

Regulating Psychologists and Psychological Associates

Proposed Registration Regulation Amendments: An Update

From the College President

Dear Colleagues:

At the December 6, 2002 Council meeting, Council passed a resolution to consult the membership regarding proposed amendments to the Registration Regulation. These proposed

BARBARA WAND SEMINAR
MAY 9, 2003
LOCATION CHANGE
See last page for details...

amendments were designed to bring the College's registration process into compliance with the Mutual Recognition Agreement (MRA). The MRA, signed by all of the Canadian regulators, requires compliance by July 2003. As part of the regulation amendment process, the College consulted widely with the membership and other stakeholders. In addition, a review of current applicants' files was undertaken to determine whether they would meet the proposed requirements, in order to assess the impact of the proposed amendments on future candidates for registration.

The initial letter I wrote detailing the history of the proposed Registration Regulation and an explanation of the draft amendments is available on the College web site (www.cpo.on.ca). In this update, I would like to present an overview of the feedback from the consultation, briefly outline the results of the review of the current applicants' files, and inform you of Council's deliberations at the recent March 2003 meeting. A more comprehensive summary of members' feedback and the candidates' file review is available on the College website.

The College received a number of inquiries regarding whether currently registered members would be affected by the proposed regulation change. The answer is 'No', the proposed change would only affect future candidates applying for registration, once the government approves the regulation and the transition periods have elapsed.

I would also like to clarify that the proposed regulation and guidelines specify the minimum graduate psychology training required for a *Certificate for Registration Authorizing Supervised Practice*. The guidelines that accompany the proposed amendments to the Registration Regulation are not necessarily sufficient, in themselves, to prepare a candidate for competence to perform the controlled act of communicating a diagnosis. Elsewhere in the regulation and the guidelines are provisions under which the College may require further training and supervised experience to ensure that the candidate is adequately prepared for the intended area of autonomous practice. There are already guidelines in place that include a description of the knowledge and skills required for each area of practice and for the communication of a diagnosis. For issuance of a *Certificate of Registration for Autono-*

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mous Practice, all candidates for registration, as either a psychologist or a psychological associate, will continue to be evaluated throughout the registration process for their preparation for performance of the controlled act of communicating a diagnosis.

Overview of the Proposed Registration Regulation Amendments

The Mutual Recognition Agreement (MRA) identified five core competencies: Interpersonal Relationships, Assessment and Evaluation, Intervention and Consultation, Research and, Ethics and Standards. To comply with the MRA, the College of Psychologists of Ontario, and all of the other Canadian regulators must ensure that candidates for registration in their jurisdiction are evaluated on these five competencies before being granted a certificate to practice autonomously.

The Registration Committee of the College has developed and circulated proposed guidelines specifying how these core competencies would be evaluated in Ontario. The proposed guidelines for candidates applying for a *Certificate of Registration Authorizing Supervised Practice* as a psychologist, would require that the doctoral degree include at least: three half courses in Assessment and Evaluation; three half courses in Intervention and Consultation; two half courses in Research Methods and Statistics: a doctoral dissertation or equivalent; and, one half course in Ethics, or equivalent content covered in other course work. In addition candidates would have completed 600 practicum hours and 1600 hours of an internship. All of these requirements would need to be completed as part of the doctoral degree.

For candidates applying for a *Certificate of Registration Authorizing Supervised Practice* as a psychological associate, the guidelines specify that the masters degree would include at least: two half courses in Assessment and Evaluation; one half course in Intervention and Consultation; one half course in Research Methods & Statistics at the graduate level or two courses at the advanced undergraduate level; a masters thesis or equivalent; and 300 practicum hours. All of these requirements would need to be completed as part of the masters degree.

For candidates applying for a *Certificate of Registration Authorizing Supervised Practice* as either a psychologist or psychological associate, the academic requirements proposed are in addition to the other requirements currently in place.

The proposed regulation amendments provide for the possibility of re-specialization or re-training for candidates whose degrees do not comprise the five core competencies. This re-specialization however, was conceptualized as a comprehensive program of study, and not a post degree augmentation of one or two courses. The proposed amendments also provided for a transition period to ensure current students are not unfairly impacted by the changes.

Overview of Data from Current Registration Files.

The College examined the files of a number of current applicants for registration to determine how well they would meet the proposed course and training requirements if evaluated against the proposed guidelines. This was done in an effort to determine the impact of the registration changes on future candidates.

A total of 160 candidates' files were reviewed, of which complete data was available for 154. Of the 154 files, 128 were applications for registration as psychologists and 26 were applications for registration as psychological associates. These included 108 candidates who received their degrees from Canadian institutions, 14 from American institutions, and 32 from other international institutions. There were no masters level candidates from American institutions.

The comparison of current applicants' academic backgrounds with the proposed guidelines indicated that in order for the majority of these applicants to meet the requirements, it would be necessary to modify the proposed guidelines. At least 80% of all current doctoral level candidates would meet the standard, if the requirement were reduced to three or four professional courses (courses in the two competencies of Assessment and Evaluation, and Intervention and Consultation) completed during graduate training). For masters level candidates, if the required number of graduate courses in these two core competencies were set at 2, then 89% of current Canadian applicants and 82% of international applicants would comply.

The data indicated that for both masters and doctoral level candidates, whether from North American institutions or international institutions, only 50% or less had completed an ethics course as part of their degree. It is difficult to fully

interpret this information, as we do not know if candidates would have met this requirement through "equivalent content and coverage through other graduate courses". In addition, it appears that the proposed internship and practicum requirements were also set at a level too high to be met by a majority of applicants.

Overview of Feedback from Members and Other Stakeholders

Description of the Consultation Process

The College undertook a wide consultation process. A letter explaining the proposed changes was sent to all members, and a separate letter was sent to all training programs for psychology in Ontario. In addition the College met with the Ontario Psychological Association, the Ontario Association of Psychological Associates, representatives from the associations and regulators from other Canadian jurisdictions, and a number of the training programs. There was considerable overlap in the feedback received, a summary of which is presented below.

Main Issues Covered in the Feedback

The feedback centred around four main themes: 1) should the core competencies be embedded in the regulation; 2) should it be possible to augment professional training post-degree; 3) what is an appropriate and fair transition period; and 4) how should re-specialization or re-training be conceptualized?

