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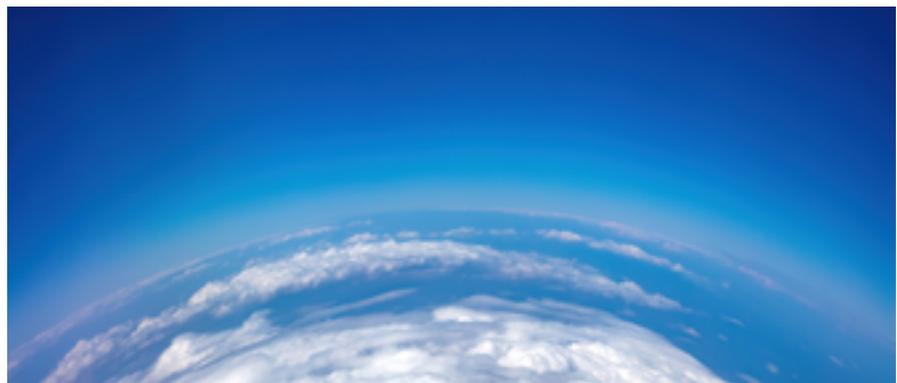
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## PRESIDENT'S MESSAGE

On October 14, 2012, as millions collectively held their breath, Felix Baumgartner set a world record for stepping out of an ascent capsule over 39,000 meters above the earth and skydiving downward at speeds at times faster than that of sound. He was estimated to have reached a top speed of Mach 1.25 or 1,357.64 km/h, as the first individual to break the sound barrier without vehicular power. As this month marked the tenth anniversary of Baumgartner's jump, I admit that I recalled the psychologically interesting story behind this achievement more than the jump itself.



The extreme risk taker's development of claustrophobia within the confines of the suit he had to wear to withstand the atmospheric pressures of the jump became the pivotal barrier to his success. So, Baumgartner's story shifted to focus on Dr. Michael Gervais, the Psychologist who worked with him in the days leading up to the jump. When interviewed, Dr. Gervais discussed ways he assisted

Baumgartner in identifying a clear vision, while training him to be specifically aware of his thinking and using effective breathing skills, so that he could be present in the moment. Baumgartner applied what he learned, donned the suit, and met his goal. And, Dr. Gervais's contribution was newsworthy and appreciated.

**“In my role as President of Council, I want to express my appreciation to the members of the College of Psychologists of Ontario and the public who give of their skills and time to fulfill the regulatory work of the College.”**

Psychologists and Psychological Associates don't often receive this level of appreciative feedback for the services they provide to the public. Yet, it is good for our mental health to learn that we are appreciated by others for things we do, or who we are, while we do them.

In my role as President of Council, I want to express my appreciation to the members of the College of Psychologists of Ontario and the public who give of their skills and time to fulfill the regulatory work of the College. I am also requesting broader participation from College members and other stakeholders in the form of consultative feedback at this time. I ask that each of you take time to review the consultation materials you received from the College earlier this month. These documents focus on the College's future regulation of the profession of Applied Behaviour Analysis in Ontario. This is a pivotal moment for the College as we draft our welcome to Behaviour Analysts and transition to become the College of Psychologists and Behaviour Analysts of Ontario. Your participation in this consultative process is appreciated.

As Psychologists and Psychological Associates in Ontario, the helpful work that you do may not always make headlines, yet I hope that you learn it is valued in meaningful ways.

In appreciation,

Wanda Towers, Ph.D., C.Psych.  
President

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## **FIXING LONG-TERM CARE ACT, 2021 REPLACES LONG-TERM CARE HOMES ACT, 2007**

On April 11, 2022, the [Fixing Long-Term Care Act, 2021 \(FLTCA\)](#) was proclaimed into force to regulate Ontario's long-term care home sector. On the same day, the *Long-Term Care Homes Act, 2007 (LTCHA)* was repealed.

**The new legislation does not change the mandatory requirements** applicable to all members. The main changes address requirements related to staffing and care, accountability and transparency, enforcement, and licensing which may be relevant to members who work for or operate Long-Term Care Homes.

Members of the College must have sufficient familiarity with the FLTCA to understand their mandatory reporting

requirements in situations where they have reasonable grounds to suspect that any of the prescribed matters have occurred. The reportable matters, which remain unchanged, can be found in S.28 of the *Fixing Long-Term Care Act, 2021*:

### **Reporting certain matters to Director**

28 (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Director:

1. Improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident.
2. Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident.
3. Unlawful conduct that resulted in harm or a risk of harm to a resident.
4. Misuse or misappropriation of a resident's money.
5. Misuse or misappropriation of funding provided to a licensee under this Act, the *Local Health System Integration Act, 2006* or the *Connecting Care Act, 2019*.

The new Act continues to specify that College members do not require consent to report information that would otherwise be considered confidential:

#### Duty on practitioners and others

*(4) Even if the information on which a report may be based is confidential or privileged, subsection (1) also applies to a person mentioned in paragraph 1 or 2, and no action*

*or other proceeding for making the report shall be commenced against a person who acts in accordance with subsection (1) unless that person acts maliciously or without reasonable grounds for the suspicion:*

1. *A physician or any other person who is a member of a College as defined in subsection 1 (1) of the Regulated Health Professions Act, 1991.*
2. *A member of the Ontario College of Social Workers and Social Service Workers.*

[Ontario Regulation 246/22: GENERAL](#) under the *Fixing Long-Term Care Act, 2021* sets out definitions for abuse and neglect.

Section 28(1) of the *FLTCA* requires that members of the College who have reasonable grounds to suspect concerns, as set out in that section, must report the concern to the Director at the Ministry of Long-Term Care. This can be done directly by calling the toll-free Long-Term Care ACTION Line at 1-866-434-0144 (7 days a week, 8:30 a.m. – 7:00 p.m.).

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## REMINDER: CONSULTATION ON DRAFT REGULATIONS REGARDING THE REGULATION OF BEHAVIOUR ANALYSTS

Consultation Closes on December 2, 2022 – [View Consultation Documents Here](#)

The College of Psychologists of Ontario has been working towards welcoming Behaviour Analysts to what will become the new **College of Psychologists and Behaviour Analysts of Ontario**. To prepare for proclamation of the [Psychology and Applied Behaviour Analysis Act, 2021](#), the College has developed Regulations related to the regulation of Behaviour Analysts.

Regulation development follows a formal process set out in section 95(1) (1.4) of the Health Professions Procedural Code being Schedule 2 of the *Regulated Health Professions Act, 1991*. This section of the Code requires the College to circulate proposed Regulations or Regulation amendments to its members, the public and stakeholders for a minimum of 60 days. At the conclusion of the circulation period, the College Council considers the feedback received, makes any changes deemed appropriate, and approves the final draft Regulations for submission to the government for its review, approval, and ultimate proclamation on a date of its choosing.

