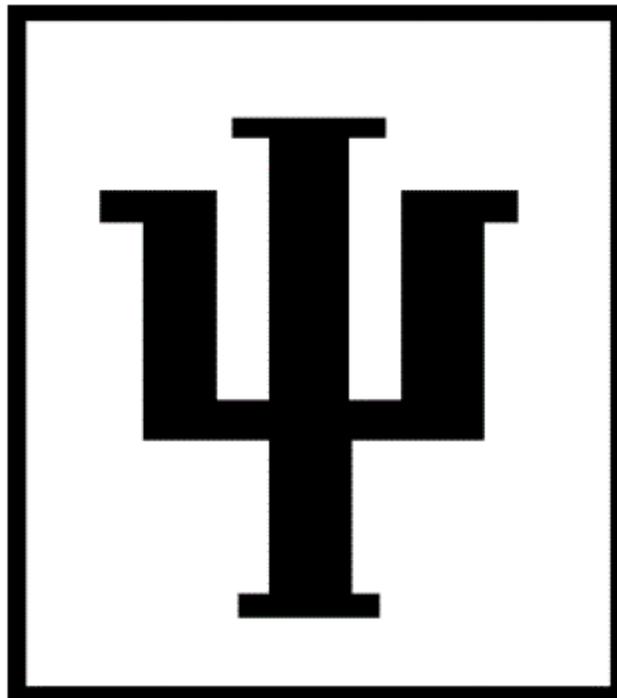


THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO

MEETING MATERIALS

**College Council
June 23, 2017
2017.02**



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THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO

Executive Committee Statement of Interest

Lynette Eulette Ph.D., C. Psych., President

Biography

I received my undergraduate degree from the University of Saskatchewan, and my graduate degrees from the University of Waterloo. I was registered with the College in 1991, and started my career in Ontario at the Children's Hospital of Western Ontario. Subsequently, I was employed at the University of Waterloo Counselling Services. During this time I was also the Campus Sexual Harassment Counselor and was a trained Mediator for the University. From 2002-2009, I was the Chief Psychologist at the Waterloo Region District School Board. Since then, I have had the position of Part Time Faculty in the Clinical Psychology graduate program at the University of Waterloo. Lastly, I maintain a private practice in Waterloo and have done so for over 10 years.

I have served on the Executive of the Association of Chief Psychologists in Ontario School Boards and as Co-Chair of the Health Professionals Advisory Council for the local LHIN. I have been a Board member with Thresholds, a community agency that provides support and housing for adults with severe mental health concerns. For over fifteen years, I have been involved in outreach through church and community activities in a neighbourhood with a high percentage of refugees and New Canadians. Prior to being elected to the College Council, I served on the Quality Assurance Committee for one year and was an examiner at the College Orals. During my first term on Council (2013-2015), I served on the ICRC and Registration Committees and on the Executive Committee as Vice-President; I also volunteered to fill a gap on the Client Relations Committee when a Council member resigned. As part of the Discipline Committee, I was involved in four hearings, two of which I chaired. This past year (2016), I have served on the Executive Committee as President.

Candidate Statement

This past year has been a year of learning about what responsibilities the role of President entails and about how to be effective in those activities. It has been a mix of 'daunting and enjoyable'. I have thoroughly enjoyed working with Council, the Executive and the Registrar. My perspective is that together we have moved some significant initiatives forward. Amongst other things, we approved revised Standards, lowered member and new registrant fees, updated the College Strategic Direction, stayed abreast of the legislative environment regarding Bill 87, transparency, and the definition of psychotherapy, and approved a new continuing professional development structure. In my role as Chair of the Council and Executive meetings, I believe that I have worked to foster an open culture that allows for thorough and frank discussion of the issues on the agenda.

My experiences this past year have deepened my understanding of how the College operates and of the issues before it. My work in the private and public sectors continues to inform me of the working context for psychological practitioners in Ontario. In addition, I am involved in the graduate training of psychological practitioners. I believe that this experiential base together with my administrative skills and passion for psychology have served me well this past year in the role of College President. I would like to continue to serve as President for the coming year. If, however, I am unsuccessful in this endeavor, I would be pleased to continue to serve on the Executive in the capacity of Vice-President or Professional Member.



THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO

Executive Committee Statement of Interest

Ruth Berman, PhD, C.Psych, Vice-President

Biography

I have been certified as a psychologist by the College of Psychologists since 1987. My training includes an undergraduate psychology degree from the University of Toronto, and Masters and Doctoral degrees from York University. I served as Executive Director of the Ontario Psychological Association (OPA) from 1989 to December 2010, during which time I had the opportunity to participate in numerous and varied forums related to health professions regulation, health care policy, and health service delivery. Some examples of these include Interhealth (Chair); the Rehabilitation Council of Ontario (Pres.); the Minister of Finance's Task Force on the Accreditation of Rehabilitation Programs; the government of Ontario's Policy Committee on Auto Insurance; the Minister of Health's Advisory Committee on Mental Health and Addictions; and the Workplace Safety and Insurance Board's (WSIB) Fee-Setting Advisory Committee.

As a professional psychologist, I have a background of experience in clinical, rehabilitation and occupational psychology. A primary area of interest has been in psychovocational evaluation and the impact of health status, impairment and disability on occupational functioning. I have, at times over the years of my career, consulted to the WSIB, Vocational Rehabilitation Services (COMSOC), the Toronto Rehabilitation Centre, the Institute for Work and Health, the Financial Services Commission (FSCO), and the insurance, rehabilitation and legal communities. I have, in addition, been involved in the education and training of graduate students in psychology, and of candidates preparing for certification as psychologists and psychological associates, on topics related to legislation, standards and ethics, as well as in clinical and rehabilitation psychology.