Summary of the Feedback

- 1. There was general support for a competency-based model. Many respondents felt that specifying the number of courses added to the transparency and fairness of the process.
- 2. The number of professional courses that was initially suggested by the College for Assessment and Evaluation and Intervention and Consultation appears to be too high. Training programs were concerned that this would stifle creativity, and not permit specialized training.
- 3. The feedback was clear that there should be some flexibility in how the requirements are divided between Assessment and Evaluation, and Intervention and Consultation courses. While the MRA requires that both Assessment and Evaluation, and Intervention and Consultation be evaluated, some flexibility would permit training programs more creativity and scope to address specialized interests.
- 4. The Canadian Psychological Association and the American Psychological Association have a rigorous accreditation system. It was suggested that this should be recognized by the College.
- 5. Both the feedback as well as the review of current applicants' files suggests that post-degree augmentation should be possible. In addition, the data from the international students indicate that it is not reasonable to expect international students to have taken a course in Canadian ethics as part of their training and therefore, should be able to take ethics courses, post-degree. The data suggest that many graduate psychology programs in Canada and the United States do not provide discrete courses in ethics. If training in ethics cannot be determined from the file review, it may be necessary to permit Canadian and U.S. candidates to take ethics courses after completion of the graduate degree, as well.
- 6. It appears that many training programs do not clearly differentiate between practicum and internship experiences. It was suggested that rather than having separate requirements, it was more consistent to characterize the required training simply as supervised professional experience. The data and feedback also indicate that a number of programs do not offer supervised practical training as part of the degree. This appears to be of particular concern to international students and masters level students.
- 7. The feedback suggested that two years appears to be a fair transition period for psychological associate candidates. There was concern however, that if the College requires six courses divided between Assessment and Evaluation, and Intervention and Consultation, a two-year transition period may be too short for psychologist candidates. If the guidelines are revised to require fewer Assessment and Evaluation, and



Intervention and Consultation courses, it is unclear if two years would be a sufficient transition period. This will require further review.

8. It was noted that the availability of re-specialization or re-training programs is very limited. If this is going to be required by the College, the issue of availability must be addressed.

Discussion at Council

At the recent Council meeting held on March 13, 2003 Council considered the feedback from members and the results of the data review of current applicants' files. No decisions were made at the Council meeting as the feedback and file review raised many important questions and issues regarding the guidelines and regulation requiring further study before a final draft can be presented to Council for approval. The Council spent considerable time reviewing this information and I would like to give you a sense of the direction that Council is considering.

Council considered the question of the appropriate number of professional practice courses, that is Assessment and Evaluation, and Intervention and Consultation courses, to be the minimum requirement for a certificate authorizing supervised practice. There was a general agreement that for psychologist candidates the minimum number of courses should be set at four, to include at least one Assessment and Evaluation course and one Intervention and Consultation course. Psychological associate candidates would be required to take a minimum of two professional practice courses, one Assessment and Evaluation and one Intervention and Consultation.

There was much discussion at Council regarding the question of augmenting training, post degree. While there was general agreement that some form of augmentation would be desirable, at this point there were no specific recommendations. Council examined the requirements for supervised professional practice, that is internships and/or practica. Given that many of the international students have no supervised experience as part of their degree, it appeared necessary for international candidates to be able to complete the requirement for supervised professional experience subsequent to obtaining their degree. Council discussed whether this was also a preferred option for Canadian trained candidates. The status of candidates who had completed their degrees from a CPA or APA approved program was discussed and there was general agreement that these candidates should be considered to have met the academic requirements for a certificate of registration authorizing supervised practice.

There was some discussion at Council regarding the issue of re-specialization and retraining, however at this point there was no general agreement or proposed changes. Council also considered the issue of the transition period. It was noted that the proposed two-year transition period seemed adequate for psychological associate candidates as a masters programs is usually two years in length. There was some discussion however, regarding the length of transition for psychologist candidates with the suggestion that a longer period be considered to accommodate students who are currently registered in a doctoral degree program in psychology.

I would like to thank everyone who contributed to the feedback. Council is very appreciative of the care and thought given to these complex issues by many individuals, the representatives of the training programs, and the professional associations. Your feedback was extremely valuable in this process and has significantly influenced the College's thinking about these issues. If you have additional feedback you would like to provide to the Council for consideration, please send these comments to the College. The next Council meeting is scheduled for June 6, 2003. Between now and then representatives of Council will be meeting with government and the training programs to continue to discuss these issues. We are hopeful that at the next Council meeting, the revised Registration Regulation and guidelines will be ready for Council to approve for submission to the Ministry of Health and Long-Term Care.

Sincerely yours,

Nina Josefowitz, Ph.D., C.Psych. President

Report

After nine years of being the Toronto representative to the Council of the College of Psychologists, the March 2003 Council meeting was my last Council meeting, and my term as President of the College ends in May 2003. I had the honour to be part of the first Council to be formed after the Regulated Health Professions Act (RHPA) was promulgated and therefore I have had a unique opportunity to be part of the process of our profession grappling with the RHPA. It has been a very exciting time. Because of the length of my time on Council, I thought that I would like to give you an overview of some of what has been accomplished in the last nine years as well some of the issues I think the College will face in the next couple of years.

When I started thinking about how to summarize what we have accomplished since the RHPA was promulgated, I was reminded of a lunch that I recently had with a colleague. She is my contemporary, which means that she has been a psychologist both pre- and post RHPA. She mentioned that, over the last couple of years, she has come to see the College as playing a leadership role in the definition of the psychological profession; and that she has become proud to be a registered health professional, which to her has meant a higher level of accountability and responsibility to the public. I thought that her words highlighted how the changes that have occurred in the regulation of our profession since the RHPA have not only changed the structure and regulatory context in which we operate, but have also influenced the way we think of ourselves as professionals

I would like to discuss some of the specific changes that have occurred, by referring to the various College Committees. First, the entire Quality Assurance (QA) program was developed. Part of the process involved extensive consultation with the membership. Under the RHPA, the College is required to consult with the membership of the College before submitting a proposed change to a regulation. The QA regulation was the first time that the College initiated such a consultation. We published articles in the Bulletin, wrote to members, presented at the Barbara Wand Symposium, and went on the road presenting the QA program to members in various geographic locations. I believe that the consultation facilitated the QA program's acceptance by members, and started a process of consultation between the College and its membership around major policy initiatives.

