
Meeting of the Transitional Council of the College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario — November 16, 2011

After the usual business of a Board meeting (call to order; approval of agenda) the meeting commenced with the committee reports.

REPORTS

President's Report:

- Regulation progress:
 - 190 submissions to statutory consultations
 - In October and November the committees amended drafts where it seemed appropriate and necessary
 - Today is for review and deliberation
 - The drafts need to be submitted to the Ministry of Health and Long Term Care (MoHLT) by the end of 2011
- Task groups and projects:
 - Competency profiles are being developed
 - Grandparenting and prior learning assessment tools are being developed
 - Process for the acknowledgement of training programs has been started
 - Handbooks and guidelines are being started
 - The development of the jurisprudence exam has started
- Overall process:
 - Registration processes need to be established in practical ways
 - Pre-registration process need to start some time in 2012
 - Making law is a tiring process and can create misunderstanding. Council members need to remember that we are human
 - Compassion is needed:
 - With self
 - With fellow council members
 - With staff
 - With the MoHLTC
 - With stakeholders
 - With the public
 - A “Council of Healers” — choice between compassion and respect vs. ill-will and rancour

Registration Committee Report:

- Progress as stated before, more details later in the meeting

Professional Practice Committee Report:

- Progress as stated before, more details later in the meeting

Report of the Competency Profiles Task Force:

- Worked with the return information received from the informal survey
- 95 of the competencies were seen as important for entry to practice by the majority of respondents
- 595 submissions for the RP profiles were returned, 195 for the RMHT profiles
- Over $\frac{2}{3}$ of those answering indicated a Master's degree or higher level education
- Over 50% of respondents identified themselves as self-employed.
- More input is needed in regards to
 - Youth workers
 - Practitioners in the justice system
 - Aboriginal healers
 - Addiction counselling etc.
- Supervision was discussed in more detail
- The current draft of the Competency Profiles is being recommended for statutory consultations to happen early in 2012

Education Framework Task Group:

- Need to develop a framework for the approval of training institutions and modalities
- Keeping in mind that College is not going to register training institutions or programs, just evaluated, review, and recognize
- Using templates from
 - British organizations
 - Canadian counselling associations
 - American counselling associations
- Just had first meeting and are still figuring out the 'how-to'

Prior Learning Assessment Task Group:

- First meeting on Oct. 27th
- Identified three areas of work:
 - Development of assessment process and criteria for foreign trained applicants
 - Development of assessment process and criteria for grandparenting applicants
 - Decision process of choosing assessors
- Aware of the urgency for the development of assessment process and criteria for grandparenting applicants
- Assessment tools will be developed based on the framework given by the draft regulations so far

Registrar's Report:

- Organizing the statutory consultations for the Competency Profiles as soon as possible after the Dec. 8th meeting
- Had more presentations with different organizations
- Went to a conference of the Canadian Association of Prior Learning Assessment
 - The experience showed clearly what the TC *doesn't* know about this process
 - It's a long process and the TC will likely not be able to develop the full process within the current timelines (takes over a year to develop the full process)

- Focus for now on developing the processes needed for pre-registration and other necessary assessments
- Beginning focus on practical day-to-day business questions in preparation of pre-registration starting in 2012
 - Opening a bank account within the restrictions of governmental regulations
 - Developing a data-base program
 - Co-operating with other TCs on these processes
- Regular meetings with MoHLT staff to support these processes has been very helpful

DRAFT REGULATION REVIEW AND DISCUSSION

Registration Regulation Draft

- It feels like 'approaching the end of an era'
- Acknowledging the members of the committee for their tireless work
 - "I believe we have all moved well beyond advocacy for any one specific tradition...."
 - Competent, ethical and accountable practice at the root of the draft regulation
 - Current draft received unanimous support of the committee

Stakeholder Feedback — the big issues:

1. Suggestion of renaming *Registered Mental Health Therapist to Registered Mental Health Worker*

- Not possible without changing the law — would have to go through Parliament etc. Won't happen before 2013
- Tried to go the 'junior' route in the definition of the titles before but legal council advised that that is not going to be accepted
- 2nd title (RMHT) was added very late in the legislation process likely with the idea that the training would be more or less the same but the practice environment would be different (RP of general practice; RMHT for specialized practice)
- The opening challenge was that RP seemed so much clearer than the new RMHT designation; research showed that working circumstances seemed to be the clearer indicator of differences
- That is / became the basis for the currently stated differences in designation

2. Minimum Master's Degree Credential

- Some associations held the idea that 'competent, professional, and safe' practice is possible only with a minimum Master's Degree requirement
- Other associations applauded the decision for the competency model
- MoHLT is very clear on keeping the focus on competencies and not credentials

3. Currency Requirements (750 hours over 3 years)

- Three areas in which this applies
 - Regular applicants
 - Grandparenting applicants
 - Members (maintaining currency)
- Concerns mentioned included
 - Acknowledgement of parental or sick leaves
 - Practitioners building up or winding down practice
 - Practitioners taking a sabbatical

- Some respondents thought 750 hours were too little to prove currency

4. Grandparenting process

- Currency requirement not being exemptible (see above, point 3)
- The Fairness Commissioner asked the committee to review the requirement for having all the currency hours practiced *in Ontario*
- The question of the portfolio; what is it going to look like?