Candidate Statement

A majority of my career has been focused upon professional affairs. As Executive Director of the provincial association over a 22 year span, I had the privilege of being directly involved, at both inter-professional and governmental levels, in the early Health Professions Legislative Review, continuing through to the development and enactment of the Regulated Health Professions Act and all of its subsequent amendments. I was, as well, an active participant in the consultative processes that led to the development, among others, of the Health Care Consent Act, PHIPA, the proposed Psychotherapy Act, the Statutory Accidents Benefits Schedule and the Child and Family Services Act. These unique opportunities enabled me to acquire considerable knowledge of regulatory matters and of other relevant Ontario legislation impacting the profession and service delivery, as well as experience in government relations and familiarity with public policy development.

I have greatly appreciated, the opportunity to have served on College Council over these past five years where I hope that my background knowledge and experience have added some value to the Council's work. Equally important, I have found my years on Council and, as a member of several committees, including the past four years on Executive and previous year as Vice-President, an enriching and invaluable experience, in terms of my acquiring a deeper understanding of the College's mandate and operations, as well as a fuller appreciation of the current and future issues facing Council. I would again welcome the opportunity to serve, in the interests of Council, as Vice-President on the Executive this coming year. In consideration of the strategic directions that Council has proposed and approved for the coming year, as well as the anticipated legislative changes that are forthcoming, I believe that there is value at this time, especially as a number of former executive members will no longer be serving, to maintain at least some continuity within the membership of the Executive Committee to enable it to move forward on a number of the initiatives begun this past year, such as the expansion of the Executive's role and the undertaking of enhanced governance and accountability procedures.



THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO

Executive Committee Statement of Interest

Kristin Bisbee, Public Member

Biography

I have been a member of the Law Society of Upper Canada since 2011 as a paralegal. Prior to my legal work, I was the Operations Manager of a publically traded auto parts manufacturing company, handling the Human Resources and Labour Management as well as the financial reporting.

Once I received my paralegal license, I worked in private practice for several years, representing individuals and corporations before Provincial Tribunals and Small Claims Court, mostly for matters involving the Workplace Safety and Insurance Board, Human Rights Tribunal of Ontario and employment law litigation (including Ministry of Labour charges). I also participated heavily in the later stages of the regulation of my profession which included organizing an association, and developing educational standards. Lastly, I also hold an ADR certificate and regularly participated in mediations and settlement negotiations related to employment law, disability management, breach of contract, and torts.

I have volunteered with a number of organizations over the years, which include Yellow Brick House, the OPSCA, Halton Regional Women's Shelters, Pride Toronto and the OJEN.

Every year, I attend Seneca College to perform presentations on career counselling for graduating students. Further, every year, I teach human rights law to Grade 12 students at Marc Garneau Collegiate Institute who perform a mock trial in conjunction with Seneca College and OJEN.

I am currently working as an in-house Litigation Paralegal for the Miller Group of Companies.

Candidate Statement

I started my work with the College of Psychologists of Ontario in 2013 and have participated in as many committees as possible, including the Client Relations Committee, Discipline Committee, Finance and Audit Committee and ICRC. I participated in the Sex Abuse Task Force consultation with the public members of our fellow RHPA Colleges. I value my role on these committees and within Council immensely, and engage constructively where I can add value.

I have thoroughly enjoyed the engaging and important work the College performs for the past four years. I believe that my experience has provided me with an appreciable understanding of the important work that is required at the Executive Committee level. I remain committed to my work at the College, and feel I would add value in productive and significant ways to the Executive Committee. I would appreciate your consideration for my election for 2017-2018.



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Executive Committee Statement of Interest

D'Arcy Delamere, Public Member

D'Arcy is a full-time Lecturer in the University of Waterloo's School of Accounting and Finance specializing in Organizational Behaviour and International Business. Prior to joining UW, he taught in the School of Business and Economics at Wilfrid Laurier University.

Prior to becoming a teacher, D'Arcy had extensive business experience including approximately 20 years in executive roles with Royal Bank of Canada, The Mutual Group/Clarica and the Cumis Group. He is currently the President of DRDelco a consulting firm involved in strategy development and execution.

D'Arcy has been active in his community. He is the former Chair of the Grand River Hospital Board and he provides volunteer support to the KW Chamber, Centre for Family Business and Community Support Connections. He currently serves on the Boards of Festival Hydro, Festival Hydro Services and the Council and Executive of the College of Psychologists of Ontario. He is the former chair of the Ontario Chamber of Commerce and has served on the Board and Executive of the Institute of Chartered Accountant of Ontario (Now CPA Ontario).



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Executive Committee Statement of Interest

Christine M. DiZazzo, M.Ps., C.Psych.Assoc., Professional Member

I have been married to Ed since 1973 – can't think where the time has gone. We have 4 kids and two handsome grandsons. Ed and I have lived in the same rural community most of our married life. We are very involved in our community.