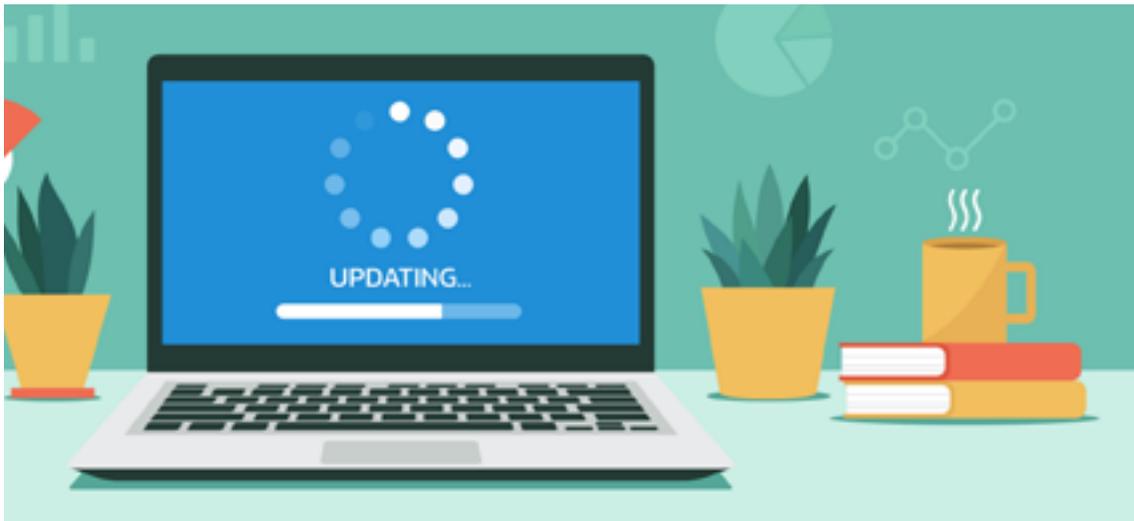
At its meeting of September 23, 2022, the College approved, for circulation, the proposed amendments to the Registration Regulation, General Regulation (Quality Assurance and Advertising), and the Professional Misconduct Regulation.

On October 3, 2022, the College sent emails inviting members and a variety of other stakeholders to comments on the draft Regulations. The College wishes to thank those who have provided feedback on the proposals. If you wish to comment but have not yet done so, we would appreciate hearing from you by **Friday December 2, 2022**, so your comments can be included in the Council discussions at its next meeting.

**To review the consultation documents and to provide your feedback please click [HERE](#).**

If you are aware of anyone who would be interested in this consultation, we encourage you to share this information with them.

# PREPARING FOR APPLIED BEHAVIOUR ANALYSIS (ABA) UPDATE



We are one step closer to welcoming Behaviour Analysts to the College. Proposed Regulation amendments, which will enable the College to regulate the profession of Applied Behaviour Analysis, have been circulated for comment. These include amendments to O. Reg. 74/15 Registration, which sets out registration requirements for applicants entering practice for the first time, as well as time-limited transitional (or grandparenting) provisions, to allow qualified practising Behaviour Analysts to apply for registration. Amendments to O. Reg. 801/93 Professional Misconduct and O. Reg 209/94 General (Quality Assurance and Advertising) are also being circulated.

Your feedback is important! If you have not already done so, please review the [consultation documents](#) and provide your comments to the College using the survey, or e-mail address, posted together with the consultation materials.

The deadline to submit your feedback is **December 2, 2022**. Many thanks to those who have already provided their comments.

The College has now posted a [self-screening tool](#) on its ABA portal, to assist practitioners in the field of behaviour analysis, therapy, or intervention in determining if they will need to apply for registration with the, yet to be proclaimed, College of Psychologists and Behaviour Analysts of Ontario.

[FAQs](#) are also available on the ABA portal, and these are regularly updated to address the many questions the College receives regarding the regulation of Behaviour Analysts.

# SUPERVISION RESOURCE MANUAL FOR REGISTRATION, THIRD EDITION, 2022



The College is very pleased to announce that the [Supervision Resource Manual for Registration, Third Edition, 2022](#) is now available on the College's website in the [Reference Library](#) area.

In September 2020, the College Council approved the formation of a Supervision Resource Manual Working Group. This group was tasked to review the *Supervision Resource Manual (2009)* to ensure it aligns with the *Standards of Professional Conduct, 2017* and best practices in supervision, and to support candidates entering the profession and the supervisors who give of their time and dedication to the growth of their supervisees.

After many months of work the Working Group prepared a draft of the new [Supervision Resource Manual For Registration, 2022](#) to replace the *Supervision Resource Manual* in place since 2009. Changes made reflect the evolution of the Registration Guidelines, standards of the profession, and the academic literature regarding supervision over the past decade. In the course of development, the Working Group consulted with the College's Equity, Diversity, and Inclusion (EDI) Working Group. In the summer 2022, the revised draft *Manual* was circulated to members for feedback. The results of this

consultation were considered when preparing the final version of the *Manual*.

The revised *Manual* supplements and augments the information provided by the College's Registration Guidelines and *Standards of Professional Conduct, 2017* and integrates information from several sources based on best practices in supervision. The *Manual* is meant to provide guidance to members and those seeking registration with the College. It provides practical information to help members of the College who agree to be supervisors for supervised practice members and/or who agree to provide supervision to members seeking to expand their authorized areas of practice. It also provides information for members who wish to supervise individuals from other regulated health professions as well as unregulated providers.

The College wishes to thank Dr. Marjory Philips, Dr. Jane Ledingham, Dr. Paolo Pires, Mr. Barry Gang, and Ms. Lesia Mackanyn, the members of the Supervision Resource Manual Working Group for the time and effort they so generously gave in undertaking this very important and comprehensive work.

# EQUITY, DIVERSITY, AND INCLUSION (EDI) UPDATE



The College remains committed to the principles of Equity, Diversity, and Inclusion (EDI) and to incorporating EDI into all aspects of the College's work and its regulatory processes and encouraging the same within the larger profession. The College has created an [Equity, Diversity, and Inclusion Resource Page](#) on which information and resources are posted and will be continually updated.

The EDI Working Group has continued to direct its efforts to the goals it established and remains focused on implementing diversity practices across the College Committees. This has included meetings with the Committee Chairs to discuss their Committees EDI initiatives and provide support as needed. Recently representatives of the Working Group made a presentation to the Jurisprudence and Ethics Examination Committee (JEEC). This Committee has embarked on a major review of the JEE, and the presentation was undertaken to guide the JEE exam item writing process and assist with incorporating EDI content and principles in the exam.

In April 2022, under the auspices of the Working Group, the College distributed an EDI survey to the membership. The survey was an effort to gather information on the diversity of the College membership. We received 1171 responses, approximately 25% of the membership, and the Working Group wants to thank all of those who took the time to respond. The Group is currently reviewing the information received with the intention of reporting to the membership in the near future. Anyone who has gathered information of this type can appreciate the complexities inherent in analyzing the responses received. We hope to undertake to survey the membership again in the future, incorporating the lessons learned from the initial responses.

