services You Depend On?* was prepared to educate the public with respect to the regulated practice of psychology in Ontario. It discusses the statutory requirement that a practitioner be registered in order to practice psychology, describes the stringent registration requirements, and outlines members' obligations with respect to standards of professional conduct and ethical practice. In addition, this brochure presents the reasons for a client to select a regulated service provider when seeking services, outlining the benefits and protections inherent in this choice.

It is hoped this information will be useful to the public in better understanding the regulated nature of psychological practice within Ontario and will encourage individuals to seek out and use regulated providers over non-regulated providers when looking for services.

*What is the College of Psychologists of Ontario?* is a companion brochure developed to inform the public of the role and function of the College. It briefly outlines the College's mandate to protect the public and regulate the practice of psychology in the province and describes the structure of the College and the responsibilities undertaken by the various statutorily required committees. The brochure encourages clients to seek to resolve any differences that may arise, directly with the member while informing them of the availability of the complaint procedure should concerns not otherwise be resolved. The brochure also clearly identifies the zero tolerance of the profession for any form of sexual abuse of clients.

Both brochures provide a large space on the reverse for members to include their name and address. It is hoped that members will see these brochures as a valuable resource making them readily available to clients, referral sources and the public. Additional copies of the brochures may be purchased from the College, and a French language version is available. A charge of 50 brochures for \$5.00 plus postage is necessary to cover the cost production and shipping. §

# Statutory Committees

At the June 1997 meeting of the Council, the new Executive Committee was elected from the members of the Council. Dr. John Goodman and Dr. Ron Myhr were re-elected to the posts of President and Vice President, respectively. The remaining Executive Committee members elected were Mr. Gilles Gagon, Mr. Michael Giffen and Ms. Carol Doutriaux.

On the recommendation of the the Executive Committee, Council approved appointments to the remaining six statutory committees. Each committee is formed from professional members of the Council (Council), public members of the Council (Public) and members of the College who are not members of the Council (College).

**REGISTRATION COMMITTEE:**

Chair:	Dr. Janet Polivy
(Council)	Dr. Nancy Eames
	Dr. Ron Frisch
(Public)	Mr. Gilles Gagnon
	Ms. Barbara Gray
(College)	Dr. Randy Katz
	Mr. Jean-Martin Bouchard

**COMPLAINTS:**

Chair:	Dr. Judith Van Evra
(Council)	Dr. Jack Ferrari
(Public)	Mr. Michael Giffen
	Mr. Peter Adams
	Ms. Jane Snyder
(College)	Dr. Larry Cebulski
	Ms. Marcia Sokolowski

**FITNESS TO PRACTICE:**

Chair:	Dr. Ron Frisch
(Council)	Dr. Janet Polivy
(Public)	Mr. Peter Adams
(College)	Dr. Alina Kaminska
	Ms. Melissa Cait

**DISCIPLINE:**

Chair:	Dr. John Goodman
(Council)	Dr. Janet Polivy
	Dr. Nancy Eames
	Dr. Chris Nash
	Dr. Ron Myhr
	Dr. Nina Josefowitz
(Public)	Mr. Gilles Gagnon
	Ms. Jane Snyder
	Ms. Barbara Gray
	Mr. Peter Adams
(College)	Dr. Marty McKay
	Mr. Barry Cull

**QUALITY ASSURANCE COMMITTEE:**

Chair:	Dr. Ron Myhr
(Council)	Dr. Chris Nash
(Public)	Mr. Michael Giffen
(College)	Dr. Margaret Hovanec
	Ms. Monique Pressé

**CLIENT RELATIONS:**

Chair:	Dr. Nina Josefowitz
(Council)	Dr. Jack Ferrari
(Public)	Ms. Jane Snyder
	Ms. Barbara Gray
(College)	Ms. Carol Doutriaux

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# The College Council

*As members of the College are aware, the Council consists of elected and appointed members. Elections are held in March of each year, in three of the electoral districts on a rotating basis. The newly elected members or appointees of Council attend their first meeting the following June. The current Council has ten seats elected from among the members of the College and five appointed members of the public. Below is a brief biography of each of the members of the College Council for 1997/1998.*