5. Qualifying member

- The title seemed confusing to many; was changed to mirror those of Temporary Member and Inactive Member
- Expanded definition to add clarity — for those new practitioners whose training alone may not qualify them for full registration; would allow them to practice under supervision while they complete requirements for full registration

Details of changes made:

1. Provision 3(1)7

- A member who isn't up-to-date with his / her currency requirements won't be made inactive by the registrar but will be referred to the Quality Assurance Committee (QAC) instead

2. Exemptible and non-exemptible requirements

- All requirements in the draft regulation are exemptible unless explicitly stated otherwise
- This offers flexibility to the Registration Committee to react to special circumstances when necessary and appropriate
- Wording will be added to create more clarity about this in the draft regulation

3. RMHT - additional requirements

- Non-exemptible hours of training (180) to be clarified as *only training*, not incl. personal work
- Grandparenting option: non-exemptible currency hours *all* in Ontario? Discussion within the committee concluded to keep the requirement but to possibly split it, e.g. 400 *in Ontario* and 750 over all. Sign-off from Fairness Commissioner still needed.

4. RP - additional requirements

- Non-exemptible hours of training (360) to be clarified as *only training*, not incl. personal work
- Wording around 'training in aboriginal healing' to be reviewed; many members of the aboriginal community didn't resonate with the term 'healer' in this context
- Grandparenting option: non-exemptible currency hours *all* in Ontario? Discussion within the committee concluded to keep the requirement but to possibly split it, e.g. 400 *in Ontario* and 750 over all. Sign-off from Fairness Commissioner still needed.

5. Qualifying member - additional requirements

- Wording to be added to clarify that this title is meant mainly for the coming few years while training institutions are coming up to par with the new training requirements
- Will be allowed to practice under supervision only

Discussion:

RMHT / RP

- Should the TC 'fall silent' every time the MoHLTC makes a decision or is it their right and responsibility to answer, push, suggest differently?
- E.g if TC finds RMHW to be the better title, can it suggest so to the MoHLTC?
 - Legal Council (LC): can suggest, but won't be implemented before proclamation even if it goes through. Means amending the law which means readings in parliament etc.
 - LC: legally no special consultation (even within the TC) would be required for the MoHLTC to accept such a suggestion. However, it is highly unlikely that they would hear it if there is any doubt that the TC has discussed this in depth.
- RMHW would create a hierarchy which wasn't the intend of the draft regulation.
 - How can one state a difference without hierarchy? Would be in public interest to state differences as clearly as possible.
- RMHTs practicing independently possible in Draft Registration Regulation; but Competency Profiles say differently. Regulation pieces don't seem in agreement. Wording seems to say "more training required, but not more competency in order to practice autonomously. How will the public know the RMHT who practices autonomously from the one who doesn't?"
 - Competency profiles are for *Entry to Practice* and at that point no RMHT will be allowed to work independently. Independent practice is only possible later, after further training and work experience — and doesn't fall under Entry-to-Practice competencies.
 - Maybe more clarity is needed about this for everyone to understand clearly that there is a difference.
 - Requirements for 1000 hours of practice / 150 hours of supervision implies greater competency
- Future generations will look at the fastest and cheapest way to practice independently. Allowing RMHTs to practice in that way without having to upgrade to RP creates a secondary line of training with resulting less competency.
 - When taken all together, requirements for RMHTs to practice independently are equal to those of RPs. What would be the problem if someone chooses that route?
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- The word Therapist in RMHT highlights that Addiction Counsellors and such like are at times doing work that is indeed part of the Regulated Act and that they will be recognized as such. They will have to do a lot more education if they want to practice independently.
- Does this require more discussion and if yes, in which forum?
 - It has been discussed *before* the legislation, during the process of drafting the regulations, and during and after the consultations. At some point it will have to be accepted as is or the discussion will continue endlessly.
 - Majority would 'tolerate' more discussion on this in the Registration Committee with results to be brought back to the TC meeting on Dec. 8th.