The EDI Working Group plans to continue its work in a meeting later next month.

# QUALITY ASSURANCE NEWS

**Working within the statutory requirements established for all Health Regulatory Colleges in Ontario; the College views its Quality Assurance Programs as a means of supporting members in maintaining their knowledge and skills throughout their careers. While adhering to the rigorous legislative requirements, the College's [Quality Assurance Programs](#) have been designed to be supportive rather than investigative. Whenever participation in Quality Assurance leads to the identification of the need for remediation; information about this remains confidential as member-specific information about Quality Assurance involvement is not publicly available.**

## SELF-ASSESSMENTS

The Quality Assurance Committee reviews the fully completed Self-Assessment Guide submitted by members who did not make their Declaration of Completion by the required date. At the beginning of the first quarter (June 1, 2022), there were 11 members required to submit their completed Guides. The reviews have begun and further information about the outcome of these reviews will be provided once they are completed.

## PEER-ASSISTED REVIEWS (PAR)

Members are selected to participate in a Peer Assisted Review via random and stratified random selection. A member is also required to participate in a PAR if they have not submitted their Self-Assessment Guide Declaration of Completion and have also not submitted their fully completed Self-Assessment Guide after it had been requested. Physical distancing measures necessary to decrease the spread of COVID-19 led to the postponement of in-person PARs in March 2020, more than two and a half years ago. The College currently is working through the resulting significant, two-year backlog of Reviews. Unless specifically requested and agreed to by all participants, Reviews are currently being conducted virtually.

At the end of the first quarter (August 31, 2022) there were 61 PARs outstanding. Three were completed virtually during the quarter and in all three cases, the members reviewed appeared to have met the standards of the profession. All remaining outstanding reviews are currently being arranged.

We are currently seeking additional Peer Assisted Review Assessors. Members who have been practicing with a Certificate of Registration for Autonomous Practice for at least five years, and who have an interest in helping fellow members enhance the quality of their services and learning from their peers, are encouraged to contact the College's Quality Assurance Coordinator, David Fierro at [qualityassurance@cpo.on.ca](mailto:qualityassurance@cpo.on.ca). Training and ongoing support for Assessors will be provided by the College and, in addition a per diem and reimbursement for any out of pocket expenses, members may earn CPD credits as Assessors.

## CONTINUING PROFESSIONAL DEVELOPMENT

Members who did not submit their Declaration of Completion of the minimum requirements of the mandatory Continuing Professional Development (CPD) program by the required date are required to submit all CPD documentation for audit by the Quality Assurance Committee. Seven members were required to provide their documentation for this reason. The Committee also conducts audits of members who have been randomly selected. The Committee seeks to conduct a total of 50 audits this year, therefore 43 members were randomly selected for participation.

It was hoped that revisions to the online CPD credit tracking system would be completed before the current CPD cycle for members with even-numbered Certificates of Registration began on July 1, 2022. Due to changes being made to the College's IT systems, the tracking system

unfortunately was not available at the start of the 2022-2024 cycle. A simple tracking sheet for members to use on their own devices until a new online tracking system is operational is available [here](#).

Members with even-numbered Certificates, who have just begun the 2022-2024 cycle, will notice that the credit requirements have been simplified and that some credit categories have been combined, to make for a more equitable and simpler tracking experience. These changes were made following the Committee's review of member responses to the survey of those who completed

the requirements during the 2018-2020 CPD cycle. These survey results, published in two parts in the April 2021 edition of HeadLines are available here: [Part I](#) and [Part II](#).

Members with odd-numbered Certificates of Registration, who are approximately halfway through the 2021-2023 CPD cycle, may satisfy the requirements of the CPD program according to the requirements set out at the beginning of that cycle, or if they prefer to, may adopt the changes early.

## INFORMATION FROM THE PRACTICE ADVICE SERVICE



**The Practice Advice Service provides information to College members and members of the public regarding relevant Legislation, Regulations, the *Standards of Professional Conduct, 2017*, and other Guidelines. Answers are provided in response to specific inquiries and may not be applicable or may not generalize to all circumstances. Information is provided to support College members in exercising their professional judgement and is not an appropriate substitute for advice from a qualified legal professional.**

### QUERIES

During the first quarter of this year (June 1, 2022 - August 31, 2022), the College's Practice Advice Service addressed 394 queries. The five most common topics queried during this period, in descending order, were:

1. Mobility and Practice in Other Jurisdictions; mostly relating to member practice outside of Ontario
2. Supervision, primarily concerning the supervision of non-members
3. Release of and Access to Information, mostly relating to the client's right of access and substitute decision-making, particularly with respect to children's records
4. Records, mainly related to retention and destruction of records, file contents, Health Information Custodians and electronic record keeping
5. Fees and Billing, the most common queries related to the setting of fees

It is interesting to note that the list of most common topics queried has remained the same as those addressed in the previous year.

Answers to many of these queries can be found on the [Professional Practice FAQ](#) page of the College website which includes the following recent additions.

### **Feedback and Timing of Assessment Feedback to Clients and Other Parties**

**Q: Must members debrief with the individual who is the subject of an assessment, even if they are not the “customer” or person paying for the assessment and, if a client has provided consent for the disclosure of assessment results to another party prior to the availability of the results. Can this be considered fully informed consent?**

A: This is a situation that requires some definitional framing, before looking at the issue of feedback.

The *Standards of Professional Conduct, 2017* define a “client” as:

*an entity receiving psychological services, regardless of who has arranged or paid for those services. A client can be a person, couple, family or other group of individuals with respect to whom the services are provided. A person who is a “client” is synonymous with a “patient” with respect to the administration of the [Regulated Health Professions Act \(1991\)](#).*

This means that the person who has been assessed is, from the perspective of the College, the client. Members are expected to be proactive in ensuring that clients are aware of their rights, including the right to access information about themselves, in accordance with the following *Standard*:

*3.2 Clarification of Confidentiality and Professional Responsibility to Individual Clients and to Organizations*

*In situations in which more than one party has an interest in the psychological services rendered to a client or clients, members must, to the extent*

*possible, clarify to all parties, prior to rendering the services, the dimensions of confidentiality and professional responsibility that must pertain in the rendering of services. The provision of psychological services on behalf of an organizational client does not diminish the obligations and professional responsibilities to individual clients.*

*Practical Application: The need for clarification may arise, for example, in the provision of an assessment of a claimant in an insurance matter, where the insurer has retained the assessor. Regardless of the wishes of the insurer, members are under all of the obligations that pertain to a client within these Standards and the relevant privacy legislation. This includes providing access to the individual or their authorized representative to their personal information and any reports or records which members have in their possession unless prohibited by law or they are otherwise permitted to refuse access.*

The requirement to provide feedback, upon request by the client, is addressed in Ontario Regulation 801/93 Professional Misconduct:

*The following are acts of Professional Misconduct:*

...