As a Psychological Associate I worked for school boards in Ontario for many years (first for the former Stormont Dundas and Glengarry Board as a Psychometrist, and then for the Ottawa Carleton District School Board). Since 2007, I have been in private practice. Recently, I cut down significantly on my practice. In both public and private settings I was always acutely aware of the difficulties in accessing qualified and regulated mental health professionals. This has been particularly true for children and youth, a population that research has shown to be chronically under-served. I feel strongly about ensuring that school-aged children have access to timely assessment and psychotherapeutic services that will promote success for them first in their academic careers and, then to meet the challenges that they will face throughout their lives. Similarly, through a lifespan perspective, I recognize the necessity of having robust mental health services as these individuals transition into adulthood and then later life. This strong belief has led me into many advocacy roles. When I worked for the OCDSB I was an active member of my union, the Ontario Secondary School Federation. As a PA, I have been a member of OAPA since its founding and now sit on its Board. While I understand that as a member of Council I would have to leave the Board of OAPA, I am proud to have served and done my small part for advancing the concerns of Master+Apprenticeship psychological professionals as well as advocating for the provision of services to meet the needs of students by competent professionals. I served a term on Council several years ago (2006-2009). It is my hope that in making the transition at this time from a primarily advocacy role to one with a focus on the public interest and the profession's guiding regulatory frameworks I can make a contribution to the profession while highlighting the skills that PAs have to offer.

We stand at an interesting point in our profession. Aware as we are of the serious mental health needs of our population, we find that there is a limited pool of individuals with the necessary training to meet their needs. Most school boards and even most private practitioners have long waiting lists for psychological assessments and treatments. Ensuring that the public has access to well-trained individuals to meet these needs has always been a priority of mine. I have been pleased in recent years to note the growing number of OAPA members, a sign that qualified Masters prepared psychological practitioners are seeking registration. It is my belief that all psychological professionals in Ontario need to make common cause to ensure the availability of quality psychological supports and I look forward to an opportunity to facilitate that cause at the regulatory level.



THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO

Executive Committee Statement of Interest

Michael Grand, PhD, C.Psych, Professional Member

As a member of the College for nearly 40 years, I have combined the roles of academic, clinician, administrator and activist.

In my private practice, I have worked primarily with young adults and their families, focusing on the challenges of developmental transitions. Mirroring my research, I have also offered specialized clinical services to all members of the adoption constellation: adoptees, birth parents, and adoptive parents. Recognizing that behaviour must always be understood within its context, I have led a community-based, national effort to open adoption records in every province and territory. By taking my research and clinical work to the streets, it has been my intention to demonstrate the relevance of our discipline beyond the walls of the academy.

In 1974, following two years of teaching at the University of Birmingham in Birmingham England, where I was responsible for the senior year of training in Clinical Psychology, I came to the University of Guelph. I have taught graduate courses in Psychopathology, Social and Emotional Assessment and Diagnosis, and Systems and Processes in Psychotherapy, and have been a practicum supervisor. I wrote the initial curriculum for our PhD program in Clinical Psychology: Applied Developmental Emphasis, served as the Director of Training for over 20 years and wrote the last CPA accreditation document for the programme.

I have filled many administrative positions including Departmental Graduate Officer, and Chair of the Department of Psychology. During this time, I have framed University-wide policy documents, managed a multimillion dollar budget and a staff/faculty complement of over 50 and chaired many important University committees.

I am now completing my second year on the Council of the College of Psychologists of Ontario as one of the two academic representatives. I sit on the Registration, Nominations, and Fitness to Practice Committees. I have enjoyed undertaking these tasks as they have afforded me the opportunity to use the skills that I have honed over the course of my career. I am now putting my name forward for a position on the Executive Committee as I believe that I can make a further contribution to the workings of the Council and the College. In the near future, the College will face some important challenges, particularly the development of policy that both protects the public, and does not overly encumber the professional lives of our members. We must assist training programs to meet the changing mental health needs of the public. And, of most importance, we must be proactive in ensuring that our profession holds to the highest ethical standards of practice. By serving on the executive committee, it is my hope that I can make a constructive contribution to meeting these challenges.



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

COUNCIL MEETING AGENDA

2017.02

June 23, 2017

9:00 AM to 4:00 PM

Agenda Item	Topic	Action	Page #	Strategic Direction *
.00	CALL TO ORDER			
.00a	Election of the Executive Committee	Decision	2	M8/M9
.01	APPROVAL OF AGENDA & MINUTES			
.01a	Review & Approval of Agenda	Decision	8	
.01b	Declarations of Conflicts of Interests	Discussion	--	M8
.01c	Review & Approval of Minutes - Council Meeting 2017.01 March 24, 2017	Decision	10	
.01d	Review & Approval of IN CAMERA item - Council Meeting 2017.01 March 24, 2017 ¹	Decision	--	
.01e	Review of Action List	Discussion	11	
.02	CONSENT AGENDA ITEMS		Information	
.02a	President's Report		21	
.02b	Registrar's Report		22	
.02c	Financial Information		--	
	(1) Finance & Audit Committee Report		33	
	(2) Statement of Revenue and Expenses to February 28, 2017		34	
	(3) Balance Sheet as of February 28, 2017 (Unaudited)		35	
.02d	Staff Presentations		36	
.02e	Committee Reports		--	
	(1) Executive Committee (see President's Report)		--	
	(2) Registration Committee	No Report	--	
	(3) Discipline Committee		37	
	(4) Inquiries, Complaints and Reports Committee		38	
	(5) Quality Assurance Committee		45	
	(6) Client Relations Committee		46	
	(7) Fitness to Practice Committee	No Report	--	
.03	POLICY ISSUES			
.03a	Policy II-3(ii) Release of the Member's Response to the Complainant	Decision	47	M5
.03b	Policy III F-4 Per Diems and Council and Committee Compensation	Decision	51	M9
.03c	By-law 21: Committee Composition	Decision	53	M1-M9
.04	BUSINESS ISSUES			
.04a	Committee Audit 2017 - 2018	Decision	57	M9