Flexibility in assessments for functionally challenged practitioners

- How much flexibility will there be in testing modalities etc., e.g verbal exams?
 - Already much flexibility build in and continuing to build more
 - LC: the draft regulation so far is very detailed, flexible and inclusive

Training requirements

- How did the Registration Committee arrive at 180 hours of training for RMHTs for independent practice? Seems very low.

- Realistic number within the existing parameters. Some of those coming under this umbrella may not receive any direct psychotherapy training at this point and asking for too much would be excluding too many.
- The 180 hours is *on top of* the training they did receive for their specialization.
- Bar set by the TC will lead training institutions. Are we setting the bar too low?
- Education isn't all. There are enough checks and balances in the draft regulation to ensure safety of the public.

Professional Misconduct Regulation Draft

- 135 submissions for the draft Professional Misconduct Regulation during statutory consultations
- Largest feedback on e-therapy

Stakeholder Feedback — issues and changes made:

1. Prov. 55 — E-therapy

- Asked by many respondents to remove this provision because a) no insurance coverage would be possible and b) more studies would be required to make this a safe modality
- After discussion it was determined that this provision does not cause a barrier but a protection for the public.
- Insurance coverage *is* available within North America, according to brokers specializing in the field of therapy. Riders are available for areas outside North America.

2. Prov. 2 — Abuse of a client

- To explicitly include the mentioning of discrimination

3. Prov. 5 — Information about a client

- An explanation will be added to clarify that this includes supervision situations
- Consent in supervision only necessary in writing if identifying information is given or identity is already clear (e.g. supervisor referred the client)

4. Prov. 6 — Discontinuing services

- Question was “What if the client is a danger to the therapist and his / her staff?”; Answer “Included in giving proper reasons for discontinuation” — no amendment needed

5. Prov. 8a — Failure to seek supervision

- This provision was added. It requires the member to seek supervision when the member “knows or ought to know” that he / she lacks the necessary skills to serve a client without supervision
- ‘Logical’ that if there is a requirement for referring on, there also needs to be a requirement for seeking supervision in times of doubt
- Ignorance is no excuse; a qualified member should know when he / she requires supervision
- The member needs to find a supervisor who actually can help with the problem on hand

6. Prov. 13 — Condoning misrepresentation

- If a volunteer is giving care (supportive care giver) under the supervision of or within the organization of a member, the member is not seen to be condoning misrepresentation of this volunteer unless the volunteer states to clients that he / she is a psychotherapist or will ‘do psychotherapy’ with them.

7. Prov. 33 — Use of specialty titles

- Received great applause for the amendments that were made between spring and the statutory consultation.

- Will be allowed if ...
 - Recognized by a credentialing body
 - It is earned
 - Meets established standards and
 - Prominence is given to member's regulated title
 - Not only specialty title holders to practice that modality; but still need to practice within one's skills
 - Title "Dr." not to be used in relationship to therapy although "PhD" can be used.
 - May be used outside of therapy reference, e.g. Teacher may have two cards: "Name, PhD — Therapist" and "Dr. Name — Teacher"
 - Q: "Social workers allow that, why not we?" A (LC): "This College is under the Regulated Health Act and title Dr. Is strictly regulated."
- 8. Prov. 37 — Failure to report unsafe practice**
- Name of the person reporting will be made known to the one reported at some point if the matter is taken up and investigated.
 - It is professional misconduct for the one being reported to retaliate against the one reporting.
 - Names of those reported will only be made public if guilt has been found.
- 9. Prov. 42 — Practicing while suspended**
- Q: "Is this a loophole for inactive members?"; A: "Not so. Covered in the Registration Regulation."
- 10. Prov. 2.1(xi) — Bartering for services**
- Expanded to imply that there is need to stay aware of dual relationships being formed.
 - Including the need to 'spell out clearly' and agree — written contract would be advisable.
- 11. Prov. 3.1 — Record-Keeping**
- Q: "Progress reports vs. psychotherapy notes."
 - Practitioner can keep separate notes if he / she doesn't make anyone believe that only one set of notes exists; e.g. progress notes for the insurance with more personal psychotherapy notes which aren't shared. Insurance knows that they only receive part of the notes relevant to their process.
 - Subsection (c) changed to read "The record shall include relevant objective *observations*." as *findings* was considered too clinical by many.
 - Subsection (f) changed to read "The record shall include the member's *plan for therapy and goals*." as *treatment plan* was considered too clinical by many.
 - Subsection (n) was amended to include "... unless a member is employed by a health information custodian with a different retention period that is no less than seven years." to allow for flexibility if employers have differing standards.
- 12. Inter-disciplinary sharing**
- Still strongly discussed by some practitioners, yet important to have in the draft regulation
 - LC: "*Unnecessary* information will not have to be shared. Only information that is important for the client's well-being will be required for sharing — if agreed to by the client."
 - Q: "Who decides what is necessary?"; A (LC): "Generally the practitioner but if it ever was questioned, a group of peers."
 - Q: "Used to read 'counter-therapeutic and unnecessary'. Why remove 'counter-therapeutic'"; A (LC): "Making it too restrictive. If linked by *or* rather than *and* it would be fine."