*13. Failing to provide a truthful, understandable and appropriate explanation of the nature of an assessment, intervention, or other service following a client’s request for an explanation.*

...

*21. Failing, without reasonable cause, to provide a report or certificate relating to a service performed by the member, within a reasonable time, to the client or his or her authorized representative after a client or his or her authorized representative has requested such a report or certificate.*

Similarly, members are required to make information, including assessment results, available to all clients and authorized representatives, under the following *Standard*:

## 8.2 Access by Client or Client's Authorized Representative

*Members are responsible for ensuring that access to an individual's personal or personal health information is provided to the individual and/or their authorized representative unless prohibited by law or the member is otherwise permitted to refuse access.*

While it may at first seem possible to find a technical "out" to providing feedback to someone who has not actually requested it, the [Personal Health Information Protection Act, 2004 \(PHIPA\)](#) specifies that consent to disclose information must be obtained from the person who has been assessed (or an authorized Substitute Decision Maker), and only if they have knowledge of the purposes of the disclosure. The consent must also be related to the information to be disclosed. In other words, there is a positive responsibility on the part of the Health Information Custodian to ensure that the client has been provided with an opportunity to make a free and informed decision about the disclosure of the information that would be disclosed.

### Authorized Area of Practice

**Q: I am an autonomous practitioner with declared competence in clinical psychology working with children, adolescents, and adults. May I provide parenting consultation services, where the parents, but not the child, are my clients?**

A: The College has not identified "parents" as a specific population to whom one needs particular authorization to consult to or otherwise work. The answer to your question then is: *It depends upon the specific focus of the consultation.*

If the parenting work involves psychoeducation, that is, providing parents with information about child development and advice about how they can address childhood difficulties, then it would make sense that a practitioner has been deemed to have the requisite knowledge, training, and experience required to understand the developmental factors at play with children/adolescents being 'parented'. In this situation,

authorization to work with children and adolescents would be expected.

If the focus of the work is to help parents improve their relationship with their child, then specialized knowledge, skill, and experience in the area of family dynamics is important. For this reason, authorization to work with families would be necessary.

Similarly, if the focus of the work is helping the parents work together as a couple, then authorization to work with couples, would be appropriate. Likewise, if the work involves assisting an individual parent who for personal reasons experiences challenges in interacting with a child and this requires them to receive individual therapy to address their own difficulties, authorization to work with individuals within that parent's own age group would be required. Since you are authorized to work with adults, assuming that the parents are adults, then this would not be problematic.

Basically, one size can't fit all, and the system of authorized populations allows for flexibility because of all of the possibilities with this kind of work.

### Child Abuse Reporting – Other Jurisdictions

**Q: I have been notified by a client who resides in Ontario, that during a visit to see their family in the United States they observed an incident that led to a suspicion that a child was in need of protection. Is there a statutory duty to report this to child protection authorities and if so, in which jurisdiction should the authorities be alerted?**

A: Section 125 of the [Child, Youth and Family Services Act, 2017 \(CYFSA\)](#) sets out the duty to report a child in need of protection. It states:

*125 (1) Despite the provisions of any other Act, if a person, including a person who performs professional or official duties with respect to children, has reasonable grounds to suspect one of the following, the person shall immediately report the suspicion and the information on which it is based to a society. Society is defined in the*

legislation as an agency designated as a children's aid society under subsection 34 (1);

In considering this section of the legislation, there are two components to contemplate. First, there is nothing in the legislation which suggests that the suspected abuse or neglect must have occurred in Ontario to be reportable. Therefore, one is obligated to make a report regardless of where the suspected concerning behaviour occurred.

Second, the duty to report is to a "society" which the Act states is an agency designated by the Minister of Children and Youth Services as a children's aid society. Since the Minister only has the authority to designate an agency as a "society" within Ontario, the obligation to report "to a society" must be to an appropriate agency within Ontario.

This analysis suggests that if a member has an obligation to report a suspicion of abuse or neglect which occurred outside of Ontario, they would have a duty to report to an Ontario CAS. It would then be up that agency to determine the best course of action to take but the member would have fulfilled their legislative obligation.

Section 125 also sets out the nature of emotional harm that a child must be experiencing, or which it is reasonably expected would experience, to necessitate a report, if the harm results from, or would be expected to result from the actions, failure to act or pattern of neglect on the part of the child's parent or the person having charge of the child.

### Photocopying Fees

**Q: It's my understanding that I may charge reasonable costs associated with the provision of copies of my records to clients who request them. Does this include compensation at my usual hourly rate for the time I spend reviewing the records to determine whether they are suitable for release?**

A: The Information and Privacy Commissioner of Ontario (IPC) recently addressed this issue in [PHIPA DECISION 133](#), October 2020.

The Decision sets out the statutory limits to what one may charge, as follows:

*[12] Under PHIPA, custodians have the discretion to charge a fee for providing an individual with access to their own personal health information. [Sections 54 \(10\) and \(11\)](#) state:*

#### *Fee for access*

*54 (10) A health information custodian that makes a record of personal health information or a part of it available to an individual under this Part or provides a copy of it to an individual under clause (1) (a) may charge the individual a fee for that purpose if the custodian first gives the individual an estimate of the fee.*

#### *Amount of fee*

*(11) The amount of the fee shall not exceed the prescribed amount or the amount of reasonable cost recovery, if no amount is prescribed.*

*The legislation does not prescribe an amount for "reasonable cost recovery". In providing Reasons in Decision 33, the Adjudicator for the IPC states, previous IPC orders and PHIPA Decision 17 conclude that the 2006 fee scheme set out in the proposed regulation to PHIPA provides the best framework for determining the amount of "reasonable cost recovery" under section 54(11) of PHIPA.*

### 2006 Fee Scheme

Flat rate including: - 15 minutes of review - 20 pages of photocopies - packing and mailing records - administrative tasks	\$30.00
Photocopies or computer printouts after the first 20 pages	\$0.25 per page

Review of the records after the first 15 minutes	\$45 for every 15 minutes of review by a health information custodian after the first 15 minutes.
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The Decision provides a detailed analysis of the particular case and anyone facing this sort of issue is advised to read the entire Decision. For ease of reference, here is an excerpt from the Reasons that the Adjudicator gave for a finding that the health professional's charges were excessive:

*[44] In PHIPA Decision 111, I determined that not every type of record containing personal health information subject to PHIPA requires the same amount of time for review. ... records with standard, predictable content require only a straightforward review with minimal time needed to determine whether they contain information to which access may be refused. For these types of records, I determined a review time of five seconds per page was appropriate. I found that other records, which by their nature, have the potential to contain information to which access may be refused, require a more detailed and lengthy review. For these types of records, I determined a review time of two minutes per page was appropriate... I have no evidence before me to suggest that any of the records at issue have the potential to contain personal health information that may required a more detailed and lengthy review...*

*[46] As a result, and in the absence of evidence to the contrary, in my view it is reasonable to conclude that the 27 pages of responsive records would require only a straightforward review at five seconds per page. Accordingly, I find that a reasonable amount of time for the custodian to review 27 pages of records containing the complainant's own*

*personal health information is encompassed in the first 15 minutes of review that are accounted for in the set fee of \$30 per request. Given the nature and number of responsive records, I find that when the 2006 fee framework is applied, the custodian is not permitted to charge review fees in excess of what is accounted for in the set fee of \$30. I accept that, in the circumstances, this amounts to "reasonable cost recovery" as required by section 54(11) of PHIPA.*

While this reasoning is not enshrined in legislation or in formal guidelines, the precedent set by this, and previous Decisions should be considered by members when they set fees for the copying of records.

