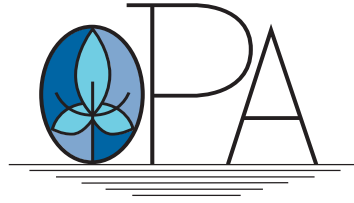


# Ontario Psychological Association



SINCE 1947

March 7, 2011

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Re: Stakeholder Consultation Request 19 January 2011

Registration Regulation: Proposed Amendments  
O Reg 533/98

The Ontario Psychological Association (OPA) is pleased to respond to this consultation request by the College of Psychologists of Ontario (CPO). On January 21 2011 we advised our membership to consider and respond to the stakeholder consultation, as follows:

*If approved, the amendments would result in the following:*

- 1. Maintain the doctoral degree in psychology as the standard for entry to practice as a Psychologist.*
- 2. Implement the mobility requirements of the Regulated Health Professions Act, 1991 (RHPA) (as legislated by the Ontario Government).*
- 3. Close the Psychological Associate registration class.*
- 4. Clarify that the doctoral degree, on which registration as a Psychologist is based, must be a degree from a psychology program.*

*The College (CPO) states that the “This has been the standard for registration as a psychologist since 1960, when psychology became a regulated profession in Ontario.” This is in line with the policy of the OPA. In addition, the OPA clearly supports bullets 3 and 4.*

*The federal, provincial and territorial governments have decided that all professions must change licensing in line with bullet number 2. This flows directly from the Agreement on Internal Trade (1998) and amendments to the AIT Labour Mobility Chapter (7) (2010) [www.ait-aci.ca](http://www.ait-aci.ca). In compliance the College states “ An applicant registered as a psychologist elsewhere in Canada must be registered as a psychologist in Ontario. The mobility provisions require the College to register an*

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*individual already registered with the same title elsewhere in Canada, so long as the scope of practice is the same, regardless of the degree held.” There is no choice.*

The OPA Board also invited member opinions on this matter to assist the Board in formulating a response to the six consultation questions posed by our CPO:

**1) Is the language of the proposed amendments clear?**

Yes, the OPA agrees the language of the amendments is sufficiently clear. However, we are concerned that the language used may be foreign to some readers. For example, clinicians may find this language somewhat obscure and legalistic, and legislators may consider our professional descriptors convoluted. For this reason, appending an interpretive bulletin with sample illustrative cases could be helpful. The OPA would be pleased to assist the College by providing such examples.

**2) Should the College require that the doctoral degrees in psychology be from a program accredited by the Canadian Psychological Association or by the American Psychological Association?**

Yes, the OPA agrees that accreditation from either CPA or APA should be accepted. Please note, the phrasing of this question is ambiguous, as it may be read to imply an “either/or” distinction.

Many Canadians train at APA accredited sites in the United States; some by choice and some because of the paucity of places in Canadian programs. Our standard should be “CPA or APA accredited, or equivalent”. Careful review should identify the specifics of such proposed “equivalency”, and the OPA would be pleased to participate in such discussions, along with our CPA counterparts.

**3) What are the implications of the proposed amendments, if any, for graduate psychology training programs?**

Programs will need to consider review and evolution of existing graduate programs, for example turning MA level programs for clinical training in psychology into Psy. D. programs. Alternate options to be considered may include either terminating MA level programs outright or continuing them with the expectation that these future graduates will be eligible for licensing through the developing College of Psychotherapists and Registered Mental Health Therapists.

Academic training programs will need to carefully consider the impact of the proposed changes on their training paths. This will be an opportunity for careful planning and review of training options, including review of existing PhD. programs and development of innovative Psy.D. programs to meet clinical demand efficiently. It will be imperative for academic and clinical psychologists to work together and to promote cross-ministerial collaboration as well. The OPA would encourage consultation with the CPA on these matters.

**4) What are the implications of the proposed amendments, if any, for psychology internships?**

These pre-doctoral internships require far more than subsistence funding, and careful planning and integration to meet anticipated needs. Almost half of all Ontario doctoral students presently need to leave this province to finish their training, or are graduating from non-accredited programs. We need many more spaces in graduate training programs, and opportunities to combine these with clinical work placements that generate income for the intern while providing clinical skills for the employer. Internships should be fully funded in all such settings.

Information on current clinical demand data and a far-reaching prospective needs analysis are essential for proper planning, and to ensure that our graduates will meet future clinical care needs. The OPA can assist in this process by addressing key issues in advocacy with the relevant Ministries and with CPA and APA.

A coordinated strategy must be developed which will require extensive consultation and collaboration among academic, professional, and clinical psychologists as well as their employers, and should involve direct consultation among all of the involved Ministries (Colleges and Universities, Education, and MOHLTC, as well as others).

**5) What are the implications of the proposed amendments, if any, for access to psychological services?**

Clear communication by the College to the membership, the media, and the public over the years to come will be imperative. Public education is essential to ensure the safety and well-being of the public, particularly when clinical descriptors are changing. It is vital to safeguard and maintain the integrity of the profession and the discipline of psychology.

The CPO should promote public awareness whenever and wherever psychological services are accessed. Consideration should also be given to challenging issues, such as the possible differential impact on salary grids for those working in unionized vs. non-union environments. It may be necessary to review clarity of language for standards of practice related to title and descriptors, e.g. the manner in which psychologists introduce themselves (Ph.D. vs. MA; Dr. Smith vs. Joseph Smith, PhD, C.Psych.). Many of our members raised concern about the use of descriptors that may not accurately reflect their skill set, commenting that “member of the College” should not be considered sufficient to be truly informative for a prospective client.

