
Meeting of the Transitional Council of the College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario — March 1 and March 2, 2011

March 1:

On March 1 the Council heard presentations about the work and daily practice of several groups and organizations which Council had not previously known much about. I was not present at that meeting and thus cannot give any input as to the quality of the presentations or how they were received. These groups presented by invitation and included:

- Shepell-FGI
- Ontario Multifaith Council
- Ontario Association of Developmental Disorders
- Children's Mental Health Ontario
- Family Services Ontario
- Canadian Counselling and Psychotherapy Association
- Canadian Addiction Counsellors Certification Federation
- Banakonda Kennedy-Kis Bell (Indigenous Practices)

March 2:

On March 2 the Council met for its regular full meeting.

The usual business of a Board meeting (call to order; approval of agenda) was followed by the committee reports and the Registrar's report.

Reports

The President's report was short as the Executive Committee had not met since Jan. 13.

The Professional Practice Committee had met on Feb. 2 and started work on the final piece of regulations needed for proclamation of the College, the Quality Assurance Regulation. They are also finalizing the Code of Ethics and hope to present the final version in the April meeting.

The Registrar reported on a teleconference between staff of the College, members of the Registration Committee, herself and the Ministry of Health. In this meeting the Ministry reiterated their refusal to accept Master's degree requirements. Staff spent a great amount of time to make all statements and requirements communicated by the Ministry as clear as possible.

Staff is also working on other tasks such as:

- Finding a consultant for drafting the Competency Requirements
- Preparing for the development of a prior learning assessment tool
- Preparing for the development of a framework for acknowledging training programs
- Preparing the 2010/2011 budget and required projections

The Registrar mentioned that they will likely have to request further funds for hiring additional staff once the pre-registration phase for the College starts as they are expecting over 1,000 practitioners wanting to register in the College to start with.

The Registrar has had several meetings over the past two months with groups such as the inter-professional collaboration task force, a delegation of the Occupational Therapists's College, etc. She is preparing talks and presentations at meetings of groups such as OISE, CAPE, School Counsellors' Association, etc.

Registration Regulation Draft

After a break the Chair of the Registration Committee presented the latest draft of the Registration Regulation. She prefaced the presentation with a reminder of the Ministry's stance on degree requirements and gave some background information as to the struggle within the Committee to find the proper balance between all the different viewpoints heard around the table, from the Ministry, and from stakeholders. She reiterated the concerns the Committee heard in the last meeting and the attempt of the Committee to head all those concerns while developing a working compromise that assures public safety while also assuring public access to the wide variety of practitioners and styles that the Ontario public is used to.

The Chair also spoke about the advantage of not having specific degree requirements in the Regulation proper as that would allow the College to adjust the standards of required training as it gets to know its members and as the profession grows and adjusts over time. While competency profiles and specific training requirements have not yet been developed due to the immensity of the current task, she reiterated that the training requirements will be based on the development of competency while striking a balance between topics (courses), hours of training, supervision, personal growth components and more.

Presenting the current draft of the Regulation she outlined the following:

The wording for training requirements has been changed to be more general, e.g. "...successfully complete an education and training program acceptable to the Council or a designated body *or* a program deemed substantially equivalent by the Registration Committee."

Schedules A, B, and C that were included in January's draft have been removed. Instead the Entry-to-Practice competency requirements (which are currently only in draft state) will be included.

Registration requirements will be a 'whole package' of supervised practicum or direct client hours; supervision; self-awareness practice; registration examination (when available); jurisprudence and professional practice examination; education and training.

Competency profiles will be developed very soon. Currently the Committee took the competency profile developed by the Coalition of Mental Health Professionals as a placeholder. The Chair made it clear that this is not the final competency profile but merely a starting point on which to build. The final profile will include input from stakeholders, ideas from other Colleges and groups that developed such profiles before and Council input.

After a short mention of a change made to the titles in the Student registration category — students will not be allowed to use the word 'registered' in their title but will be known as *Student Mental Health Therapist* or *Student Psychotherapist* — the Chair went on to explain the grandparenting process as per this draft in more detail.

- Grandparenting will be an alternative route to registration for the established and experienced practitioner *in Ontario*
- These practitioners may not meet all criteria for regular registration

- Current requirement to proof experience and an established practice is 750 hours of client contact *in Ontario* within the three years prior to application.
- Grandparenting is not for practitioners who are moving into the province at the point of proclamation of the College as it is meant only to assure ongoing provision of services in the province.
- Applicants for grandparenting will have to submit portfolio evidence of
 - Training
 - Clinical experience
 - Supervision
 - Self-awareness training / practice
- These four areas will be weighted as to their importance and a formula will be developed to assure that there is flexibility in registering applicants without jeopardizing the quality of work. It will not be possible to be grandparented if the applicant only reaches minimum requirements in all four categories but an overall minimum of points will have to be reached. Examples given were an applicant with excellent education, high client hours, minimum supervision but no self-awareness training would be asked to make up in the last two categories before being grandparented; an applicant with low education but high hours good supervision, and high self-awareness training may be grandparented right away depending on the weighing of each category. The Chair reiterated again that these are *only examples out of current thinking*
- While the concept of this process is clear neither the weighing nor the formula have been developed yet.
- Make-ups would have to be done in a time-frame given by the Registrar / Registration Committee and may lie outside the grandparenting time-frame

The Chair then went on to explain the pre-registration process as required by the Ministry. All practitioners who want to continue working on the day of proclamation of the College will have to be registered with the College, incl. those who apply for grandparenting. This means that the College will have to start pre-registration well in advance of the expected proclamation date. The Chair said that it was important to get word out about this as soon as the process was clear and set up. The two-year grandparenting period was only for those practitioners who are not working in Ontario at the time of proclamation but have an ongoing practice in the province (e.g. practitioners who are out of province for teaching purposes; those who have taken personal time off, etc.).