Initially, there was both opposition and anxiety concerning the idea that a representative of the College could come into your private practice and evaluate your work – this was a new concept for our profession. Members also resented completing the Self Assessment Guide and Professional Development Plan, as it felt like an infringement on their privacy. The level of professional scrutiny, and accountability to the public that is inherent in the QA process represents an important change in our profession, and has become an accepted component of professional practice.

During the past nine years, the Client Relations Committee has educated our members concerning mandatory reporting of patient-therapist sexual abuse and the importance of professional boundaries. The concept of boundary maintenance and its relationship to ethical practice has been in the forefront of the dialogue on ethical decision-making within our profession, and the College has been an important player in the discussion, education and training of our members.

In thinking of the Quality Assurance and Client Relations Committees, it is hard to imagine their accomplishments without Rick Morris, Ph.D., C.Psych., the Deputy Registrar/Director, Professional Affairs and the staff member most closely associated with these two programs. In fact, it is hard to imagine the College without Dr. Morris. Nine years ago, it was the Registrar's duties, amongst her many others, to advise members. The development of a member advisory position has been a key change in the College's administration, and has also played an important role in enabling the College to communicate with members in a proactive, preventive manner. Dr. Morris has also been involved in developing the Barbara Wand Symposium into a key educational forum where our members can learn about legislative and regulatory issues that affect their practice.

Since the promulgation of the RHPA, our Complaints and Discipline process has become a highly complex system, which allows for various solutions at the Complaints level, and pre-hearing conferences at the Discipline level. At present, the Complaints Committee can dismiss allegations, issue cautions, and enter into negotiated undertakings with members. A panel of the Complaints Committee composed of a minimum of three people at least one of whom is a public member and one a professional member approves all resolutions. If a complaint is sent to the Discipline

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Annual Membership Renewal

Please ensure you received your package!

All members should now have received the 2003-2004 annual membership renewal package. These were mailed on April 15, 2003. The package contains the Practice Update Form, an invoice for the fees due, as well as other information on completing and submitted the required information. Membership renewal forms and fees are due by June 1.

Do not forget to complete and sign the Practice Update Form ensuring the information is accurate and up-to-date. As well, it is important that you complete and sign the separate section regarding *mandatory liability insurance*.

If you have not received your renewal package, or if you have any questions about the forms or any aspect of the renewal process, please contact the College.

Committee, we have a pre-hearing conference system. The pre-hearing conference can either facilitate a settlement or, if the parties are unable to reach a settlement, the pre-hearing conference can facilitate the process of the actual hearing. This has enabled us to clearly conceptualize when public protection is best served by rehabilitation and education of members and when public protection is best served by punishment, which could include revocation of a member's registration. Barry Gang, Dip.C.S., C.Psych.Assoc., the Director, Investigations and Hearings, is the staff member most closely associated with the Complaints and Discipline Committees. Barry has provided exceptional leadership in this area, keeping a highly complex system well organized and running while also finding the time to address policy issues.

One cannot think of the changes that have occurred in the College in the last nine years without mentioning registration. It is well known within the College, that none of the work concerning registration would have been possible without Connie Learn's able, thoughtful, and wise support to the Registration Committee. Connie is the Director, Registration and Administration.

Apart from the regular work of the Registration Committee there have been a number of important initiatives. A jurisprudence exam was developed that reliably evaluates candidates' knowledge of jurisprudence and ethics. A systematic process of assessing members' ability to diagnose was developed. This has assisted candidates in having a clear set of criteria by which to evaluate their own preparation and training. In the past few years, the College has initiated regular meetings with representatives of the training programs, which has facilitated cooperation between the training programs and the College in matters relating to registration.

We are presently in the midst of important changes in our registration process. In the next couple of months, we will be submitting a Registration Regulation amendment to the Ministry of Health and Long-Term Care. While the proposed regulation was designed to enable the College of Psychologists to comply with the Mutual Recognition Agreement, I am hopeful that the regulation will not only facilitate mobility, but will contribute to the fairness and transparency of our registration process.

Perhaps I am optimistic, but I believe that there has been a significant improvement in the relationship and the trust between psychologist and psychological associate members of the College over the past nine years. As you know, prior to the establishment of the College under the RHPA, only doctoral level providers were regulated under the title of *Psychologist*. For the first time, in 1994, the Psychology Act and the Registration Regulation under it created the title *Psychological Associate* and permitted the College to register Masters level providers with the same scope of practice as psychologists. This was a major change, and was accompanied by, should I say, some distress to both titles. At present, there is a representative of both titles on all statutory College Committees, including the Executive Committee. It has become the norm that all College Committees are represented by both titles, there is a voting psychological associate seat on Council, as well as the ex-officio seat. I also have noticed that terms that are inclusive of both titles, such as psychological practitioners, members of the profession of psychology or providers of psychological services, have become commonplace, whereas once they sounded awkward and strange.

When I think over what has been accomplished, it is not possible to do so without thinking of my colleagues on Council, both professional members and public members, the many hardworking and exceptionally talented Chairs of Committees, and the College staff, who provide a consistent high level of support to the various Committees. It has also been my privilege to serve on Council with the various Presidents of the College who have offered leadership and vision. This includes Drs. Maggie Mamen, Margaret Hearn, John Goodman, Ron Myhr and Judy Van Evra. I would also like to acknowledge the contribution of Catherine Yarrow, MBA, Ph.D., C.Psych., our Registrar & Executive Director. It has been a personal pleasure to work with Catherine. The entire College runs under her guidance and leadership and, were it not for the structure, organization and care that she brings to her work, it would have been hard for the Council and Committees to accomplish so much.

I would like to briefly discuss some of the issues that I believe will face the College in the future. First, I think that there will continue to be issues around implementing the registration changes that we are proposing. I am hopeful that, given our close collaboration with individuals in the Ministry of Health and Long-Term Care, there will not be too many requested revisions from the government when we submit the regulation. However, the implementation will be an important task, and will necessitate close cooperation with the training programs.

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During the coming year, we expect the government's response to the five-year review of the RHPA. At this point, we do not know what the response will entail. I am hopeful that the government's response to the review of the RHPA will reflect the issues and concerns that this College and others raised during the review process. During my time on Council, I have been particularly involved with the Complaints and Discipline process and, in particular the availability of a variety of remedies, whether this is called alternative dispute resolution or any other term. I am concerned that changes to the RHPA not restrict the kinds of remedies that are available to the Complaints Committee, as cases are so varied and so complex that, just when you think you will never encounter an exception to a rule, it happens, and flexibility is very important.