Careful review of job descriptions and settings will be needed to fully assess the impact of changes proposed. For example, members of the OPA working in school board settings raised particular concerns about the current shortage of school psychologists, with more than 40 vacancies across the province. Families whose main access to psychological services is through the school system must already wait many months for psychological assessment and intervention. Once the window for registration at the master’s level closes, the role of the psychometrist may broaden. It is anticipated that a single psychometrist will be responsible for the provision of a broad range of psychological services to a large group of schools. These services will include prevention, early intervention in the classroom, and individual psychological assessment and intervention. Many of the services will be delivered by psychometrists or psycho-educational consultants. The registered psychologist will have legal and professional responsibility for delivery of all these services.

Several members also noted their concerns regarding decreased access to psychological services across the province, most significantly because public psychology services that were once located in hospitals have been reduced or closed completely. It can be argued that changes that may reduce the number of psychological service providers will probably adversely affect more citizens living in rural/northern locations than southern/urban locations in Ontario.

**6) Do you have any other comments on the substance or the wording of the proposed amendments?**

With regard to the wording:

As our regulatory body, we trust that the CPO will be as clear and concise as possible when preparing the final submission for government review. Discussion on our own professional listserv (OPAMEM) has illustrated clearly that many members were surprised by this consultation, and indeed taken aback by the amendments, which many among us indeed initially incorrectly read as a CPO initiative, rather than a negotiated and concessionary response to Ministerial edict (the imposition of AIT in compliance with Chapter 7). It is reasonable to assume that the understanding of the necessary changes and of the proposed amendments may be equally limited among the lay public. Careful education for all should accompany implantation of these proposed changes.

Discussion on the OPAMEM list serve centered primarily on the grandparenting of masters providers and the requirement to accept masters-level providers from other provinces in compliance with the AIT. Some OPA members sought to identify possible “exceptions” to the AIT that would prevent master-level applicants from being registered as psychologists in Ontario. The College communications will need to be clearer regarding the reasons for the changes and their benefits for the profession.

With regard to the substance:

In the 2010 letter by Dr. Karen Cohen of the Canadian Psychological Association (c.f. [http://www.cpa.ca/cpsite/userfiles/Documents/Practice\\_Page/AIT\\_final.pdf](http://www.cpa.ca/cpsite/userfiles/Documents/Practice_Page/AIT_final.pdf) ) the point is well stated that we, as a profession, still lack a national standard, and therefore, unlike some other professions, the profession has rarely been granted exceptions in other jurisdictions. There appears to be no clear precedent for Ontario. If our licensing body (CPO) wishes to request that the Ontario Government consider an exception, the exception needs to fall within the framework of a national standard for entry into practice in Canada. Otherwise, the exception will in all likelihood fall on deaf ears.

The Association of Canadian Psychology Regulatory Organizations (ACPRO) must play a crucial role in moving toward this goal, across jurisdictions. Once the profession agrees on a national standard, the Ontario government may then decide that our request has merit.

In Ontario, the proposed amendments now clearly state the definition of acceptable training programs in psychology. We are moving from vague descriptive language to a degree in psychology from a program accredited by CPA. This is a clearer definition, and as such a significant improvement. One needs only visit the federal government’s information site to see how disparate and contradictory the descriptions of our occupational group are (c.f. <http://www5.hrsdc.gc.ca/NOC/English/NOC/2006/QuickSearch.aspx?val65=4151> ). It is indeed perplexing and dismaying to read a description on the government website that appears loosely cobbled together:

- *A doctoral degree in psychology is required for the designation “Psychologist” in Ontario, Manitoba and British Columbia.*
- *A master’s degree in psychology is required for the designation “Psychologist” in Newfoundland and Labrador, Nova Scotia, New Brunswick, Quebec, Saskatchewan, Alberta, Nunavut and the Northwest Territories.*
- *A master’s degree in psychology is required for the designation “Psychological Associate” in Ontario and Manitoba.*
- *In Prince Edward Island, a doctoral degree is required to work in private practice, or a master’s degree with practice limited to institutions and agencies.*
- *A period of supervised practical experience is required in most jurisdictions.*

- *Successful completion of the written Examination for Professional Practice in Psychology (EPPP) is required in most provinces.*
- *Oral examinations and board interviews are also required in some provinces.*
- *Registration with a regulatory body is required in all provinces, Nunavut and the Northwest Territories.*
- *Membership in the provincial professional association for psychologists is mandatory in all provinces, Nunavut and the Northwest Territories.*
- *Psychologists become specialized in a particular area through training and experience.*

This descriptive list is indeed confusing and unhelpful, both for the public and for the profession. In addition, it shows the barriers that appear to contravene the spirit of the AIT. It is indeed time for change. As argued by Dr. Pierre Ritchie of the Canadian Register of Health Service Providers in Psychology (c.f. <http://www.crhsp.ca/Docs/mobility.htm> ) our existing models of training and service delivery need to evolve:

*“Why is any of this important to Canadian professional psychology and, more specifically, to health service psychologists? Simply put, it is about our ability to compete successfully in a rapidly changing global economy which will increasingly affect how business gets done, including the business of publicly and privately funded health care. It is also going to have a substantial influence on shaping the rules by which we shall have to abide in marketing and offering our services.”*

While it is unfortunate that our profession has not already taken these necessary steps across the Canadian jurisdictions, it could be fortunate indeed if this challenge and the changes proposed by the College ultimately lead to a standard of practice for doctoral training and registration that will apply across all provinces and territories.

Thank you for requesting our input during this consultation period.

Sincerely,

Dr. Margaret Weiser, C.Psych.  
President  
Ontario Psychological Association