¹ Material Not Included in Public Package – Personnel Matter

Agenda Item	Topic	Action	Page #	Strategic Direction *
.04b	Training Program Directors Report – P. Minnes, M. Grand	Oral Report	--	
.04c	Internship Program Directors Report – D. Cotton	Oral Report	--	
.04d	Registrar's Goals 2017 - 2018 IN CAMERA ²	Review	--	M9
.05	STRATEGIC ISSUES			
.05a	Strategic Direction Implementation: Chart Update	Discussion	59	M9
.05b	Generative Discussion: Bill 87	Discussion	63	M8/M9
.05c	Generative Discussion: Council Self-Evaluation	Discussion	68	M9
.06	OTHER BUSINESS			
	Next Council Training & Meeting: September 14-15, 2017	Information	--	
	Proposed date for Council Meeting: <ul style="list-style-type: none"> Friday December 15, 2017 	Decision	--	
.07	ADJOURNMENT			

*In accomplishing our Mission, the College promotes excellence in the practice of psychology by:

- M1 - *Enforcing standards fairly and effectively through: Developing, establishing and maintaining standards of qualifications for individuals seeking registration,*
- M2 - *Enforcing standards fairly and effectively through: Developing, establishing and maintaining standards of practice and professional ethics for all members,*
- M3 - *Enforcing standards fairly and effectively through: Developing, establishing and maintaining standards of knowledge and skill and programs to promote continuing evaluation, competence and improvement among members;*
- M4 - *Communicating clearly and effectively with stakeholders, particularly applicants, members and the public;*
- M5 - *Supporting and assisting members to meet high standards;*
- M6 - *Responding to changing needs in new and emerging practice areas;*
- M7 - *Collaborating in shaping the regulatory environment;*
- M8 - *Acting in a responsibly transparent manner; and,*
- M9 - *Advancing the Council's governance practices.*

² Materials Not Included in Public Package – Personnel Matter



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

COUNCIL MEETING

2017.01

March 24, 2017

Present:

Lynette Eulette, Ph.D., C.Psych., President	Jaffar Mohammad Hayat, Public Member
Ruth Berman, Ph.D., C.Psych., Vice-President	Gilles Hebert, Ph.D., C.Psych.
Kristin Bisbee, Public Member	Elizabeth Levin, Ph.D., C.Psych.
Judy Cohen, Public Member	Denise Milovan, Ph.D., C.Psych.
Dorothy Cotton, Ph.D., C.Psych.	Patricia Minnes, Ph.D., C.Psych.
D'Arcy Delamere, Public Member	Glenn Webster, M.Ed., C.Psych.Assoc.
Robert Gauthier, M.Sc., M.Ed, C.Psych.Assoc.	Donna McNicol, Public Member
Michael Grand, Ph.D., C.Psych.	

Regrets:

Astra Josie Rose, Public Member
Ethel Teitelbaum, Public Member

Staff:

Rick Morris, Ph.D., C.Psych., Registrar & Executive Director
Barry Gang, MBA, Dip.C.S., C.Psych.Assoc., Director, Professional Affairs
Lesia Mackanyn, Director, Registration
Zimra Yetnikoff, Director, Investigations & Hearings
Stephanie Morton, Manager: Administration
Caitlin O'Kelly, Administrative Assistant: Office of the Registrar, Recorder

2017.01.00 Call to Order

The President called the meeting to order at 9:01AM.

2017.01.01 Approval of the Agenda and Minutes

.01a Approval of Agenda

The following changes were made to the agenda:

Moved:

Registrar's Report to .02b
Registration Committee Report to .02e(2)
ICRC Committee Report to .02e(4)

Added:

Bill 87 to .04g
Enterprise Risk Management to .04h
Shaping the Future to .04i
Attendance at ASPPB to .04j

**It was MOVED Hebert
That the agenda be approved as amended.**

CARRIED

50
51 **.01b Minutes**

52 (1) Minutes from the Council Meeting 2016.04 on December 2, 2016

53
54 **It was MOVED Levin**
55 **That the minutes from the Council Meeting 2016.04 on December 2, 2016 be approved.**
56 **CARRIED**

57 **.01c Review of Action List**

58 The Council reviewed the Action List and noted items that were completed, outstanding or on
59 the agenda at this meeting.
60

61 **2017.01.02 Consent Agenda**

62 The follow items were moved from the Consent Agenda for discussion.

63
64 **.02b Registrar's Report**

65 In response to a question, the Registrar provided the Council with details on the presentations
66 that he gives to university ethics classes throughout Ontario.
67

68 There was discussion about the College of Registered Psychotherapists and whether the
69 services offered by its members are now being covered by insurance plans. It was noted that
70 this would depend on the benefit plan provided by the employer. Many employers are moving
71 towards establishing Health Care Spending Accounts which can be used in a variety of ways at
72 the discretion of the employee.
73

74 **.02e(2) Registration Committee Report**

75 There was discussion on the number of retraining plan cases each panel reviews and the
76 characteristics of the members undertaking them. It was noted that some cases carry over from
77 previous meetings. The Director, Registration was asked to provide a breakdown of the
78 retraining plan cases in the next Committee Report to Council.
79