**District 1, North: Chris(tine) Nash, Ph.D.,C.Psych.** was elected in a by-election. Dr. Nash was trained at the University of Wales and the University of Exeter. In 1971 she became the Chief Psychologist at Cecil Facer School and in 1972, began work on professional development issues with educators and psychologists through OISE. In 1986 Dr. Nash became Director of the Office for Educational Practice at the University of Guelph and in 1991 was appointed Vice President Academic of Athabasca University, Alberta, before returning in 1994 to Sudbury to a private practice and international consulting on improved teaching. She is also past President of OPA (1988-89). Dr. Nash's term will expire in April 1998.

**District 2, South West: Jack Ferrari, Ph.D.,C.Psych.** was trained at the University of Alberta, and the University of Western Ontario. He has held positions at St. Thomas Psychiatric Hospital and the London Psychiatric Hospital where he currently practices. He is also Adjunct Clinical Professor at the University of Western Ontario, and an associate of Wilson-Banwell since 1994. Dr. Ferrari is currently a member of OPA, a listee of CHRSP, and been involved in serving on the Program Committee of the London Branch of CHMA and the Economics Committee of OPA. Dr. Ferrari's term continues until April 1999.

**District 3, Central West: Judith Van Evra, Ph.D.,C.Psych.** is recently retired from an academic career at St. Jerome's College at the University of Waterloo where she was a Professor of Psychology. She maintains a part-time clinical practice, as well as doing varied consulting work. Her research interests lie in media effects on children's

development and behaviour, and in the area of learning disabilities and other childhood disorders. Dr. Van Evra has published two books relating to these issues. Dr. Van Evra's term expires in April 1998.

**District 4, East: John Goodman, Ph.D.,C.Psych.** is currently a Clinical Professor of Paediatrics at the University of Ottawa. Trained in Michigan and Colorado, he held teaching positions at Yale and McMaster before moving to the Children's Hospital of Eastern Ontario and the University of Ottawa. Dr. Goodman also holds an adjunct Research Professorship at Carleton University. Dr. Goodman is also involved with CPA, APA and is currently serving on the Practice Analysis Task Force established by ASPPB to guide the Professional Examination Service in its review of the psychology licensing exam. Dr. Goodman's term extends until April 1998.

**District 5, Central East: Nancy Eames, Ph.D.,C.Psych.** is the Senior Psychologist for the Simcoe County Board of Education. She is also a representative on the Chief Psychologists of Ontario School Boards Association, a number of committees of the Simcoe County Board of Education and has been a member of the Ontario Psychological Association, Advocate Subcommittee. Dr. Eames' term will expire in April 2000.

**District 6, Metropolitan Toronto: Nina Josefowitz, Ph.D.,C.Psych.** has been in private practice since 1988. Her clinical work focuses on adult individual therapy with a special interest in treating women. In addition, Dr. Josefowitz consults to the Counselling Center at Atkinson College, York University, and has been an Adjunct Professor in the Dept. of Psychology, OISE for the past ten years. Prior to 1988, she worked mainly in the area of University counselling. Dr. Josefowitz' research and theoretical interest have focused on cognitive behavioural therapy and women's issues and she has presented at conferences and published on a variety of issues including computer anxiety, teacher/student relationships, and coping with incest survivor's flashbacks. This is Dr. Josefowitz' second term and it extends to April 2000.

**District 7 - Academic: Janet Polivy, Ph.D., C.Psych.** is currently holds a full time teaching/research appointment as a Professor of Psychology at the University of Toronto. Dr. Polivy was first elected to Council in 1994 in the Aca-

demic District and has worked primarily on the Registration Committee, where she hopes to continue to develop clear, uniform standards for retraining for those who decide to change their area of practice. Work also continues with issues arising from free trade (NAFTA and AIT) agreements. This is Dr. Polivy's second term which will expire in April 2000.