We are in the process, through the Client Relations Committee, of re-examining our Standards of Professional Conduct. This is an important task, and the Committee hopes to present a draft to Council in the near future. I know there will be extensive consultation with the membership around the proposed changes.

The financial management of the College may be increasingly a challenge in the future. There is a fundamental tension between on the one hand, Council members' vision of the College and the requirements of the RHPA, all of which are exciting and wonderful, but expensive, and on the other hand, the financial reality and constraints of our membership dues. Ours is a relatively small profession. There is also a limit to how much we can increase registration fees. The demographics suggest that we potentially may be looking at increasing numbers of our members retiring, without the same number being replaced by younger members. The College may have to face difficult decisions in the future.

It is with pleasure that I am able to say that I believe there is greater cooperation and peace between the two titles. This of course will continue to be an issue. I believe that the College has developed good relationships with both the Ontario Psychological Association and the Ontario Association of Psychological Associates. I am hopeful that, while I expect some ups and downs, the cooperation and trust between the two titles will continue. In most issues that face our profession there is no difference in whether you are a psychologist or psychological associate. However, we need to be cognizant of how the decisions we make will affect both titles. I believe that a number of legal decisions in the past year have enabled the College to move forward in a constructive way.

The mandate of public protection includes concern for issues that affect the public's access to psychological services and the need to work with government to ensure access. We have, over the past nine years, tried a number of approaches to increase our visibility, contacts with government and influence. This year, we hired a consultant to conduct an environment scan. I am hopeful that the implementation of the recommendations will assist us in developing closer relations with all levels of government. This will remain one of the challenges facing future members of Council.

For me, the last nine years have been an extraordinary opportunity to work with exceptional colleagues - professional members, public members, and College staff. It has also been a unique opportunity to deal with issues that are central to the definition of our profession, and to be part of a process of change. I would like to thank the members who elected me as their representative; I have thoroughly enjoyed being on Council. When I was first elected, I did not expect that it would be such an exciting opportunity for professional growth and personal change. I want to wish everyone a wonderful summer,

Nina Josefowitz, Ph.D., C.Psych. President

Standards of Professional Conduct – Sexual Harassment

http://www.cpo.on.ca/BylawRegStdGuide/RSPCG.pdf - Principle 11

A member recently inquired as to whether the College had published any information or materials related to Sexual Harassment. Specifically, the caller was interested in whether there were any rules or expectations in addition to those outlined in the Canadian Code of Ethics for Psychologists. The member was surprised to learn that the College had a Standard of Professional Conduct addressing this topic. This member's surprise suggested it would be helpful to reprint the Sexual Harassment Standard originally published in December 1999.

At its meeting in September 1999, the Council of the College of Psychologists approved a Principle within the Standards of Professional Conduct pertaining to Sexual Harassment. While the Canadian Code of Ethics, to which members must adhere, contains a provision regarding Sexual Harassment, Council viewed this issue as significant enough to warrant separate inclusion in the Standards of Professional Conduct. The principle reads:

A member of the College will abstain from sexual harassment in any professional context.

Without restricting the generality of the foregoing, the following interpretations are given:

- 1. This standard applies to all members in their interactions within a professional context, and includes but is not limited to clients, students, supervisees, employees, colleagues, assistants, and research participants.
- 2. Sexual harassment includes any or all of the following:
 - i. The use of power or authority in an attempt to coerce another person to engage in or tolerate sexual activity. Such uses include explicit or implicit threats of reprisal for noncompliance or promises or reward for compliance.
 - ii. Engaging in deliberate and/or repeated unsolicited sexually oriented comments, anecdotes, gestures, or touching, if such behaviours are offensive and unwelcome, or create an offensive, hostile or intimidating professional environment.
 - iii. 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.

My employer has recently begun to request a Criminal Record Check for new employees. It was suggested that if the College, as part of registration or annual renewal does this, it would be acceptable and a further check would not be required. Does the College require criminal record checks?

Tricky Issues: Criminal Record The College of Psychologists of Ontario does not require criminal record checks from candidates at the point of initial registration or from members as part of the annual renewal process. At this time, there are no plans to begin to request these. The Registration Regulation under the Psychology Act does however, require both candidates and members to report criminal convictions.

As part of the initial registration process, candidates for registration must declare any previous criminal convictions. Section 4 of the Registration Regulation states that in part:

- 4. The following are registration requirements for all certificates of registration:
 - 1. The applicant must provide details of any of the following that relate to the applicant:
 - a conviction for a criminal offence or an offence related to the regulation of the practice of the profession,
 - a finding of professional misconduct, incompetency or incapacity, in Ontario in relation to another health profession or in another jurisdiction in relation to the profession or another health profession.
 - iii a current proceeding for professional misconduct, incompetency or incapacity, in Ontario in relation to another profession or in another jurisdiction in relation to the profession or another health profession.

A previous conviction will not necessarily impact on a candidate's registration application, however a false statement could affect a candidate's registration. As well, a false statement could be grounds for revocation of a certificate of registration if the false statement were discovered after registration has been granted.

The Registration Regulation also addresses criminal convictions of current members and imposes the requirement that a member provide the College with specific information. The relevant section of the Registration Regulation states:

- 10. (1) It is a condition of a certificate of registration that the member provide the College with details of any of the following that relate to the member and that occur or arise after the registration of the member:
- 1. A conviction for a criminal offence or an offence related to the regulation of the practice of the profession.
- 2. A finding of professional misconduct, incompetency or incapacity, in Ontario in relation to another health profession or in another jurisdiction in relation to the profession or another health profession.
- 3. A proceeding for professional misconduct, incompetency or incapacity, in Ontario in relation to another profession or in another jurisdiction in relation to the profession or another health profession.

While the reporting of a criminal conviction may not necessarily impact on a member's registration status, this would be determined by a case-by-case review.

Election Results

Elections to Council were held this year in Electoral District 5 (GTA East), District 6 (GTA West) and for the ex-officio Psychological Associate seat.