80 **Action Item LM**

81 To provide details on retraining plan cases in the next Committee Report to Council.
82

83 **.02e(4) ICRC Report**

84 In response to a question, the Director, Investigations and Hearings clarified that each case
85 considered by the ICRC may include several allegations and the Committee considers each
86 allegation individually.
87

88 **It was MOVED Berman**
89 **That the Consent Agenda be approved.** **CARRIED**
90

91 **2017.01.03 Strategic Issues**

92
93 **.03a Strategic Direction Implementation Update**

94 The Registrar provided the Council with the updated *Strategic Direction Implementation Table* to
95 reflect the new *Strategic Direction 2017-2022*. The new chart carries forward only those items
96 which appear to reflect activity for 2017. The previous chart will be retained for historical
97 purposes. Items added by the Registrar since January 2017 were shown in **Blue**.
98

99 The Council suggested adding the following:

- 100 • New technological standard within the revised *Standards of Professional Conduct 2017*
- 101 (M6)
- 102 • New Briefing Note format for Council materials (M9)

104 **2017.01.04 Policy Issues**

106 **.04a By-Law 18: Fees**

107 Amendments to *By-Law 18: Fees* were approved for circulation by Council at its September
 108 meeting. The amendments included reductions in fees for the Oral Examination and the
 109 Jurisprudence Ethics Examination as well as for initial Corporation applications and renewals.
 110 The consultation was distributed to members on October 7, 2016 with a request that feedback
 111 be received by December 15, 2016. To date the College has received 58 responses. Sample
 112 responses were provided by the Register at the December Council meeting.

114 **It was MOVED Cohen**

115 **That the proposed amendments to *By-Law 18: Fees* be approved effective June 1, 2017.**

116 **CARRIED**

118 **Action Item Staff:**

119 To revise College *By-Laws* to include amendments to *By-Law 18: Fees* and post on the College website.

121 **.04b Continuing Professional Development Distribution**

122 In September – December 2016, the College conducted a consultation with the membership
 123 regarding the proposed Continuing Professional Development (CPD) Program as developed by
 124 the Quality Assurance Committee. The Deputy Registrar provided the Council with the chart of
 125 the program requirements and a *Questions and Answers* document.

127 In response to a question, the Deputy Registrar clarified that the collection of credits will be on a
 128 go-forward basis with the first two-year cycle to start this spring. After the first cycle the Quality
 129 Assurance Committee will conduct an audit of 100 randomly selected members to evaluate the
 130 program. There was discussion on the type of material that would be requested in the audit. The
 131 Deputy Registrar described the type of documentation being considered and will add this to the
 132 *Question and Answers*. Council was informed that the College has recruited a contract staff
 133 member to develop a tracking system that can be used by members.

135 **Action Item BG**

136 Add a Question and Answer on what type of documentation the QA Committee would expect to receive
 137 from a member who is audited for the CPD program.

139 **It was MOVED Gauthier**

140 **That the Continuing Professional Development (CPD) program and requirements, as set**
 141 **out be the Quality Assurance Committee, be implemented. CARRIED**

143 Council was informed that the target implementation date will coincide with the distribution of the
 144 2017 Self-Assessment Guide or shortly thereafter.

146 **Action Item Staff**

147 To circulate the Continuing Professional Development program to membership in Spring 2017.

149 **.04c Standards of Professional Conduct Review**

150 As approved by the Council in September 2016, the College conducted a consultation with the
 151 membership regarding the proposed changes to the *Standards of Professional Conduct 2017*
 152 with feedback requested by December 12, 2016. Approximately 230 responses were received.
 153 The Deputy Registrar provided the Council with a tracked changes version of the *Standards*
 154 showing the changes proposed by the Client Relations Committee following their review of the
 155 feedback from members. Also included in the *Standards* were examples of the *Practical*
 156 *Applications*. The Deputy Registrar explained that *Practical Applications* will be added to and
 157 revised as necessary to provide the membership with ongoing clarity regarding the *Standards*.
 158

159 There was discussion on section 4.1.1(b) with regards to supervision notes and if initials could
 160 be used in place of the names of each client. It was agreed that this would be acceptable so
 161 long as the client could be identified, if necessary. The Deputy Registrar will clarify this point
 162 with a *Practical Application*.
 163

164 **Action Item BG**

165 Clarify section 4.1.1b in the *Standards* with a *Practical Application* describing acceptable client identifiers
 166 for the supervision notes.
 167

168 There was discussion on section 4.1.3c with regards to the services that supervisees are
 169 permitted to assign. It was agreed that the wording be changed:
 170

171 From: 4.1.3(c) *such supervisee are not permitted to assign services to or to supervise another*
 172 *service provider;*
 173

174 To: 4.1.3(c) *the supervising member may not permit a supervisee to assign services to, or to*
 175 *supervise another service provider, unless the supervisee is in the process of satisfying the*
 176 *requirements to become a member of the College.*
 177

178 There was a comment with regards to a *Practical Application* in section 4.1.1 *All Supervision*
 179 that addressed employees of a member performing administrative duties such as administering
 180 tests. The Deputy Registrar noted that this *Practical Application* was intended to clarify that
 181 while tasks may be completed by non-members, the responsibility is ultimately the members to
 182 ensure that all services provided comply with the *Standards*.
 183

184 There was discussion with regards to the *Practical Application* that addressed section 7.1 *Limits*
 185 *of Confidentiality* and whether an "intake worker" or some other individual could complete
 186 confidentiality agreements on behalf of the member. It was noted that members have the
 187 authority to delegate this responsibility, but ultimately they are accountable to ensure, and must
 188 be satisfied, that the client is properly informed.
 189