**District 7 - Academic: Ron Frisch, Ph.D., C.Psych.**

has been at the University of Windsor since 1969 teaching Ethics and Professional Practice, Advance Psychotherapy, and Crisis and Short-term Intervention in the graduate programme as well as Abnormal Psychology and Law and Psychology at the undergraduate level. Dr. Frisch has served two terms on OPA's Board of Directors and has served on the Ethics and Policy Committee. In addition to maintaining a small private practice, being Director of the Problem Gambling Research Group investigating the prevalence of pathological gambling in the Windsor area, he is a member of the Windsor-Essex District Health Council. Dr. Frisch's term will expire in April 1999.

**District 7 - Academic: Ronald Myhr, Ph.D., C.Psych.**

was trained at the University of Saskatchewan and University of Toronto. He has taught at both Ryerson and OISE. Most recently, Dr. Myhr has been employed by the City of Toronto Management Services Department as well as maintaining a small private practice in general (clinical) psychology and consulting to organizations on human resources matters and effective team functioning. Dr. Myhr has also been a member of CPA and CHRSPP and actively involved with OPA. Dr. Myhr was re-elected to his second term by acclamation in 1996. His term will expire in April 1999.

**Psychological Associate Ex-Officio: Carol Doutriaux, M.A., C.Psych. Assoc.**

has been a psychological associate since 1994 and actively involved with the College as a member of the Complaints Committee since June of the same year. Currently Ms. Doutriaux is employed at the Public Service Commission of the federal government providing counselling and career-related assessments to public servants affected by downsizing and reorganization. Prior to this, she work as as psychometrist in a group practice in Ottawa focusing on educational, insurance related and custody-access related assessments. In addition, Ms. Doutriaux has had many years of volunteer experience. Ms. Doutriaux' term runs until April 2000.

**Public Members:**

**Mr. Peter Adams** was appointed to Council by the Lieutenant Governor in March of 1996. Mr. Adams has extensive experience as a consultant particularly in the fields of health care, public relations, government relations, and human resources. Mr. Adams appointment will expire on March 31, 1998.

**M. Gilles Gagnon** is past Mayor of Hearst, Ontario and has extensive experience working in the field of health care as an administrator for Notre Dame Hospital and in varied positions for other health care organizations. M. Gagnon's appointment was recently extended an additional year to March 31, 1998.

**Mr. Michael Giffen** is currently teaching for the Simcoe County Board of Education as well as working as an announcer for CKCB, Collingwood. Mr. Giffen has been Program Superintendent for the Christian Education Program for Children, and done volunteer work with community television and theatre. Mr. Giffen's appointment runs until March 31, 1998.

**Ms. Barbara Gray** owns and operates a 425 acre farm. In addition to holding the position of Justice of the Peace for 18 years, Ms. Gray has been secretary of Ontario Wide Justice of the Peace, operated as a Real Estate agent, served on the Planning Board of the Cobourg Real Estate Board Program and has taught a variety of night school subjects. Ms. Gray's appointment extends to March 31, 1998.

**Ms. Jane Snyder** has a background in economics and business and co-owns and operates Snyder Construction. Her past experience includes the position of account executive for an advertising agency, and retail managerial experience. Ms. Snyder's appointment will expire on March 31, 1998. §

**College of Psychologists of Ontario  
Membership Card**

Members have found that, for a variety of reasons, they have occasion to require proof of current registration. In the past, members have requested a letter to this effect from the College or some members have used their receipt of payment of fees as documentation. In response to these types of requests, the College is now issuing each member with a wallet size membership card which was being mailed with the 1997/1998 receipt of fees payment. Members are asked to detach the card from the receipt and sign it on the line indicated. §

Oral examinations were held on June 11, 12 and 13, 1997. The College would like to thank the following people who assisted in conducting these examinations:

**Werner Albert, Ph.D.,C.Psych.**, Deputy Superintendent, Treatment, Ontario Correctional Institute  
**James Alcock, Ph.D.,C.Psych.**, Professor, York University, Toronto; Private practice  
**Rosemary Barnes, Ph.D.,C.Psych.**, Private practice, Toronto  
**Jean-Pierre Bergevin, Ph.D.,C.Psych.**, Professor of Psychology, University College of Hearst  
**Jean-Martin Bouchard, M.Ps.,C.Psych.Assoc.**, Algoma Child and Youth Services; Private practice  
**Stephen Butler, Ph.D.,C.Psych.**, Family Court Clinic, Clarke Institute of Psychiatry; Assistant Professor, Dept. of Psychiatry, University of Toronto  
**Clarissa Bush, Ph.D.,C.Psych.**, Chronic Care Hospital, Memory Disorder Clinic, Ottawa  
**Peter Carlson, Ph.D., C.Psych.**, Regional Community Brain Injury Service, St. Mary's of the Lake Hospital, Kingston  
**Andrew Dalrymple, Ph.D.,C.Psych.**, Director of Psychology, Mental Health Centre, Penetanguishene/Oak Ridge maximum Security Facility; Private Practice  
**Patricia DeFeudis, Ph.D.,C.Psych.**, Director, Department of Psychology, The Credit Valley Hospital, Mississauga  
**Jack Ferrari, Ph.D.,C.Psych.**, Unit Psychologist., London Psychiatric Hospital  
**G. Ron Frisch Ph.D.,C.Psych.**, Associate Professor, University of Windsor  
**Michael Giffen**, Teacher, Simcoe County Board of Education  
**Barbara Gray**, Owner, Locust Cottage Farms, Port Hope  
**Margaret Hearn, Ph.D.,C.Psych.**, Private Practice, London  
**Faith Kaplan, Ph.D.,C.Psych.**, Private Practice, Hamilton  
**Randy Katz, Ph.D.,C.Psych.**, Private Practice, Toronto; Assistant Professor, Department of Psychiatry, University of Toronto  
**Anton Klarich, Ph.D.,C.Psych.**, Chief Psychologist, Essex County Separate School Board - French Language Section  
**Louise LaRose, Ph.D.,C.Psych.**, London Board of Education; Private Practice  
**Maggie Mamen, Ph.D.,C.Psych.**, Private Practice, Ottawa; Sessional Lecturer, Carleton University  
**Schrine Persad, Ed.D.,C.Psych.**, Scarborough Board of Education; Private Practice  
**Joseph Persi, Ph.D.,C.Psych.**, Clinical Coordinator, Regional Children's Psychiatric Centre; Adjunct Professor, Laurentian University  
**George Phills, Ph.D.,C.Psych.**, Private Practice, Westbridge Associates, London  
**Janet Polivy, Ph.D.,C.Psych.**, Professor, Department of Psychology and Psychiatry, University of Toronto.  
**Monique Pressé, M.A.,C.Psych.Assoc.**, Child and Adolescent Centre, Children's Hospital of Western Ontario, London Health Sciences Centre - Victoria Campus  
**Janet Quintal, M.A.,C.Psych.Assoc.**, Bloorview MacMillan Centre, Toronto  
**Gene Stasiak, Ph.D.,C.Psych.**, Psychological Consultant; Director of Research, Ontario Correctional Institute  
**Martyn Thomas, M.A.,C.Psych.Assoc.**, Private Practice, Toronto  
**Judith Van Evra, Ph.D.,C.Psych.**, Private Practice, Waterloo

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The Bulletin is a publication of the College of Psychologists of Ontario

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The Bulletin is published quarterly. Subscriptions for members of the College are included in their registration fee. Others may subscribe at \$10.00 per year, or \$2.50 per single issue. We will also attempt to satisfy requests for back issues of the Bulletin at the same price.

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Les articles dan ce numéro de the Bulletin sont disponibles en français.

The College would also like to thank the following public members of Council who assisted by observing the oral examinations:

**Barbara Gray**, Owner, Locust Cottage Farms, Port Hope

**Michael Giffen**, Teacher, Glen Huron