



**Ontario Psychological Association**

**Ontario Psychological  
Association**

Changing the Landscape by 2017



## Table of Contents

Introduction.....	3
1.0 Where Are We Now?.....	3
1.1 The Anchors that Guide the Ontario Psychological Association.....	3
1.2 The Compelling Case for a Focus on Psychology.....	4
1.2.1 External Realities.....	4
1.2.2 Internal Realities.....	5
2.0 Where Do We Want to Be? .....	5
2.1 Our Vision.....	5
2.2 Our Capacity to Change Vision into Reality .....	5
3.0 How Will We Get There?.....	7
3.1 Strategic Directions, Target Accomplishments and Key Activities.....	7
Appendix A – OPA Issue Briefs .....	12

The OPA, the voice of psychology, is respected by the public, government and others as a strong source of guidance and advice resulting in a transformation of the mental health sector.

Psychologists are key members of interprofessional teams and able to demonstrate the value of psychological research, education and quality healthcare.

All Ontarians have timely and equitable access to evidence-based psychological services

The OPA provides valuable resources such as high quality continuing education to prepare and support our members in their important professional, academic and leadership roles.

The OPA is respected for its focus on good governance, ethics and professionalism, its nimbleness and its ability to develop effective partnerships and collaborative relationships.



## Introduction

Strategic planning is an important activity that keeps our Association on the right track. As Yogi Berra once said: *“If you don’t know where you are going, you might not get there.”* This document is divided into three sections: Where are we now? Where we want to be? How are we going to get there?

### 1.0 Where Are We Now?

#### 1.1 The Anchors that Guide the Ontario Psychological Association

Our Articles of Incorporation, Mission, Values and Vision direct everything that we do as an Association. They centre us, they focus us, and they give us direction. They are our anchors in a changing healthcare arena.

#### Vision

The vision of the Ontario Psychological Association (OPA), the home of psychology in Ontario, is that every Ontarian has timely and equitable access to the health services they need to maintain their psychological health and wellbeing.

#### Article of Incorporation

1. To enhance the psychological health of Ontarians through the advancement of psychology as profession;
2. To promote psychological research, its practical application, and its impact on quality services;
3. To support the maintenance of high standards of training and coordinate continuing education to prepare and support members in the delivery of evidence-based psychological services; and,
4. To establish collaborative relationships between the psychological profession, other healthcare providers and organizations, and the government.

#### Mission Statement

To improve the health and wellbeing of Ontarians by advocating for timely and equitable access to excellent psychological services, informed by research, education, and collaboration.

#### Values

The OPA values:

1. Timely and equitable access to psychological services for all Ontarians;
2. The application of research to promote best psychological practices;
3. The life-long learning needs of our members to access excellence in training and continuing education;
4. Ethical behaviours, professionalism, self-regulation, and collaboration;
5. The principles of good governance and effective administration; and,
6. Nimbleness – the ability to understand the world around us and thrive in a transformative system.



## 1.2 The Compelling Case for a focus on Psychology

### 1.2.1 External Realities

Canadians are justifiably proud of their healthcare system and firmly believe that it is the best system in the world. The mental health sector is the exception. Across Canada, mental health services are described as fragmented, underserved, and woefully underfunded. Report after report has called for radical changes in the system; however, to date, the only gain has been a reduction in the negative impact of stigmatization. Ironically, the main impact has been to increase demand on the already overburdened system. The most vulnerable do not have voice and suffer in silence. The report *“From Public Services for Ontarians: A Path to Sustainability and Excellence”*(2012) noted that untreated mental and behavioural health and addictions cost Canada approximately \$39 billion annually. The burden of disease for mental health and addictions is second

The report from the Institute for Clinical Evaluation Sciences and Public Health Ontario, *“From Opening Eyes, Opening Minds: The Ontario Burden of Mental Illnesses and Addictions, 2012”*, notes that the overall cost of mental illnesses and addictions in Ontario is more than 1.5 times that of all cancers and more than seven times that of all infectious diseases.

only to cardiovascular disease. Canada ranked 19 out of 27 developed countries in terms of the breadth of its publically funded services and psychology was identified as an important neglected area.

In Ontario, thanks to all-party consensus, strides are being made to implement the Government of Ontario’s *Mental Health Strategy*. To date the strategy has concentrated on children and youth. While system changes are occurring, on the ground in communities around the province, access to care remains a major problem.