190 There was discussion with regards to section 4.1.1(d) and whether maintaining supervision
 191 records for two years after the supervision has ended is sufficient. It was discussed that
 192 supervision notes are not a record of client progress but a record of the supervisory relationship.
 193 If there was a complaint about services rendered under supervision, the responsibility is that of
 194 the supervisor. It was agreed that maintaining supervision notes for two years after the
 195 supervision has ended is sufficient.
 196
 197
 198

199 **It was MOVED Delamere**
 200 **That the revised *Standards of Professional Conduct 2017* be adopted as the standards of**
 201 **the profession to be effective September 1, 2017 with the following revised amendment:**
 202 **4.1.3(c) *the supervising member may not permit a supervisee to assign services***
 203 ***to, or to supervise another service provider, unless the supervisee is in the***
 204 ***process of satisfying the requirements to become a member of the College.***

205 **CARRIED**

206
 207 **Action Item Staff**

208 To circulate the revised *Standards of Professional Conduct 2017* to membership.
 209

210 **.04d Policy II-10(ii) Conflict of Interest and Reasonable Perception of Bias (JEEC) & Staff**
 211 **and Contributors' Agreement Form**

212 The Registrar presented the Council with the proposed Policy II-10(ii): *Conflict of Interest and*
 213 *Reasonable Perception of Bias (JEEC)* from the Jurisprudence and Ethics Examination
 214 Committee. Included as well, was the corresponding *JEE Staff and Contributor's Agreement*
 215 *Form*. The Registrar explained that while College Policy I-6: *Conflict of Interest* is the
 216 overarching policy, the Jurisprudence and Ethics Examination Committee created this
 217 specifically for any staff or contributors who work on the JEE to provide additional clarity.
 218

219 **It was MOVED Minnes**

220 **That Policy II-10(ii): *Conflict of Interest and Reasonable Perception of Bias (JEEC)* and**
 221 **the corresponding *Jurisprudence and Ethics Examination (JEE) Staff and Contributors'***
 222 ***Agreement Respecting Confidentiality & Conflict of Interest* be approved. **CARRIED****
 223

224 **Action Item Staff:**

225 To incorporate the Policy II-10(ii) and corresponding agreement into the College's *Policies and Procedure*
 226 *Manual*.
 227

228 **.04f Policy II-1(i): *Executive Committee: Terms of Reference/Role***

229 The Registrar provided the Council with a revised Policy II-1(i) *Executive Committee: Terms of*
 230 *Reference/Role*. The revised role captured all of the items which had been approved in principle
 231 at the December 2016 Council meeting. In response to a question, the Registrar noted there will
 232 not be a need for housekeeping to other policies as the Committee took these into consideration
 233 while drafting the revised role.
 234

235 **It was MOVED Grand**

236 **That the proposed amendments to *Policy II-1(i): Executive Committee: Terms of***
 237 ***Reference/Role* be approved. **CARRIED****
 238

239 **Action Item Staff**

240 To amend *Policy II-1(i): Executive Committee: Terms of Reference/Role* the College's *Policies and*
 241 *Procedure Manual*.
 242

243 **.04g Bill 87**

244 The Council discussed the presentation given by Mr. Stephen Cheng of the Ministry of Health
 245 and Long-Term Care (MOHLTC) on Bill 87 at the Council Training Day on March 23rd. The
 246 Registrar informed Council that Bill 87 will go to second reading on Monday March 27th and that
 247 public hearings will be held subsequent to this. It was agreed that the Registrar would prepare a
 248 submission for the Standing Committee on the Legislative Assembly. This will be sent to
 249 members of Council for their comments and suggestions prior to submission. The Registrar will

250 send Council a copy of the previous day's presentation for their information in reviewing the
251 proposed submission.

252
253 **Action Item RM**

254 To distribute the presentation on Bill 87 to Council members, compose the College's response and
255 circulate the response to Council prior to submission

256
257 Council commented that the submission is the first step and that there should be a broader
258 generative discussion on any implications of Bill 87.

259
260 **Action Item Council**

261 To have a generative discussion on the implications of Bill 87 at the next Council meeting in June.

262
263 **.04h Enterprise Risk Management**

264 Council discussed creating a subcommittee or assigning the Executive Committee to create a
265 process for the College to assess and evaluate risk. Council directed the Registrar to gather
266 examples of Enterprise Risk Management used at other similar organizations. The Executive
267 Committee will review this information and decide if they will take on the task or assign it to a
268 subcommittee or task force.

269
270 **It was Moved Delamere**

271 **That the Registrar gather information on Enterprise Risk Management practices from**
272 **other organizations and report to the Executive Committee for further direction.**

273 **CARRIED**

274
275 **Action Item RM**

276 Gather information on Enterprise Risk Management practices from other organizations and report to the
277 Executive Committee.

278
279 **Action Item Executive Committee**

280 Discuss the next steps for Enterprise Risk Management

281
282 **.04i Shaping the Future**

283 The Council discussed the progress of the Shaping the Future Briefing Note sent to the Ministry
284 of Health and Long-Term Care (MOHLTC) in November 2016. As of this meeting there had not
285 yet been a response. It was discussed that while waiting for a response the College should
286 begin conversations on what the next steps will be. It was decided that Council will add a
287 generative discussion to be held at the next Council meeting in June 2017 on this topic.

288
289 **Action Item Council**

290 At the June 2017 meeting have a generative discussion on the next steps on the implementation to the
291 Council's March 2013 decision respecting the future of psychology regulation in Ontario.