Quality Assurance Regulation Draft

- Question was put if this regulation could be made less generic, more specific to the profession.
- After discussion it was decided to leave it in the current format as that allows for more flexibility and freedom in working with the Quality Assurance program.
- Largest feedback on e-therapy

Stakeholder Feedback — issues and changes made:

1. Prov. 2(1) — QA program shall...

- "... address changes in the practice environment." was added; this includes things like changes in the way people practice (e.g. more private practices in the past, more community clinics now; one-on-one practices in the past, more e-therapy now).

2. Peer and practice assessment

- Selection of assessors will be done with "sensitivity to" therapeutic approaches; only having assessors who practice the same approach would be impractical in more remote communities.
- The how and who of keeping records of the peer reviews is still being discussed. LC: "There will have to be a policy of the College on retention of all reports and records. Privacy is strongly protected in this policy, incl. viewing of reports by other departments or committees etc. The only court allowed to view these records would be a criminal court."
- Explanations were added to clarify the tasks, rights, and responsibilities of the assessors.

OPEN DISCUSSION RE: PROCESS SO FAR AND TIMELINES / DEADLINE PRESSURE

- Ministry seems like "the man behind the mirror". Never seen, suddenly gives input and TC needs to react. Would like more direct interaction, maybe with Ministry members joining the TC in meetings occasionally.
- The deadline of April 1, 2013 makes things more difficult, creates more pressure. But it also provides focus. TC knows things can't be done perfectly, but the minimum work needs to be done, the specs.
- TC decisions will impact the profession for the next 20 years and more. If issues can't be raised because of the deadlines, integrity of TC members is in question.
- Transparency from the Ministry would help. They seem very detached, not always as if they know what they are doing.
- What is there that feels short-changed and not fully resolved at this point?
 - RMHT vs. RMHW question as mentioned before
 - Credentials question: how much *did* TC push back? If there is something TC wants to do with / around that, is it off the table 'because of the Big Bad Ministry'?
- What can TC do to work more effectively with the Ministry?
 - Meetings have been with Chairs of committees so far. The deadline is for the TCs of all new Colleges, not only this College. They are non-negotiable.
 - If TC really wants to it is possible to try for more consultations.
 - Re: credentials — there have been several meetings with the Ministry on that topic and there really has been no sense that the Ministry would budge on that.
 - LC: Deadlines set in stone. Maybe able to stretch / push a bit with one or two more provisions if necessary but not likely that long-term change will be possible.

- Resentment from the Chair of the Registration Committee who felt that it was implied that the draft registration regulation was a result of bowing to Ministry pressure only.
- Why have consultations if new ideas can't be implemented?
 - Titles aren't a new idea, it's law and that is beyond the TC anyways.
 - Nothing new has come up in the consultations in regards to credentials
- The deadlines are a good thing. There is no need to keep discussing. There is always going to be compromise; it's part of the democratic process.
- President of the Board addressed the group: Does the Council understand its mandate? Employed by the Ministry. Ministry has requested; that's their job. Council needs to respond; that its job. More communication with the Ministry is required to fully understand what TC *can* do. Will the Ministry just always do what they want?
- LC: Ministry can't make big changes either if it wants to keep to its own deadlines.
- Quite a few people still misunderstood the draft regulations during consultations. Maybe a Q&A on the website would help people understand better and sooth tempers.
- Some misunderstanding also in the TC. With given constraints, what can be done to get best possible product? TC needs to stand with the product build so far. It isn't the Ministry's product, it's the TC's.
- Tradition has been to refer to committees for discussion and trust their process. TC needs to honour that. Not good that Chair of registration committee feels that their work has been diminished.
- Will there be something (guidelines) to help people prepare for application processes?
 - 'Translation' of the law for easier access is being worked on
 - Guidelines and information to be developed soon
 - Considering development of an e-handbook or such like

CLOSING

The closing comments revealed a variety of reactions to this meeting's process and progress, varying from "tired and emotionally frustrated", "discussion is great but once a decision has been made it's made", "ambivalent", "glad of the discussion. Feel we did best we could", "happy and proud", "no disasters today", "discomfort; feeling work has been undermined", "great discussion in the end; maybe doing that more often", "admire the honesty", "more clarity; *know* the hard work that has been done.

The meeting was adjourned. The next meeting will be held on Thursday, Dec. 8th, 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