The Council welcomes:

Janice Currie, Ph.D., C.Psych., elected in District 5
Dalia Slonim, Psy.D., C.Psych., acclaimed in District 6
Mary Bradley M.A.Sc., C.Psych.Assoc., acclaimed in ex-officio Psychological Associate seat

In an effort to introduce these members of Council, reproduced below are the Biographical and Candidate Statements submitted by the candidates as part of the election process.

Janice L. Currie, Ph.D., C. Psych. Electoral District 5 – GTA East

Biography and Candidate Statement:

I received my psychology training at the University of Toronto and the University of Waterloo. Upon graduation, I held a postdoctoral fellowship for one year within the Neurology Department at the Hospital for Sick Children, working on the Learning Disabilities Research Project. The next year, I joined Psychological Services at the Scarborough Board of Education and worked there first as a Psychologist and later, as Senior Psychologist. In 1996, I became Chief Psychologist with the City of York Board. Currently, I am the Central Co-ordinator of Support Services for the amalgamated Toronto District School Board. In this position, I supervise Psychological, Social Work, Occupational/Physiotherapy and Speech-Language Pathology Services for the Board.

Over the years, I have been a member of APA, CPA and OPA. For 6 years, I served as the Ontario Psychological Association's representative to the Minister's Advisory Council on Special Education (MACSE). As a member of MACSE, I contributed to many Ministry of Education (EDU) initiatives: refining the Categories and Definitions of Exceptionality, revising the Special Education Guide for Educators, developing a replacement for Form 14 for use in school boards, contributing to program standards for MID (Mild Intellectual Disability) students and developing PPM 127, which outlines acceptable accommodations for Special Education students taking the EQAO Grade 10 Literacy Test. In November 2000, I was asked to represent MACSE and OPA on the EDU's ISA Working Group and ISA Eligibility Group. As a part of the Eligibility Group, I contributed extensively to the refinement of the ISA profiles (used to generate Special Education funding for high needs students). In addition to my work on MACSE, I am also chair of the OPA-EDU Liaison Committee and a member of the Association of Chief Psychologists with Ontario School Boards.

In standing for election, I am hoping to bring my knowledge, experience and perspective from the field of school psychology to Council. For example, school boards tend to employ both Psychological Associates and Psychologists. I have great respect for my Psychological Associate colleagues and over the years, I have seen first-hand the negative impact of some of the College's decisions. I believe I understand the issues facing PA's and feel that I could bring fair representation of both titles to the Council table.

As well, there are issues related to the delivery of service in a school board that are not always appreciated by those outside this area of practice. I am concerned that professional guidelines and standards of practice become more chal-

lenging in the context of delivering psychological services in a school board. Council needs to be aware of these challenges when making decisions and establishing guidelines for our profession.

Finally, I believe there should be more of a connection between our profession and the Ministry of Education. My years on MACSE have made me aware of the importance of liaison with the EDU, in order to ensure representation when decisions are made that affect our profession.

If elected, I hope to establish open and responsive representation on Council. I will make every effort to be accessible to all members in District 5 and will commit to raising their issues of concern at Council. Please contact me if there are issues you would like to discuss. I am available via phone (416-397-3027) or email (janice.currie@tdsb.on.ca).

Dalia Slonim, Psy.D., C.Psych. Electoral District: No. 6 (GTA West)

Biography

After seven years of employment as a Master degreed vocational Rehabilitation counselor working primarily with people who suffered from neurological deficits from variety of etiologies Dalia Slonim found herself in need of more education, To that end she earned her doctorate from The Chicago School of Professional Psychology in 1988, and trained as a Developmental Neuropsychologist at the University of Chicago hospital, Billings Memorial. Becoming II registered Psychologist in the Province of Ontario in 1989, and a licensed Clinical Psychologist in the states of Illinois and New York in 1996 and 1999 respectively. Dalia Slonim has worked as a Psychologist practicing Clinical Neuropsychology at the Wellesley Hospital and St. Michael's Hospital (1988-2002) and as a consultant to Surrey Place Centre (1998-present) and Street Outreach Services (1996-2000). She is at present a faculty member at the Adult Education and Counsell1ng Psychology department at OISEIUT.

Dalia's areas of specially and research are Neuropsychological deficits in systemic illness (e.g. Lupus, HIV& AIDS), functioning levels, both cognitive and emotional, of children and adults with special needs and the treatment of the medically ill patient throughout the life span.

Though a clinician first and foremost, Dalia, a long time clinical Psychologist in the health care network has not shied away from voicing her opinion about some difficult issues facing the profession of Psychology. If elected to Counsel she will no doubt continue to do so.

Candidate Statement

I have been nominated as a candidate for Council in the Electoral District 6- GTA West. Although I am not a highly political individual, my motivation to run for Council is based on my sense of personal responsibility within our profession. Over the last decade both the practice and the demographical face of Psychology and Psychological services have changed significantly. It is therefore important to insure that standards and guidelines reflect the changes and are keeping pace with the changing structure in which Psychology is practiced. Furthermore, it is imperative for us to oversee that the College is fiscally responsible, that cultural sensitivity is maintained, that the highest level of Psychological services are offered and that the public at large continues to have access to these services. These significant changes call for recognition that the roles of Psychological service providers have become more complex and the question of who the client is has to be revisited. Also, the issue of inter-professional relations is an important one to explore, as we need to cultivate better relations with other health service professionals.

Finally, we need to insure that the requirements of the college can be fulfilled by students of the profession as the substantial changes have reduced, and in some areas of practice, eliminated training sites all together. A continued dialogue, a process that has already began, with the educational institutes that offer programs in Psychology, is imperative.

Mary Bradley, M.A. Sc., C.Psych.Assoc. Psychological Associate exofficio

Biography

I have been registered as a psychological associate (P.A.) since December 1995. I have been a member of the Registration Committee since July 2000. In the fall of 2000, I was elected to the second psychological associate ex-officio position, and have participated in Council meetings since that time. I work for the Dufferin Peel Catholic District School Board, practising in the area of Educational Psychology. I obtained a M.A.Sc. in 1970 from the University of Waterloo, in Counselling and Educational Psychology, and a B.A. in Psychology and English from Bishop's University.

Originally from Montreal, I have been in Ontario since coming to Waterloo. I presently live in Oakville with my husband and, on occasion, some of our four adult children. I have always worked in school psychology, taking a number of years off from paid employment when our children were young. I have been on the board of directors of several community organizations, including six years on the Board of the Halton Children's Aid Society. On a personal level, I enjoy reading, music, and participating in a variety of sports.