292
293 **.04j Association of State and Provincial Boards (ASPPB) 32nd Mid-Year Meeting**

294 The Council was updated on the status of the Mid-Year ASPPB meeting being held this April in
295 Tennessee. Concerns had been raised regarding the location of the meeting as the state of
296 Tennessee recently enacted legislation that is discriminatory to the LGBT community. At the
297 direction of the Executive Committee, the Registrar wrote to the President and Executive
298 Director of ASPPB to express these concerns. The Registrar read this letter and the response
299 from ASPPB to Council. ASPPB acknowledged the concerns, indicating they had been
300 discussed at the recent meeting of the ASPPB Board of Directors which decided that, in future,

301 meetings will not be held in jurisdictions or at venues which have discriminatory policies. The
 302 Registrar has also informed Association of Canadian Psychology Regulatory Organizations
 303 (ACPRO) of these concerns and the issue will be discussed at their upcoming meeting in June.
 304

305 Council discussed whether the College should be sending representatives to the meeting in
 306 Tennessee. The Council decided that the College should not send representatives to the
 307 meeting.
 308

309 **It was MOVED Grand**

310 **That the College not send representatives to the 32nd Mid-Year meeting of ASPPB being**
 311 **held in Tennessee due to the discriminatory legislation in place in that state against the**
 312 **LGBT community. CARRIED**
 313

314 **2017.01.05 Business Issues**

315 **.05a Draft Budget 2017-2018**

316
 317 The Registrar provided to Council the draft budget for 2017-2018. This budget has been
 318 reviewed by the Finance and Audit Committee (FAC) and the Executive Committee. The
 319 Registrar reviewed the budget with the Council and responded to questions.
 320

321 The draft budget for 2017-2018 anticipates a deficit in the amount of \$36,260. This includes a
 322 projected decrease in revenue of \$81,350 reflecting the amount anticipated not to be received
 323 due to the reduction in fees to be charged for examinations and corporations as noted in
 324 agenda item 04a.
 325

326 **It was MOVED Delamere**

327 **That the Budget for 2017-2018 be approved. CARRIED**
 328

329 It was noted that the Policy III F-4: *Per Diems and Council Committee Compensation* has not
 330 been reviewed since 2013. The Council requested the Registrar do an analysis of the per diem
 331 expenses at other Colleges and report back to the next Council meeting,
 332

333 It was noted that the College can only adjust the rates for the professional members on Council
 334 as the per diems for the public members on Council are determined by the Ministry.
 335

336 **It was MOVED Grand**

337 **That an analysis of current per diem allowances and those of the other Health Regulatory**
 338 **Colleges be prepared. CARRIED**
 339

340 **Action Item RM**

341 To gather per diem information from the other Health Regulatory Colleges and report back to Council.
 342

343 **.05b Registrar's Performance Review: IN CAMERA**

344 This agenda item was discussed **IN CAMERA** in the absence of the Registrar and Recorder.
 345 The minutes for this agenda item will be provided by the President.
 346

347 **It was MOVED Gauthier**

348 **That the Council go IN CAMERA to discuss the Registrar's Performance Review. CARRIED**
 349
 350

At the end of the **IN CAMERA** meeting,

351
352 **It was MOVED Gauthier**
353 **That the IN CAMERA meeting be ended and the open meeting of Council be resumed.**
354 **CARRIED**
355

356 **2017.01.06 Other Business**

357
358 **.06a Next Meetings of Council**

-
- 359 ○ June 23, 2017
 - 360 ○ Training September 14, 2017 & Meeting September 15, 2017
- 361

362 **2017.01.07 Adjournment**

363
364 Prior to adjournment, the President presented certificates of appreciation to the following
365 Council members who are completing their terms on Council:

- 366 ○ Mr. Robert Gauthier – 9 years
 - 367 ○ Dr. Gilles Hebert – 3 years
 - 368 ○ Ms. Josie Astra Rose – 3 years
- 369

370
371 There being no further business,

372
373 **It was MOVED Gauthier**
374 **That the Council Meeting be adjourned.** **CARRIED**

375
376 The Council Meeting was adjourned at 2:53PM

377
378
379
380
381
382
383 _____
384 Lynette Eulette, Ph.D., C.Psych., President

385
386
387
388 _____
389 Ruth Berman, Ph.D., C.Psych., Vice-President

390
391 **Minutes approved at the Council Meeting on June 23rd, 2017**
392



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Action List

College Council 2017.01 – March 24, 2017

Item:	Responsibility:	Action:	Status:
2016.03.04c	Staff	During the call for Committee appointments in the spring, a letter be sent to all Psychological Associates and the OAPA	Completed
2016.03.04c	Council	Further discussion on <i>By-Law 21: Committee Composition</i> until results from the above action item have been reviewed	September Council
2016.03.04d	Council	Further discussion on amendments to <i>By-Law 20: Elections</i>	September Council
2016.04.04a	Council	Defer further consultations regarding the "Transparency Initiatives" until such a time as there is clarity regarding the Ministry's actions related to transparency proposals in Bill 87	Deferred
2016.04.04f	Staff	Take question of diversity within the profession as represented by students and the nature of services being provided to diverse populations to next meeting of the Directors of Clinical Training	On Agenda
2017.01.02e(2)	Lesia Mackanyn	To provide details on retraining plan cases in the next Committee Report to Council.	In Process
2017.01.04a	Staff	To revise College <i>By-Laws</i> to include amendments to <i>By-Law 18: Fees</i> and post on College website	Completed