All registrants will have to proof personal awareness practices which could include special classes or supervision practice; indigenous practices; personal and group therapy and more.

There will be a requirement of hours of supervision and supervised practice. These hours are currently set to 150 hours of supervision and 450 hours of supervised practice. The Chair explained that setting these hours is a difficult task as the practices differ so widely, depending on location, perspective training, practice, employment and more. The Committee tried to stay broad-minded and is looking for stakeholder input on this question. Although the Committee agrees that high bars mean more excellency in the work, this has to be weighed with the need to not diminish access to “well enough and competent practitioners”. All practitioners will have to abide by the Professional Conduct Regulation and Quality Assurance Regulation — but they have to be registered first; and keeping the bars too high will keep many practitioners out of the College.

At this point the Chair made a personal comment. She stated that in her view the diversity offered in psychotherapy is one of the best things about the profession and she appealed to the Council to not extinguish or exclude diverse practitioners either in the grandparenting process or later on through regular registration. She received clear and ongoing applause from the Council table and the audience for these comments.

The next point discussed was Entry-to-Practice requirements...

... for RPs:

Education / training

“A program of training or education approved by the Council of the College, having as an entrance requirement a pre-requisite undergraduate degree, which develops the following competencies (Appendix A), and includes at least 10 courses (or equivalent hours of study) in subjects central to the practice of psychotherapy (Appendix B).” [Appendices A and B were not given to the audience. Central subjects were named to include Foundational Studies, Therapeutic Process, Professional Practice and Ethics, and Research and Practice]

Supervision

450 supervised hours and 150 supervision hours

Clinical work

1,000 client-hours with appropriate supervision

Self-awareness hours

The Chair again brought attention to the fact that all of these requirements are not yet written in stone and require a lot of verification etc. including the development of competency profiles, frameworks for evaluation, etc.

The Council then took a moment to discuss the question of supervisors: who should be acceptable as a supervisor; should there be a separate category for supervisors with special training requirements; should supervisors, too, be grandparented? Opinions varied from establishing a separate category and training requirements in order to acknowledge supervisors, to ‘experience can make supervisors’, to requests to be inclusive of different methods of supervision, e.g. Elders, give by people outside the College.

At the end of the presentation the Chair asked for approval of this draft to be moved forward as is for presentation at the stakeholder events. The motion was carried unanimously which stood in stark contrast to the reaction to the draft presented in January. Several of the Council members thanked the Chair and the Committee for the excellent work in taking something that seemed controversial and almost impossible to solve and make it into something that is fair, inclusive, and professional. It was also agreed that the draft versions of the Competency Profiles, list of required topics / courses in training etc. would be taken forward to the stakeholder input meetings as are with some minor adjustments to be made. All documents will be posted on the College’s website in advance of the meetings for the public to see and respond to.

Competency Profile Development Process

Next the Council heard a presentation about different approaches to developing competency profiles that have been used by different organizations over time. The Registrar presented two approaches of organizations in the US, a Council member spoke about the process employed by the Coalition of Mental Health Practitioners of which he was a part at the time; and a representative of the College of Nurses spoke about the process employed by that College over the years.

Quality Assurance Regulation — state of affairs

The Chair of the Professional Conduct Committee presented the current state of development of the Quality Assurance Regulation (QA). He stated that this is the smallest of the required regulations but the only one that will have ongoing impact on every member of the College. It is a requirement for proclamation and much of the text of the regulation will be build on the text given by the Ministry. However, the actual work lies in developing the QA-program which is the program that will support members of the College to reach for excellency in their work on an ongoing basis. He stated several times that the QA regulation is meant to support the practitioner, not to punish or scrutinize him / her. The QA program will include continuing education, continuing quality improvement, inter-professional collaboration, adjusting to changes in the practice environment, self / peer / and practice assessment, etc.

It will not be possible to use results from the program against a practitioner as the mandate of the program is support, not punishment. Any information gained in any of the activities of the program will not only be confidential but privileged and not be made available under any circumstances. There are only three exceptions to that rule:

- 1) If a practitioner gives clearly false information with intent
- 2) If a practitioner refuses to participate in the program
- 3) If there are clear signs emerging though participation in the program that the practitioner is incompetent or incapacitated in his / her faculties. In this last case only the concern of incompetency or incapacitation can be voiced, not the evidence gathered in the program).

The QA regulation is meant to support members, especially if they are struggling and using punitive methods would be counter-productive to that idea.

The QA program will be developed in positive language (different from the QA regulation which is written in 'legalese') and will be based at least in part on the QA programs of other Colleges, especially those who already share the Act of Psychotherapy.

Other Business

Process to Address the Question of Specialty Titles

The question was posed how the Council should proceed to address this important question. Suggestions ranged from development of a new joined Committee or task force to handing it fully to the Registration Committee. In the end the consensus seemed to be that this is a question to be considered by the Registration Committee and that that Committee would be free to refer it to the already existing joined Committee or ask for help and support in any other meaningful way. However, it was agreed that this is an important question which should be address if at all possible before the stakeholder meetings.

After the closing comments during which most Council members acknowledged the different energy and tension at this meeting, the meeting was adjourned.

Next meeting date:

Wednesday May 11th, 2011

Disclaimer:

The notes in this document are **not** official minutes. The author does not claim the content to be 100% correct or to express the intent of the discussions perfectly. These is purely the notes of the meeting as understood by the author from her position as silent observer.

For official minutes of the meetings, visit the College's website at http://www.cprmhto.on.ca/pages/Home/Council/Council_Minutes