### Consultation Records

**Q: I am engaging in a formal, ongoing consultation relationship where I will be providing consultation to a social worker.**

- 1. Is formal notetaking by me required in this type of occasional consultation relationship?**
- 2. Is there any issue with respect to consulting to a member of a different profession?**

*A: Although there are no specific requirements identified with respect to formal notetaking in a consultation relationship, there are specific requirements with respect to services to Organizational Clients. The Standards of Professional Conduct, 2017 define an Organizational Client as: an organization, such as a business, community or government that receives services that are directed primarily at the organization, rather than to the individuals associated with that organization.*

If the social worker is thought of as operating a business, it is the business (as opposed to the social worker's clients) to whom you are providing consultation. This would mean the records are Organizational Client Records. The *Standards of Professional Conduct, 2017* set out the following requirements for Organizational Client records as follows:

### 9.3 Organizational Client Records

1. Members must keep a record related to the services provided to each organizational client.
2. The record must include the following:
  - a. the name and contact information of the organizational client;
  - b. the name(s) and title(s) of the person(s) who can release confidential information about the organizational client;
  - c. the date and nature of each material service provided to the organizational client;

- d. a copy of all agreements and correspondence with the organizational client; and
- e. a copy of each report that is prepared for the organizational client.

Although the “nature of each material service provided” is not described, it can be reasonably understood that this means information about the issues discussed and advice given should be recorded. This would apply to any consultation, including those involving members of other professions.

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## COUNCIL HIGHLIGHTS – SEPTEMBER 23, 2022



The College Council met virtually on September 23, 2022. Information provided to members of Council for their review in anticipation of their deliberations and decision-making is posted on the homepage of College website a week in advance of meetings. Following the meeting, this information is archived on the website in the [Council Meeting Materials](#) Reference Library.

## POLICY ISSUES

### Supervision Resource Manual

Council received the revised [\*Supervision Manual for Registration, Third Edition, 2022\*](#). This *Manual* was developed to provide guidance to members and those seeking registration with the College. It provides practical information to help members of the College who agree to be supervisors for supervised practice members and/or who agree to provide supervision to members seeking to expand their authorized areas of practice. The *Manual* offers direction in an effort to ensure effective supervision and consistency in the services provided to clients.

### ABA Regulations for Circulation

The College has been working towards welcoming Behaviour Analysts into what will be the new College of Psychologists and Behaviour Analysts of Ontario to be established under the yet to be proclaimed *Psychology and Applied Behaviour Analysis Act, 2021*. To prepare for proclamation, the College must develop Regulations related to the regulation of Behaviour Analysts.

Regulation development follows a formal process set out in section 95(1) (1.4) of the Health Professions Procedural Code being Schedule 2 of the *Regulated Health Professions Act, 1991*. This section of the Code requires the College to circulate proposed Regulations or Regulation amendments to its members, the public and stakeholders for a minimum of 60 days. At the conclusion of the circulation period, the College Council considers the feedback received, makes any changes deemed appropriate, and approves the final draft Regulations for submission to the government for its review, approval, and ultimate proclamation on a date of its choosing.

The Council approved a consultation package with the draft amendments to the College's Registration Regulation, General Regulation, and the Professional Misconduct Regulation.

The Consultation was circulated on October 3, 2022 and can be viewed [here](#). Consultation closes on December 2, 2022.

## BUSINESS ISSUES

### Transfer of Funds

The financial statements for the year ending May 31, 2022 indicated an operating deficit for the 2021-2022 year of \$374,465. The College maintains a Fee Stabilization Fund which "is designated to minimize or delay the impact of year-over-year changes in revenues or expenses on membership renewal fees". The Council approved the use of the Fee Stabilization Fund to cover the operating deficit.

Membership fees will remain at their current level for the upcoming 2023-2024 year. It was noted that College membership fees have not increased since 2002.

### Annual Financial Audit

Council received and approved the annual Audited Financial Statements for the fiscal year ending May 31, 2022. A Summary of the Audited Financial Statements can be found in this volume of HeadLines and the full Audited Financial Statements will be included in the 2021-2022 Annual Report.

## OTHER BUSINESS

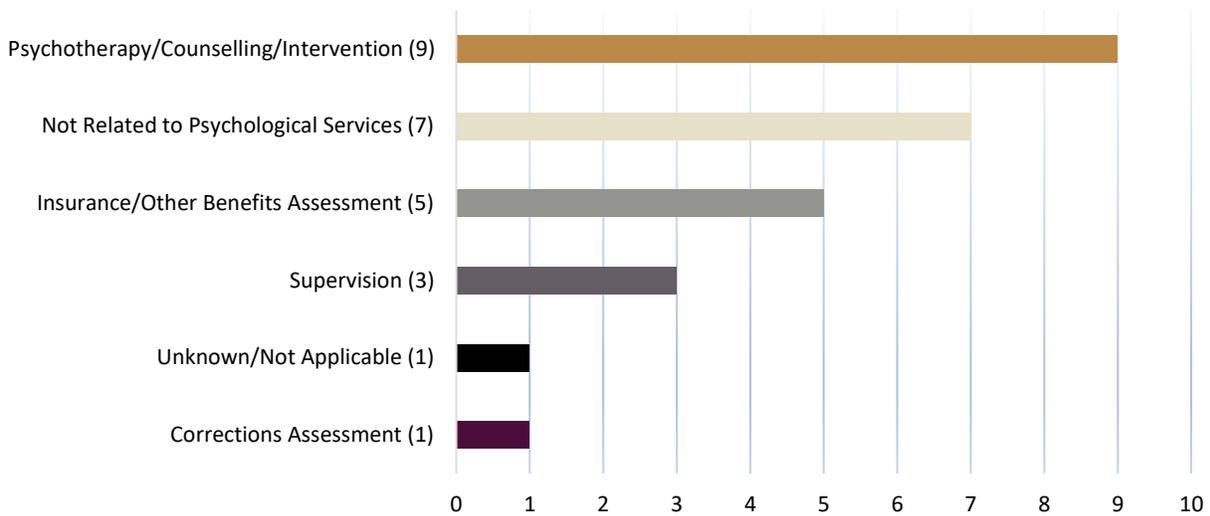
The next meeting of Council will be held virtually on December 17, 2022.