*Imagine a healthcare system in which cancer or cardiac or neurology patients with life threatening disorders are placed on an 18-month waitlist for care. Imagine a healthcare system in which some of these patients have the finances to jump the queue.”.*

*Imagine the faces of parents whose child or teen suffering from a mental illness or addiction as they are told by their family physician that it will take about 14 months to see a community-based paediatrician and then a further 18 months after that visit to see a paediatric psychiatrist.*

Image their faces if that young person committed suicide while on the waiting list to receive the care they needed. Now, imagine the parents’ faces when they learned, after the fact, that psychologists\* in their community were available to see their child/adolescent immediately but a fragmented and poorly resourced mental health system had failed to save their loved one.

A diagnosis of a physical complaint means a referral to care; a diagnosis of a mental illness or addiction means a referral to a waitlist – or worse, a tragic ending.

*Imagine the faces of those that have served you well as members of the armed forces or as first responders. Imagine the untold psychological trauma they have experienced and recognize that it was untold because of stigma amongst the heroes in our society, as well as their lack of access to supportive services.*

*Imagine the faces of lawyers and judges faced with addressing the needs of the mentally ill in the courtroom, of dealing with victims of sexual assault, domestic abuse, child abuse or elderly abuse.*

*Imagine the faces of correctional officers dealing with the mentally ill and addicted in their jails. Imagine the faces of nurses and other staff working on forensic units at the end of a yet another 12-hour shift.*

*Imagine the faces of teachers trying to address the needs of young people with developmental, behavioral, and learning problems or a mental illness or addiction in the classroom.*

\* The term “Psychologist” in this document refers both to doctoral-level Psychologists and masters-level “Psychological



*Imagine the faces of employers trying to differentiate between a performance issue and occupational stress injuries.*

*Imagine the faces of family members trying to live with a person with an acquired brain injury, a severe persistent mental disorder or multiple concurrent disorders including a mental illness or dementia.*

*Imagine the faces of patients and providers that care for them after continued deterioration because stigma and/or a lack of access to care have prevented them from receiving the care they need.*

The faces of Ontarians today compel us to move forward collaboratively with government and our partners to create a stronger, more integrated mental health system that provides timely and equitable access to psychological interventions.

## **1.2.2 Internal Realities**

The morale of our members has been low in recent years. They work in a system in which so many people who are in grave need have little or no access to their services — and they overwhelmingly hold to the misconception that their work is not valued. Our members work in many different settings. In each setting, the roles that psychologists should and could be playing in improving the health of Ontarians may not be well known or consistent. Many government and organizational leaders believe that other mental health providers are able to deliver the same level of care that a psychologist can deliver — but at a lower cost. The replacement of psychologists with other providers has been exacerbated by the new fiscal realities. The value-added knowledge and skills that psychologists bring to the various care settings is virtually unknown and/or under appreciated by the public, other healthcare practitioners, and decision-makers alike. The fragmentation of the healthcare system, and the various funding models that support psychologists in their practices, often results in isolation from the broader healthcare systems in which they practice.

Internal divisions between academic and clinical psychologists — and between doctorate-level psychologists and psychological associates — have weakened the profession, and the OPA, through member resignations. Until recently, the voice of the OPA at Queen’s Park and at leadership tables has been weak. The OPA has undergone a period of downsizing due to reduced membership revenues and loss of grant money. A downward spiral was occurring in which the value of membership was decreasing in direct correlation with the loss of revenues. With new leadership in the last few months, this downward spiral has been slowed. Our goal is to turn these challenges into opportunities.

## **2.0 Where Do We Want to Be?**

### **2.1 Our Vision**

The OPA envisions a world in which every Ontarians’ right to the care they need to be as healthy as possible — in mind and, body, and spirit — is respected. The main aim of the OPA is to work tirelessly to address the human rights of all Ontarians to timely and equitable access to the mental healthcare they need. To achieve this goal the OPA needs to ensure that our members have the supports they need to excel in addressing the needs of Ontarians of all ages. By 2017, we intend to make our vision a reality.

### **2.2 Our Capacity to Change Vision into Reality**

Founded in 1947, the OPA is a voluntary professional organization that represents psychology in Ontario. A small, smart, and energized Board now governs the OPA. New governance and administrative structures are in place. The combination of a strong and engaged Board, effective administration leadership, and dedicated members populating our board committees, has resulted in an association that has already undertaken many of the activities that will result in achieving of our target objectives. There is a determination to speak out about the unmet needs of Ontarians and to ensure that the OPA becomes the home for every psychologist in



the province. Our purpose is to provide the education and supports our members need to excel in their roles as researchers, academics, and clinicians.