Candidate Statement

In my time on Council there have been some notable achievements for psychological associates within the College. A permanent voting seat for P.A.s was established, so that we now have a P.A. vote both on Council and on the Executive Committee. In order that there be another P.A. voice at meetings, Council also willingly decided to continue this exofficio position for which I am running. Of great significance is the resolution of the diagnosis issue. The College has recognised that diagnosis is an essential component of autonomous practice. There is no longer a blanket limitation imposed on P.A.s, and all candidates for registration for both titles, are examined on their competence to perform the controlled act of diagnosis. Although this, regrettably, had to occur through legal appeals, I believe a process has now evolved that is both fair to P.A.s, and ensures public protection. This has been a major step forward. However, it will be critical for all P.A.s and our Council members to monitor any proposed changes to College guidelines regarding access to diagnosis, to ensure continued fairness to P.A.s.

A continuing and serious issue for both P.A.s and for the public is the lack of awareness of our title, outside of our profession. The term "psychological associate" is an artificial creation and unless a major effort is made to educate the public as well other RHPA health professionals it will continue to be a little known title. The constant problems that our clients have in making insurance claims are a key indicator of this. This lack of knowledge of our title is more than an annoyance to P.A.s and more than an inconvenience to our clients; it can affect our livelihood and it is a public protection issue. If members of the public do not know the difference between P.A.s and the myriad of 'unregulated practitioners with psychological sounding titles, they do not know whether they are, in fact, accessing service by a regulated health professional. I believe the onus is on the College to undertake a public education campaign, both in the interest of public protection and in fairness to P.A.s.

Since being elected to Council I have made an effort to be accessible and to keep PAs informed. I have appreciated the professionally broadening experience of participating in the work of the College. If elected, I will continue to work to ensure that the viewpoints of P.A.s and their issues are heard on Council, and that the College fulfils its obligation to regulate the profession in such a way that the public is well served.§

Prevention of Sexual Abuse of Clients: Recommended Reading

One of the statutory requirements of the Client Relations Committee of the College is the education of members, Council and the public in the area of the prevention of sexual abuse of clients by regulated health providers. In its continuing efforts to fulfill this obligation, the Client Relations Committee has, over the years, undertaken a

number of activities. This has included presentations at the OPA convention, and the development and distribution of two articles pertaining to this very important topic: *Professional Boundaries in Health-Care Relationships* and *Prevention of Sexual Abuse of Clients and Mandatory Reporting*. These articles were distributed to the full membership through the <u>Bulletin</u> and, as well, are routinely sent to all new candidates for registration and their supervisors. These articles are also posted on the College website to have them available to members of the public.

In continuing to fulfill this very important obligation, Dr. John Hunsley, Chair of the Client Relations Committee has reviewed some of the literature in this area and produced a reading list that could be used for the ongoing education of members. The College Council recommends the following to the membership.

- Disch, E., & Avery, N. (2001). Sex in the Consulting Room, the Examining Room, and the Sacristy: Survivors of Sexual Abuse by Professionals. *American Journal of Orthopsychiatry*, 71(2), 204-217.
- Jackson, H., & Nuttall, R. (2001). A Relationship Between Childhood Sexual Abuse and Professional Sexual Misconduct. *Professional Psychology: Research and Practice*, 32(2), 200-204.
- Pope, K. S. (1990). Therapist-Patient Sex as Sex Abuse: Six Scientific, Professional, and Practical Dilemma in Addressing Victimization and Rehabilitation. *Professional Psychology: Research and Practice*, 21(4), 227-239.
- Schoener, G. R. (1999). Preventive and Remedial Boundaries Training for Helping Professionals and Clergy: Successful Approaches and Useful Tools. *Journal of Sex Education and Therapy*, 24(4), 209-217.
- Schoener, G. R., & Gonsiorek, J. (1988). Assessment and Development of Rehabilitation Plans for Counselors Who Have Sexually Exploited Their Clients. *Journal of Counseling and Development*, 67, 227-232.
- Smith, J. L. (1999). Boundary Violations and Subsequent Treatment. *Journal of Sex Education and Therapy*, 24(4), 262-267.
- Sonne, J. L., & Pope, K. S. (1991). Treating Victims of Therapist-Patient Sexual Involvement. *Psychotherapy*, 28(1), 174-187.
- Wohlberg, J. W. (1999). Treatment Subsequent to Abuse by a Mental Health Professional: The Victim's Perspective of What Works and What Doesn't. *Journal of Sex Education and Therapy*, 24(4), 252-261.

Investigations and Hearings

The Committees involved in Investigations and Hearings reported the following activity between December 1, 2002 and March 1, 2003. (Cumulative statistics for the current fiscal year presented in parentheses)

Number of New Complaints against members:

5

Bias	1	(4)
Conflict of Interest	1	(1)
Failure to Render Appropriate Services	1	(4)
Inadequate Data to Support Conclusions	1	(4)
Inappropriate Advertising and Announcement	1	(1)
Breach of Confidentiality	0	(3)
Conduct Unbecoming a Member	0	(1)
Failure to Respond to Request in a Timely Manner	0	(1)
False or Misleading Statements	0	(1)
Improper Fees and Billing	0	(1)
Improper Supervision	0	(2)
Inaccurate Information	0	(2)
Insensitive Treatment of Clients	0	(2)
Quality of Services	0	(6)
	5	(33)

Complaints Received By Nature of Service

Correctional Assessment	1	(3)
Insurance Assessment	2	(5)
No Service Provided	1	(2)
Psychotherapy/Counselling	1	(5)
Custody & Access/ Child Welfare Assessments	0	(7)
Educational Assessment	0	(2)
Industrial/ Occupational Assessment	0	(2)
Neuropsychological Assessment	0	(1)
Other Assessment	0	(6)
	5	(33)

Decisions Released by the Complaints Committee

By Nature of Disposition	-	
Take No Further Action (Dismiss)	10	(17)
Advice	4	(11)
Written Caution	2	(4)
Caution with Undertakings	5	(5)
Referred to Discipline Committee	3	(6)
Deemed Frivolous and Vexatious	0	(2)
	24	(45)



Undertakings and Agreements:

Recently, the Complaints Committee negotiated resolutions to complaints involving two members, both of whom agreed to the publishing of summaries of these cases, for educational purposes:

Inadequate Custody and Access Assessment

The member was retained to conduct a parenting capacity assessment. The assessment resulted in a recommendation for Crown Wardship and placement of the parents on the provincial Child Abuse Register. The parents alleged that the member obtained insufficient and inadequate data to support his conclusions, and that the assessment was biased.