# INQUIRIES, COMPLAINTS & REPORTS COMMITTEE (ICRC)

FIRST QUARTER, JUNE 1, 2022 – AUGUST 31, 2022

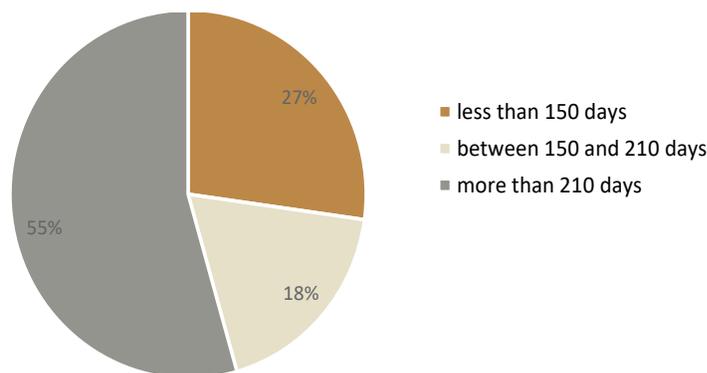
## NEW COMPLAINTS AND REPORTS

In the 1st Quarter, the College received 25 new complaints and opened one Health Inquiry, for a total of 26 new matters. The nature of service in relation to these matters is as follows:



## TIMELINE SNAPSHOT

There are currently 147 open Complaints and Registrar’s Investigations being actively investigated.

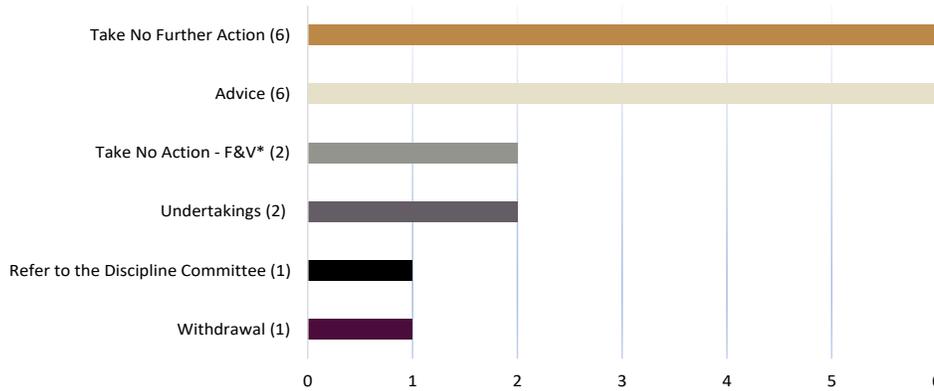


## ICRC MEETINGS

The ICRC met on four times to consider a total of 42 cases. In addition, the ICRC held 16 teleconferences to consider 19 cases.

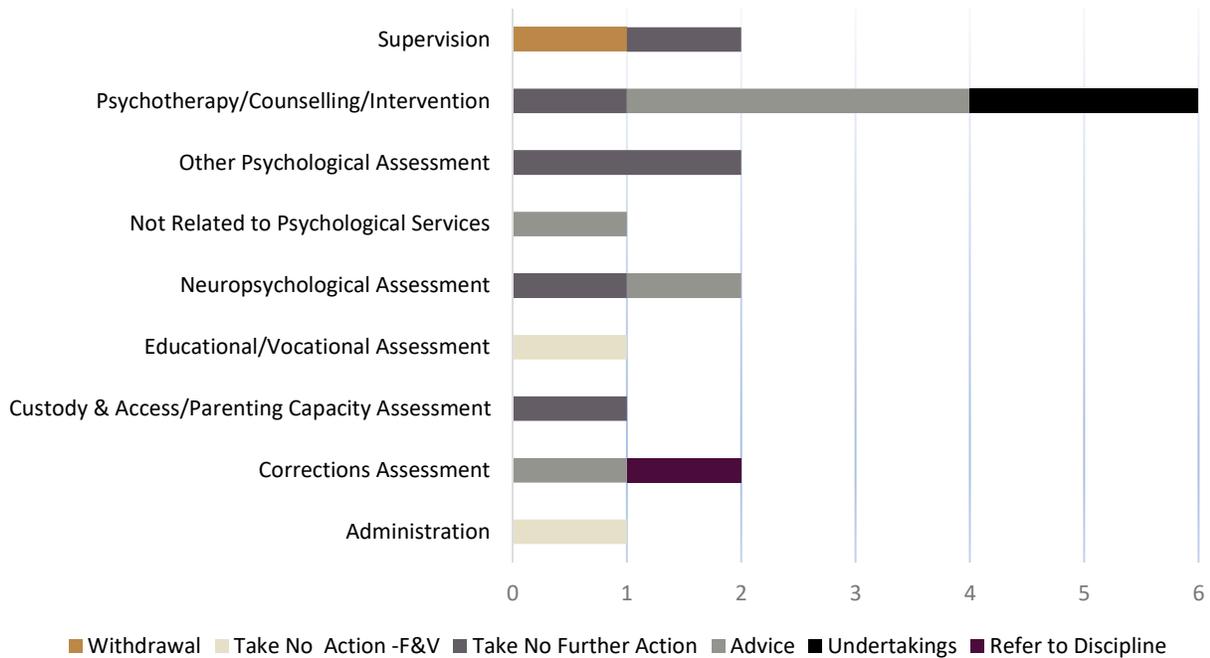
## ICRC DISPOSITIONS

The ICRC disposed of 18 cases during the 1st Quarter, as follows. The ICRC took some remedial action, ranging from providing advice to a referral to the Discipline Committee, in 9, or 50%, of these cases:



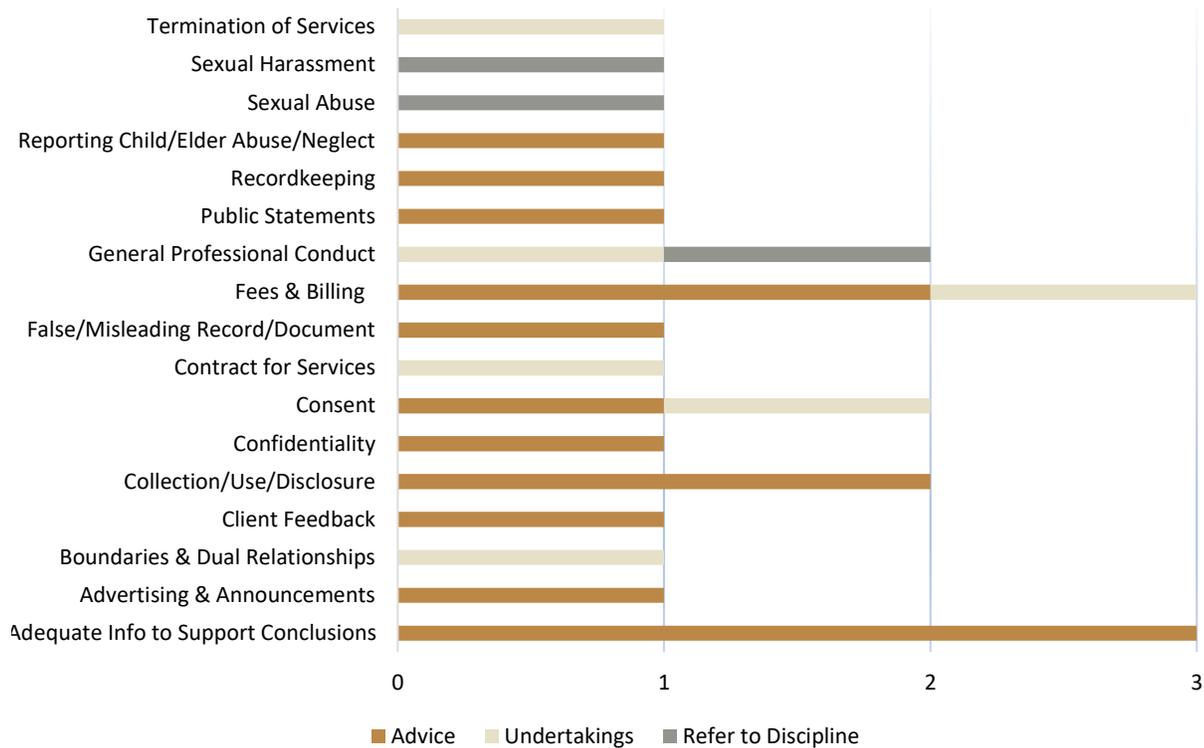
\*F&V: Frivolous, vexatious, made in bad faith, moot or otherwise an abuse of process, pursuant to s.26(4) of the Health Professions Procedural Code.

The dispositions of these 18 cases, as they relate to nature of service, are as follows:



## DISPOSITION OF ALLEGATIONS

The 18 cases disposed of included the consideration of 50 allegations. The ICRC took some remedial action with respect to 24, or 48%, of these allegations.



## HEALTH PROFESSIONS APPEAL AND REVIEW BOARD (HPARB)

In the 1st Quarter, two HPARB reviews of ICRC decisions were requested. The College received seven HPARB decision, all confirming ICRC decisions.

# INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE (ICRC) DECISIONS

The following are summaries of some recent decisions of the Inquiries, Complaints and Reports Committee reflecting three different dispositions. They are provided for educational purposes. Information in these summaries has been altered to protect the privacy of both members and complainants, and to protect the confidentiality of the investigation process. The relevant substance of the allegations and outcomes remain unchanged.

## **Informed Consent: Decision: *Take No Further Action***

The complainant made various allegations related to a court-ordered parenting capacity assessment the member conducted with respect to her and her partner. One of the allegations was that the complainant did not provide informed consent for the assessment as the medication she was taking at the time caused temporary psychosis and negatively impacted her ability to answer questions.

The panel of the ICRC considering this matter noted that the clinical record did at times reflect the complainant's inability to engage in assessment activities. On those occasions however, the sessions were discontinued. There was no indication that the complainant had been affected by her medication at the time that she consented to the assessment. There was also no indication that the complainant had, at any time, withdrawn her consent to participate in the assessment. The panel therefore determined there was no risk to the public with respect to this allegation and decided to *Take No Further Action*.

## **Providing Services Outside of Ontario: Decision: *Advice***

A health clinic made a mandatory report to the College due to its termination of a member's employment. One of the reasons provided for termination was that the member had inappropriately provided psychological services outside of Ontario.

The panel of the ICRC considering this matter believed, based on the member's response, that he appeared appropriately aware of the risks and benefits of providing his client with therapy while the client was travelling. The

panel noted however, that the member's considerations were not adequately documented in his clinical notes. While the panel believed that the member's reasons for providing virtual therapy to this client on a limited basis appeared adequate and appropriate, the clinic did not have the benefit of understanding this decision. The panel therefore decided to provide the member with *Advice* with respect to documenting his ethical decision-making processes.

## **Conflict of Interest, Objectivity, and Intimate Partner Violence: Decision – *Undertakings***

The member provided individual psychotherapy services to the complainant's spouse for a period of five years. The complainant participated in several joint sessions with her spouse over several months before lodging a complaint. The complainant alleged that because of the member's therapeutic alliance with her spouse, the member did not appropriately respond to the concerns of domestic abuse she disclosed in those joint sessions.

The panel of the ICRC considering this matter noted that the member did not appear to dispute the complainant's description of the information she disclosed. In the panel's view, this information did appear to indicate patterns of abuse. The panel was very concerned that the member did not appear to recognize or appropriately address these issues, as this apparent failure posed high risks to the complainant and others. The panel therefore believed it was appropriate and in the public interest to ask the member to enter into an *Undertaking*, comprised of a Coaching Program consisting of education and clinical file review, to address these concerns.

# DISCIPLINE COMMITTEE REPORT



## REFERRALS TO DISCIPLINE

There was one referral to the Discipline Committee in the 1st quarter:

**Dr. Ian Shields:**

[https://members.cpo.on.ca/public\\_register/show/1380](https://members.cpo.on.ca/public_register/show/1380)

A referral was made to the Discipline Committee with the ICRC Decision sent to Dr. Shields on August 3, 2022

## PRE-HEARINGS

**Dr. Romeo Vitelli:**

[https://members.cpo.on.ca/public\\_register/show/1461](https://members.cpo.on.ca/public_register/show/1461)

A Pre-Hearing Conference took place on September 16, 2022.

## ONGOING MATTERS

**Dr. André Dessaulles:**

[https://members.cpo.on.ca/public\\_register/show/2530](https://members.cpo.on.ca/public_register/show/2530)

This matter was referred to the Discipline Committee on February 17, 2021. A Motion in this matter was heard on June 20 and 23, 2022, and is scheduled to continue on November 7 and 8, 2022. The Hearing has not yet been scheduled.

**Dr. Darren Schmidt:**

[https://members.cpo.on.ca/public\\_register/show/21702](https://members.cpo.on.ca/public_register/show/21702)

This matter was referred to the Discipline Committee on December 2, 2021. The Hearing was held on October 3, 4, 6 and 7, 2022.

# CHANGES TO THE REGISTER

## CERTIFICATES OF REGISTRATION

The College would like to congratulate those **Psychologist** and **Psychological Associate** members who have received Certificates of Registration since July 2022

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### Psychologists - Certificate of Registration Authorizing Autonomous Practice

Lisa Lea Bechtel	Chiang-Le Heng	Frederick Albert Walter
Fiona Louise Gordon	Sabrina Geanne McHugh-Thomas	

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### Psychological Associates - Certificate of Registration Authorizing Autonomous Practice

No new Certificates were issued during this period.