While advancing the professionalism of our members is our key strength, our ultimate goal is to support high quality research and teaching activities so that they can provide the highest quality of services possible. Our members work in many different settings and face complex system and funding challenges in all that they do. The OPA is the voice of psychology for all psychologists in the province and strongly advocates on behalf of the people they serve. The most vulnerable amongst us do not have “voice”. The OPA is honoured to speak on behalf of the people our members serve so well – and especially on behalf of those facing the greatest barriers to care.

The OPA’s greatest strength is our members. They are clinicians, academics, students, and researchers. Our members add value throughout the province through their research, educational activities and clinical service provision in multiple settings throughout the province (e.g., schools, primary care settings, hospitals, private practices, etc.).

Psychologists’ greatest contribution to care is their ability to undertake a comprehensive assessment leading to an accurate diagnosis, and the development of a treatment plan including the identification and mentoring of the right healthcare provider or team of providers.

Psychologists are:

- Scientists and leaders in brain research;
- Leaders in developing, evaluating, and providing effective assessments, accurate diagnoses, and evidenced-based treatment regimes;
- Experts in reviewing, evaluating, and fostering the implementation of system changes in schools, the workplace, and the broader public arena;
- Teachers, supervisors, and mentors for healthcare professionals from all disciplines; and,
- Leaders in working collaboratively with other professionals in various settings across the province to meet the needs of Ontarians, and to create a sustainable and integrated healthcare system.

Several reports and evidence from other jurisdictions demonstrate that better use of psychologists in the provision of mental healthcare in the community and in primary care leads to better health outcomes and reduced costs. In an environment of fiscal restraints and ever-increasing demand, the time is right for psychologists to better use their skills and expertise to help provide more services at a lower cost. Now is the time to recognize the added value of psychological services, and address the unmet needs of Ontarians and the historical gap in mental health funding. It simply makes good economic sense to address the human rights of our citizens to timely and equitable access to high quality psychological services.

The landmark study from the United Kingdom, entitled “*The Depression Report: A New Deal for Depression and Anxiety Disorders (2006)*” resulted in the National Health Program providing up to 12 psychological sessions for every citizen. With billions in cost savings realized within the first two years, the same program, offered by the Australian government, had similar results.

Psychology makes economic sense:

- Psychological interventions have been proven to reduce pressure on inpatient, emergency room, and primary care services by providing services to at-risk patients in a timely manner;
- Psychotherapy in the hands of experts is cost-effective in reducing medication and service costs over time;
- Neuropsychological assessments are more efficient than expensive MRIs for tracking disease progression; and,



Improved access to psychologists is the answer that government has been seeking in its struggle to meet the mental health needs of Ontarians (see Appendix A – “OPA’s Briefing Notes”).

## 3.0 How Will We Get There?

### 3.1 Strategic Directions, Target Accomplishments and Key Activities

By 2017, we intend to make our vision a reality. Merely envisioning a positive new future and identifying the *strategic goals* that will point us in the right direction will not help us to realize our vision. The OPA has identified a number of items that we wish to have in place by 2017 (our *target accomplishments*) and the *actions* that are needed to ensure that we accomplish what we set out to do.

#### Target Accomplishments and Key Actions

##### Strategic Direction #1

The OPA will collaborate with government and others to meet the health and wellness needs of Ontarians through timely and equitable access to psychological services and the more appropriate use of psychologists and psychological associates.

#### 1. The OPA is assisting the public to advocate for better access to psychological services.

- a. The OPA will develop a public/media awareness campaign. The campaign will ensure that every Ontarian understands the breadth and depth of the services provided by the various roles that psychologists play (e.g., assessing and addressing mental health problems, promoting mental health, providing psychological services for behavioural, cognitive, developmental and physical problems including complex chronic conditions, etc.). As a result of the campaign, the public will recognize:
  - Their rights and those of their family members to timely access to high quality mental healthcare.
  - That access to psychotropic drugs is not the same as access to mental healthcare.
  - That increased access to care includes support for the appropriate use of psychologists in various settings.
  - The abilities of psychologists to undertake a comprehensive assessment leading to an accurate diagnosis, and a care plan that identifies the most appropriate care provider in the right funding model.
- b. The development of our “brown bag” workplace mental health series for employers and their employees (face-to-face and webinar) will be used to further support public awareness of mental health issues.
  - a. The OPA will establish mutually respectful relations with government and organizational leaders to ensure that the voice of the public is heard.