After considering all of the available evidence, the Committee believed that there was insufficient information to support the member's findings and recommendations and that the nature of the member's interview with a child was developmentally inappropriate. The Committee also had concerns about whether the assessment report was sufficiently understandable and sensitive.

The complaint was resolved by way of agreement. The member received a Caution from the Committee concerning the above issues and undertook the following:

- Not to conduct any further custody and access assessments and child protection assessments under s. 54 of the Child and Family Services Act
- Should he wished to resume providing these services, the member would notify the Registrar and would undertake a
 one year period of supervision, focussing on assessment techniques, report writing and techniques for interviewing
 children

Failure to Provide Reports within a Reasonable Period of Time

The Committee considered two complaints against a member with respect to his failure to provide reports within a reasonable time. In one case, the member was alleged: (1) to have told a child's parents that he "didn't do written assessments"; and, (2) to have failed to provide a report to another health care professional during the child's inpatient admission to hospital, compromising the ability to conduct a proper assessment of the child, at that time. The assessment report was eventually provided after a period of one year.

In the second case, a summary assessment report was provided to the parents, however the school required a full report for educational planning. It was also alleged that the member failed to return numerous telephone messages left by the parents in their efforts to obtain the full report. Approximately six months after the assessment, a handwritten draft report was delivered and a finalized typed report, sometime after that. The assessment concluded that the child had a learning disability, however the lateness of the report resulted in a full academic year delay in the child receiving supportive services.

The member acknowledged the deficiencies in his services and provided some explanation for the difficulties. The member received a Caution from the Committee and undertook to:

- continue to participate in psychotherapy and authorize the therapist to provide progress reports to the Registrar, and
- undergo a six-month period of peer supervision, including a review of all current cases with discussion of how required professional services are being delivered, with provision for the supervisor to make progress reports to the Registrar.

Disciplinary Hearings:

Dr. Antoinetta Mantini-Atkinson

At a hearing of the Discipline Committee on October 31, 2002, Dr. Mantini-Atkinson admitted having committed acts of professional misconduct in relation to the following agreed facts:

- she made misrepresentations about
 - her mandate for an assessment
 - the referral source
 - the concerns of the referral source, in particular, concerning the behaviour of an access parent
- provided an opinion bearing on a parent's access rights without proper mandate, clinical foundation and objectivity, in that she:
 - concluded that a child was experiencing signs of trauma attributable the father's behaviour resulting in cessation of contact and significant disruption in the relationship
 - did not have the mandate to conduct an assessment bearing on access and the father was not even aware of the assessment until after it had been completed
 - failed to gather information from the father
 - failed to observe the father and child interacting
 - failed to obtain any information from any collateral sources
 - uncritically accepted statements by the mother that she ought to have known were unreliable
 - failed to follow appropriate methods for access assessments
 - failed to consider any alternative hypothesis for the child's condition
 - failed to maintain her objectivity and to render services appropriate to the child's needs
 - failed to provide the father with a copy of her report
- Furthermore, Dr. Mantini-Atkinson admitted that she made false and misleading statements in marketing materials, specifically that she:
 - listed eight publications that were never actually published
 - made an inaccurate report concerning the length of her clinical experience
 - made statements about success rates which could not be supported by any available data and had never been subject to peer review

The Discipline Committee accepted the following joint submission on penalty from Dr. Mantini-Atkinson and the College:

- 1) A reprimand for signing a false and misleading report, providing an opinion without a proper mandate, clinical foundation and objectivity and making false and misleading statements in marketing materials.
- 2) Publication in the Bulletin.
- 3) A three month suspension of Dr. Mantini-Atkinson's licence to practice psychology, which shall be suspended for twelve months pending the satisfaction of all of the other conditions of the penalty. If at the conclusion of the twelfth month, Dr. Mantini-Atkinson has complied with all of the conditions of the penalty, the three-month suspension will be waived. If Dr. Mantini-Atkinson fails to abide by any of the other conditions of the penalty, the three-month suspension shall take effect immediately, without prejudice to the College's right to seek other penalties for the breach.
- 4) A limitation will be imposed on Dr. Mantini-Atkinson's certificate of registration prohibiting her from assessing children in respect of custody, access, abuse or neglect. Dr. Mantini-Atkinson may apply to the Registrar to have this limitation lifted.

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 - 5) A twelve month supervisory period, during which a supervisor would oversee Dr. Mantini-Atkinson's practice, by way of meetings (at least two hours every two weeks) and unrestricted access to Dr. Mantini-Atkinson's patient files and other practice records. During this period, Dr. Mantini-Atkinson must abide by the supervisor's directions. The supervisor will produce two reports addressed to the Registrar one after six months, and another after twelve months. These reports will address Dr. Mantini-Atkinson's standard of care and Dr. Mantini-Atkinson's marketing materials. The selection of the Supervisor shall be subject to the approval of the Registrar. The supervisor shall be paid by Dr. Mantini-Atkinson.
 - 6) Removal of any false and misleading information (as identified in these findings or identified by the supervisor) in any materials that Dr. Mantini-Atkinson makes available to the public, including her website, brochure and curriculum vitae.
 - 7) Completion of an evaluated university-level course in ethics, as approved by the supervisor.
 - 8) Limitation on Dr. Mantini-Atkinson's certificate of registration prohibiting her from conducting neuropsychology. Dr. Mantini-Atkinson may apply to the Registrar to have this limitation lifted. §



Call for Participation in Statutory Committees

Under the Regulated Health Professions Act, 1991, the College is required to have seven Statutory Committees: Executive, Registration, Complaints, Discipline, Fitness to Practice, Quality Assurance, and Client Relations. The Executive Committee is elected from the members of the

College Council who in turn appoint the members of the six other Committees. The Committee composition includes both members of the Council, and members of the College who are not members of the Council. Both titles, Psychologist and Psychological Associate, must be represented on every Committee.