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### Psychologists - Certificate of Registration Authorizing Interim Autonomous Practice

Cheryl Baron	Brooke Fletcher	Audrey Morin
Barbara Beach	Lee-Anne Gray	Nicolás Francisco Narvaez Linares
Shannon Bedford	Melissa Howlett	Norann Richard
Samantha Burns	Nicholas Jackson	Clifford Ridley
Andrea Cook	Kathleen Kelava	Amal Souraya
Vanessa Corbeil	Jordan Stuart Maile	Julianna Van Mulligen
Tami-lee Duncan	Susanne Martin	Rene Weideman
Leehen Farkas	Bethany Michel	Jodi Zentner

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### Psychological Associates - Certificate of Registration Authorizing Interim Autonomous Practice

No Certificates were issued in this period.

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### Psychologists - Certificate of Registration Authorizing Supervised Practice

Arela Agako	Tasmia Hai	Esther C. Price
Betül Alaca	Patrick Jacques	Rachael Quickert
Faisal Al-Yawer	Divya Jyoti	Julia Ranieri
Iris Antonopoulos	Areej Khan	Abigail Reid Graves
Stevenson Baker	Ayelet Lahat	Danielle Rice
Satinder Brar	Ariella Lenton-Brym	Milse Rocha Magalhaes Furtado
Albert Andrew Chan	Ting Chi Luk	Shumita Roy
Christina Dimech	Jessie Lund	Lindsay Rubinfeld
Beverley Fredborg	Elizabeth McEwen	Amri Sabharwal
Bailey Frid	Jenkin Ngo Yin Mok	Sanya Sagar
Ellen Rachel Gutowski	Alex Porthukaran	Priyapreet Kaur Sandhu

Vanessa Scarapicchia  
Vanessa Schell  
Hilary Catherine Scott-Row  
Angela Sekely  
Noor Sharif  
Setareh Shayanfar

Alanna Singer  
Shauna Solomon-Krakus  
Kathleen Stewart  
Katherine Stover  
Erica Lee Tatham  
Renee Taylor

Fiona Carina Thomas  
Catherine Thompson-Walsh  
Lindsey Torbit  
Monique Tremblay  
Katherine Wincentak

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**Psychological Associates - Certificate of Registration Authorizing Supervised Practice**

Alyssa Lyla Baxter  
Sarah Lynne Breckenridge  
Corrie Danielle Brownlee  
Nicole Davey  
Paul Evans

Margaret Marie Brenzall Field  
Farzaneh Pariman  
Marta Paszucka  
Nadia Regina Prando  
Gadija Bibi Roshan

Sandra Sabatino-Buldo  
Lauren Marie Sadowski  
Dianna Scimeca  
Devanshi Sharma

*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.*

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**Retired**

Maria Eugenia Barrera  
John Jordan

Robert Mathieson  
Susan Klein Smith

Rachel Joy Tupper

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**Resigned**

Darlene Ellen Bennett-Bauer

Rebecca Dawn Carte

Sonia Krol

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**Deceased**

The College has learned with regret of the death of the following member and extends condolences to family, friends and professional colleagues of:

Benjamin Robert Williams

**COLLEGE OF PSYCHOLOGISTS OF ONTARIO**

**SUMMARY FINANCIAL STATEMENTS**

MAY 31, 2022

**HILBORN**<sub>LLP</sub>

## **Report of the Independent Auditor on the Summary Financial Statements**

To the Members of Council of the College of Psychologists of Ontario

### **Opinion**

The summary financial statements, which comprise the summary statement of financial position as at May 31, 2022, and the summary statement of operations for the year then ended, and related note, are derived from the audited financial statements of the College of Psychologists of Ontario (the "College") for the year ended May 31, 2022.

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements, in accordance with the criteria described in the note to the summary financial statements.

### **Summary Financial Statements**

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements of the College and the auditor's report thereon.

### **The Audited Financial Statements and Our Report Thereon**

We expressed an unmodified audit opinion on the audited financial statements in our report dated October 7, 2022.

### **Management's Responsibility for the Summary Financial Statements**

Management is responsible for the preparation of the summary financial statements in accordance with the criteria described in the note to the summary financial statements.

### **Auditor's Responsibility**

Our responsibility is to express an opinion on whether the summary financial statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, *Engagements to Report on Summary Financial Statements*.



Toronto, Ontario  
October 7, 2022

Chartered Professional Accountants  
Licensed Public Accountants

# COLLEGE OF PSYCHOLOGISTS OF ONTARIO

## Summary Statement of Financial Position

May 31	2022 \$	2021 \$
<b>ASSETS</b>		
Current assets		
Cash and cash equivalents	7,472,927	4,856,274
Prepaid expenses and sundry receivables	95,889	44,518
Investments - short term	-	2,961,735
	<b>7,568,816</b>	7,862,527
Investments - long term	35,382	40,262
Property and equipment	1,076,339	1,106,229
	<b>8,680,537</b>	9,009,018
<b>LIABILITIES</b>		
Current liabilities		
Accounts payable and accrued liabilities	440,298	438,353
Registration fees received in advance	2,999,146	2,929,644
Current portion of lease inducements	25,462	25,462
	<b>3,464,906</b>	3,393,459
Lease inducements	218,546	244,008
	<b>3,683,452</b>	3,637,467
<b>NET ASSETS</b>		
Invested in property and equipment	832,331	836,759
Internally restricted	3,143,614	3,323,614
Unrestricted	1,021,140	1,211,178
	<b>4,997,085</b>	5,371,551
	<b>8,680,537</b>	9,009,018

The accompanying note is an integral part of these summary financial statements

# COLLEGE OF PSYCHOLOGISTS OF ONTARIO

## Summary Statement of Operations

Year ended May 31	2022 \$	2021 \$
Revenues		
Registration fees	3,533,364	3,426,161
Examination fees	137,550	129,650
Investment and miscellaneous income	51,027	47,421
Ministry of Children, Community and Social Services grant	75,018	-
	<b>3,796,959</b>	<b>3,603,232</b>
Expenses		
Administration	2,758,123	2,658,486
Professional services	250,955	190,620
Investigations, hearings and resolutions	497,334	435,296
Examination and seminar costs	257,741	231,157
Governance	60,819	46,739
Registration	95,501	82,050
Professional organizations	24,117	17,890
Communication, education and training	134,521	109,902
Quality assurance	17,296	11,325
Ministry of Children, Community and Social Services grant	75,018	-
	<b>4,171,425</b>	<b>3,783,465</b>
Deficiency of revenues over expenses for the year	<b>(374,466)</b>	<b>(180,233)</b>

The accompanying note is an integral part of these summary financial statements

# COLLEGE OF PSYCHOLOGISTS OF ONTARIO

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## Note to Summary Financial Statements

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May 31, 2022

1. **Basis of Presentation**

These summary financial statements have been prepared from the audited financial statements of College of Psychologists of Ontario (the "College") for the year ended May 31, 2022 on a basis that is consistent, in all material respects, with the audited financial statements of the College except that the information presented in respect of changes in net assets and cash flows has not been included and information disclosed in the notes to the financial statements has been reduced.

Complete audited financial statements are available upon request from the office of the Registrar.

# HILBORN

LISTENERS. THINKERS. DOERS.

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