#### 2. The OPA’s government relations campaign is resulting in health system transformation.

- a. The OPA will engage with government, the Local Health Integration Networks (LHINs) and the Health Links to support the rollout of the Mental Health Strategy to ensure timely and equitable access to psychological services for all Ontarians. Key stakeholders such as government officials, insurance companies, and the Workplace Safety and Insurance Board (WSIB), etc. recognize that the clinical roles of psychologists results in a system that makes the best use of private and public funding with reduced overall costs for government, taxpayers, insurers, and employers.
- b. The OPA will ensure that government and organizational leaders recognize the skills of



**3. The OPA has is ensuring that the government of Ontario understands the breadth of knowledge, and skills, and the quality of care that psychologists and psychological associates deliver; and has is ensuring that the Mental Health Strategy focuses on access to psychological services.**

- a. The OPA will work with Health Quality Ontario and the College of Psychologists of Ontario to develop and disseminate guidelines anchored in the practical application of research to support best practices in psychological services.
- b. The OPA will advocate for the following:
  - The provincial government to follow in the footsteps of other countries and provide every citizen, regardless of age, with up to 12 sessions with a psychologist annually;
  - Expansion of coverage for psychologists through auto and health benefits insurance plans, Employee Assistance Programs (EAPs), and WSIB;
  - Psychologists to be embedded in all relevant settings. Every hospital, school, Family Health Team (FHT), Community Health Centre (CHC) and Nurse-led Clinic will have a psychologist(s) or psychological associate(s) on staff;
  - Prescription privileges for doctoral-level psychologists;
  - Psychologists' ability to issue Mental Health Forms;
  - Psychologists' rights to have admitting and discharge privileges;
  - Pre-kindergarten health reviews to include behavioural screening;
  - Availability of psychologists to provide screening and triaging prior to psychoeducational assessments;
  - Neuropsychological assessments for every 70 year-old; and,
  - Funding for demonstration projects to highlight the value of psychologists in the provision of care for first responders, in child-adolescent system integration, and in Health Links/Primary Care high resource populations.

**4. The OPA's strength is anchored in enhancing inter-professional team function and in creating meaningful partnerships and collaborative relationships to enhance mental health services to Ontarians.**

- a. The OPA will work with leadership of LHINs, Health Links, FHTs, CHCs, and Nurse-led clinics to ensure that every inter-professional team includes a psychologist(s).
- b. All psychologists will identify the OPA as their professional home.
- c. The OPA will foster relationships with key mental health patient groups, first responders, and the military.
- d. The OPA will develop strong support relationships with government officials at all levels (municipal, provincial, and federal), and with relevant government agencies.
- e. The OPA will foster relationships with organizational leaders in the educational, health, and justice systems.
- f. The OPA will develop relationships with employer representatives, such as Boards of Trade, WSIB, and, Financial Services Commission of Ontario (FSCO).

**5. Specially trained psychologists are easy to find.**

- a. The OPA will develop an interactive web-based member directory that lists every member in the province with a level of detail that provides concrete information about their ability to deliver high levels of care for patients with specific requirements.
- b. The OPA will assist psychologists to develop group practices and practice networks with a lead psychologist as the contact person and entry point for the group.



- c. Leadership skills will be offered to psychologists who are available to participate in relevant local, regional and provincial planning tables.

## **Strategic Direction #2**

The OPA will increase its profile and reputation as a source of reliable information, guidance, and support with the media, the public and our members.

## **Target Accomplishments and Key Activities**

### **1. The OPA is seen as the “go-to” organization for psychology.**

The OPA will:

- a. Provide member benefits that attract and retain members so that OPA is representing the majority of psychologists in Ontario;
- b. Address the divisions between academic, clinical psychologists psychological associates and ensure that the Association is the home of all of psychology;
- c. Raise its profile so that all public and private funders seek our input on financial matters;
- d. Provide members with accurate and timely guidance and advice regarding ethical and funding problems they face in their practices.
- e. Identify media spokespersons and provide appropriate training and resources;
- f. Keep an accurate media registry of members who have specific expert knowledge regarding different clinical problems and system issues;
- g. Encourage the media to refer to doctoral-level psychologists as “Doctor”;
- h. Be active in social media and regularly address issues through such vehicles as letters to the editors, NewsBriefs, and policy papers; and,
- i. Develop policies that protect the Board and its members from conveying misinformation or other misuse of social media.