Members who are interested in serving on a Committee are asked to provide their name, registration title, preferred Committee (1st and 2nd choice may be given) and a brief statement of background and interest, to the Registrar by Friday, May 23, 2003.

Registration

Meeting an average of one day per month, the Registration Committee reviews applications referred by the Registrar, to determine whether requirements for registration have been met, and to direct the Registrar respecting the issuance of certificates of registration and any terms, conditions or limitations to be imposed. The Committee also reviews and advises on policies and guidelines related to registration. Two members of the College are required.

Complaints

Meeting an average of one to two days per month, the Complaints Committee investigates complaints regarding the conduct or actions of members and renders a written decision within 120 days of receipt of a complaint. The Committee also reviews and advises on policies and guidelines related to investigations and resolutions. At least two positions will be available for members of the College.

Discipline

Meeting as needed, for hearings ranging from one to five days, including resumptions, the Discipline Committee hears allegations of professional misconduct or incompetence against members, referred by the Complaints Committee. At least two members of the College are required.

Fitness to Practice

The Fitness to Practice Committee meets as needed to hear matters relating to fitness to practice referred by the Executive Committee after receiving a report from the Registrar regarding possible incapacity. Two members of the College are required.

Quality Assurance

Meeting three to four times per year the Quality Assurance Committee is responsible for the continued development and implementation of the Quality Assurance Program under the regulation developed by the College for such a program. The Committee administers the Quality Assurance Program including the Peer Assisted Review process and advises on policies and guidelines related to Quality Assurance. Two members of the College are required.

Client Relations

Meeting two to three times per year with development work between meetings, the Committee advises the Council on the College's client relations program that includes measures for preventing or dealing with the sexual abuse of clients by members. The program covers educational requirements for members, guidelines for the conduct of members with their clients, training for College staff and the provision of information to the public. Two member of the College is required. §



Changes to the Register

The College would like to congratulate and welcome the 49 new *Psychologist* members and the 7 new *Psychological Associate* members issued with Certificates Authorizing Autonomous Practice between December 2002 and March 2003. The College also wishes to welcome the new *Psychologist* member issued with a Certificate Authorizing Interim Autonomous Practice.

PSYCHOLOGISTS

Kelly Dorothy Benn Tamara Berman

Lori Jo Bernstein

Sophie Slavinka Beugnot

Marla G. Bigel

Laura Anne Chambers

Janette Marie Collier

Nathan John Cooper

Franca Anna Cortoni

Stephanie Jane Cristina

Lee Welton Croll

Claire Victoria Signy Crooks

Joanne Cummings

Robert Dale Curwin

Judith Rutherford Davidson

Trevor Paul Deck

Lisa Maria Destun

Andrea Louise Shaw Downie

Mira Drugovic

Deborah Anne Duggan

Susan Jane Farrell

Yolanda Maria Fernandez

Kathleen Elizabeth Fitzsimmons

Shari Melissa Geller

Suzanne Michelle Gilpin

Oren Gozlan

Linda Ruth Hall

Owen Scott Helmkay

Rosa Y. Ip

Jerry Jellis

Lada Anastasia Kemenoff

Krista Louise Kiiffner

Julia Judy Kim

Kenneth Mah

Brenda Susan Miles

Jennifer Sarah Mills

Estes Moustacalis

Tina Joanne Oates-Johnson

Mary Perugini

Joanna Pozzulo

Alexandra Rutherford

Jennifer Lesley Saltzman-Benaiah
Rebecca Maiya Brenda Shemain
Ann Elizabeth Sims
Lorne Alan Sugar
Barbara Jeanne Virley
Klaus Rolf Dieter Wiedermann
Shelley Eileen Wilkin Bloch
Michelle Lara Williams

PSYCHOLOGICAL ASSOCIATES

Tamara Helen Austin
Caroline Louise Cayuga
Leah Monique Fraser
Margaret James
Kevin L. Kapler
Karin Christel Mertins
Harnisha Nathoo

INTERIM AUTONOMOUS CERTIFICATES

PSYCHOLOGIST

Jean Addington

The College wishes to thank those members who generously provided their time and expertise to act as primary and alternate supervisors for new members issued Certificates Authorizing Autonomous Practice.

The College would like to congratulate and welcome the 23 new *Psychologist* members and the 5 new *Psychological Associate* members issued with Certificates Authorizing Supervised Practice between December 2002 and March 2003.

PSYCHOLOGISTS

Angela Maree Arnold-Saritepe Karen Baker Nili Rebecca Benazon Angela Marie Carter Roland Donald Chretien Lori Teresa de Laplante Christopher Albert Dywan Peter George McLaren Fraser Heather Ann Getty Joanna Lyn Henderson Alisa Anne Kenny Bridgman Catherine Louise Leblanc B.Duncan McKinlay Michelle Renee Neufeld Vivienne Ann Pasieka **Brian Richards** Caroline Roncadin Farrokh Sedighdeilami Virginia May Simonds Linda Elizabeth Spence Frederick Malcolm Van Fleet Curt West Lynn Margaret Woodford

PSYCHOLOGICAL ASSOCIATES

Annalize Wilhelmina Booy David Francis Guth Janet Louise Henderson Kevin John Korpinen Erin McCormick

Deceased

The College has learned with regret of the deaths of **Dr. Marguerite Kuiack** and **Ms. Carol Rhonda Smith** and extends condolences to their families, friends and professional collegues.

IMPORTANT NOTICE

BARBARA WAND SEMINAR, MAY 9, 2003 LOCATION CHANGE

Due to the current SARS protocols in place at Mount Sinai Hospital, the Barbara Wand Seminar has been relocated. The Seminar will now take place in the Alumni Hall auditorium of University of St. Michael's College. Alumni Hall is conveniently located on St. Joseph's Street, which is off of Queen's Park Crescent just north of Wellesley Street. It is easily accessible by subway or there is parking nearby.

Prior to the Seminar, all registrants will receive a map with exact directions to ensure everyone is able to find the new location.

While registration is filling up quickly, there are still some spaces available. If you are considering attending, please register as soon as possible. A registration form is available on the College website or by contacting the College.

To serve and protect the public interest: by promoting excellence in the profession, by ensuring that psychological services are safe and effective, and by advocating for accessibility to psychological services.

The <u>Bulletin</u> is a publication of the College of Psychologists of Ontario

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