### **2. Our website is informative, attractive, and easy to navigate.**

- a. The OPA will build the website so that our members’ needs are met. The website will house a full complement of research papers, practice tools, and supports for educators and clinicians and other high quality resources so that membership becomes a necessity for all psychologists in the province;
- b. The member registration and renewal process is simple to use and efficient;
- c. The website will be user-friendly to provide education and resources for the media and the public;
- d. The website will be designed so that is visually attractive and reflects well on the OPA’s professionalism and competencies; and,
- e. The website will accommodate pages specific to the Board and its committees, as well as the OPA’s Sections and Special Interest Groups.

### **3. The Listserv meets our members needs.**

- a. The listserv will ensure that our members have the opportunity to join “Communities of Practice” so that members can choose the information, blogs, and discussions that are of most interest to them; and,
- b. The listserv will allow for two-way communication amongst our Board, Committees, Sections and Special Interest Groups.



### **Strategic Direction #3**

The OPA will meet the life-long learning needs of psychologists by developing, providing, and certifying high quality education programs anchored in research-informed best practices.

## **Target Accomplishments and Key Activities**

- 1. All psychologists are engaged in life-long learning, and the OPA is recognized as the prime source of continuing education (CE) as a result of the quality and reach of its continuing education programs.**
  - a. The OPA will foster the development of a “Research to Practice” model to inform and foster best practices as well as to direct research with practical applications.
  - b. The OPA will develop and/or disseminate evidence-based, research- and practice-informed and patient-centred guidelines — and embed them into our CE programs.
  - c. The OPA’s quality workshops, web-based learning, CE resources, etc., will be readily available across the province to meet the needs of psychologists, other mental health providers, and other professionals that interact with patients with developmental, behavioural, and learning problems and/or mental illnesses and addictions.
  - d. The OPA will develop and provide mentoring programs, workshops, and other resources that prepare psychologists to work with special populations that are hard to serve or require specific areas of expertise.
  - e. The OPA will develop educational programs for non-healthcare professionals who interact with clients who have mental health problems.
  - f. The OPA will foster superior graduate student and supervisory placements, as well as mentoring programs for Early Career Psychologists (ECPs).
  - g. The OPA will provide a CE accreditation program for CE providers to reassure members of the quality of the programs available to them.
  - h. The OPA will invest in technology-driven CE programs to expand the reach of our educational supports.
- 2. The OPA’s Annual Conference is a “must attend” for every psychologist in the province.**
  - a. The OPA will ensure that the content of the Conference is anchored in best practices and innovations in clinical practice.
  - b. The Conference will be expanded to include both a research and a teaching stream to better serve and integrate academic and practicing clinical psychologists.
  - c. Researchers and their students will be encouraged to develop a research stream to present their findings.



## **Strategic Direction #4**

The OPA will endeavor to be a highly regarded organization that is competent, nimble, and ethically and fiscally responsible.

### **Target Accomplishments and Key Activities**

#### **1. The Board operates according to the principles of good governance.**

- a. The Board will operate with total transparency so that all decisions are made with the input of the Board members as a whole. The Executive Committee will meet on an urgent basis only.
- b. The Board will delegate responsibilities to its standing committees and will focus on items of a strategic nature.
- c. The Governance Committee will evaluate the roles assigned to each Board member to ensure the right complement of knowledge and skills to lead the OPA forward.
- d. A Board orientation, education, and evaluation program will be developed and implemented to support each Board member in their role(s).
- e. Formal reviews of our finances, committee activities, and programs will be provided at every scheduled board meeting to celebrate successes and make adjustments to any strategic activity that is not on track.

#### **2. The OPA is operationally and fiscally sound.**

- a. The OPA will find other sources of funding to augment membership fees to ensure financial stability.
- b. The management team will work with the members of the Board, the Audit and Finance Committee, and the auditors to ensure that our accounting policies, procedures, and processes are sound.
- c. Highly experienced staff members will be recruited and retained. Staff will be provided with a positive work environment, opportunities to develop professionally, and with interesting and challenging work.

#### **3. The OPA has effective two-way communication systems in place ensuring that we are “in the know” and capable of anticipating and responding to legislative changes, various challenges, and to opportunities.**

- a. Our members will communicate any issues, concerns, and changes in their local communities.
- b. The OPA will maintain excellent media and government contacts so that we can anticipate and respond to changes in the system.
- c. The OPA will encourage the public to alert our members to their concerns and the OPA will be the connector to government and other organizations.

#### **4. The OPA will have raised the morale of our members by having tabulated our past successes and especially our accomplishments between 2014 and 2017 so that we are well prepared to celebrated our 70th Anniversary in 2017.**



## **Appendix A – OPA Issue Briefs**