Item:	Responsibility:	Action:	Status:
2017.01.04b	Barry Gang	Add a Question and Answer on what type of documentation QA Committee would expect to receive from a member who is audited for the CPD program.	Completed
2017.01.04b	Staff	To circulate the Continuing Professional Development program to membership in Spring 2017.	Completed
2017.01.04c	Barry Gang	Clarify section 4.1.1b in the <i>Standards</i> with a <i>Practical Application</i> describing acceptable client identifiers for the supervision notes.	Completed
2017.01.04c	Staff	To circulate the revised <i>Standards of Professional Conduct 2017</i> to membership.	Completed
2017.01.04d	Staff	To incorporate the Policy II-10(ii) and corresponding agreement into the College's <i>Policies and Procedure Manual</i> .	Completed
2017.01.04f	Staff	To amend <i>Policy II-1(i): Executive Committee: Terms of Reference/Role</i> the College's <i>Policies and Procedure Manual</i> .	Completed
2017.01.04g	Rick Morris	To distribute the presentation on Bill 87 to Council members, compose the Colleges response and circulate the response to Council prior to submission.	Completed
2017.01.04g	Council	To have a generative discussion on the implications of Bill 87 at the next Council meeting in June.	On Agenda

Item:	Responsibility:	Action:	Status:
2017.01.04h	Rick Morris	Gather information on Enterprise Risk Management practices from other organizations and report to the Executive Committee.	In Process
2017.01.04h	Executive Committee	Discuss the next steps for Enterprise Risk Management	In Process
2017.01.04i	Council	At the June 2017 meeting have a generative discussion on the next steps on the implementation to the Council's March 2013 decision respecting the future of psychology regulation in Ontario.	On Agenda
2017.01.05a	Rick Morris	To gather per diem information from the other Health Regulatory Colleges and report back to Council.	On Agenda



THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO

President's Report to Council

June 23, 2017

I would like to take this opportunity to update you on the various College-related activities and meetings in which I and the Executive have been involved since the March Council meeting.

On the evening of May 16, 2017, the Executive hosted a well-attended member reception in London, ON at the Delta Armouries hotel. Members provided positive feedback about the reception, and several attendees suggested using these receptions as an opportunity to provide area members with a brief update on the current work of the College. Since we had received similar feedback from members during the Sudbury reception in the fall, the Executive committed to considering how this could be done at future receptions. Given the positive feedback to the two receptions this past year, the Executive decided to continue with two out-of-town meetings and receptions for the upcoming year. These will be held in Kingston in the fall and in Waterloo in the spring.

The Executive also discussed topics for their summer training day. It was decided that the training would include further discussion and learning regarding the role of the Executive, as approved by Council this past year, Council self-assessment, and Enterprise Risk Management. All three topics are timely and relate to Council governance. As such, they are consistent with the Strategy of "Advancing the Council's governance practices" contained within our new Strategic Direction. 'Council self-assessment' is on the agenda for today's meeting as a topic for generative discussion.

Other topics of discussion at the Executive meeting included Council member per diems, *Policy II-3(ii) Release of Member's Response to the Complainant*, the Registrar's Goals for 2017-2018, a review of the College finances, considering a Committee for audit, and Bill 87. These topics are on today's agenda.

Prior to the reception in London, the Nomination and Leadership Development Committee met to consider Committee appointments for the coming year. As noted in the Registrar's Report, we were especially pleased with the very good response to the call for volunteers from our Psychological Associate members. This prompted a discussion and subsequent recommendation to the Executive about *By-law 21: Committee Composition* which is on today's agenda. The Executive will meet following today's Council meeting to finalize the Committee appointments.

The Association of Canadian Psychology Regulatory Organizations (ACPRO) met in Toronto on June 10 and 11. It was an opportunity to learn more about the challenges facing regulators across Canada and to consider how we can support one another in those challenges. Two pan-Canadian projects of note include developing a single point of entry to psychological practice in Canada for foreign-trained practitioners and the collection of consistent workforce data across jurisdictions. There was also considerable conversation about how jurisdictions are working towards the decision for a doctoral level entry-to-practice requirement.

Finally, last week I had the opportunity to participate in the College oral exams which, once again, was a rich and rewarding learning experience for me. Most significantly, it reinforced my confidence that we are registering psychological practitioners with a high level of skills and knowledge.

Respectfully submitted,
Lynette Eulette



THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO

Registrar's Report to Council June 23, 2017

ACPRO Discussion of Council Motion Regarding Attendance at ASPPB Mid-Year Meeting

As directed by Council, the motion taken at the March meeting, "that the College not send representatives to the 32 Mid-Year meeting of ASPPB being held in Tennessee due to the discriminatory legislation in place in that state against the LGBT community," was raised. The Registrar outlined the chronology of events leading up to this decision once the College became aware of this new state law. The Board of Directors of ACPRO were understanding of the position taken by the College and pleased with the action taken for future meeting planning by the Board of ASPPB. While the issue appeared to be less of a concern given human rights legislation across Canada, all agreed that ACPRO would not plan any meetings to take place in a jurisdiction or venue should there be information to suggest that discriminatory laws or practices were evident.

Registration Regulation Amendment

A conversation was held with Ms. Allison Henry, Director, Health System Labour Relations and Regulatory Policy Branch, Health Workforce Planning and Regulatory Affairs Division, Ministry of Health and Long-Term Care regarding the status of the housekeeping amendment to the Registration Regulation. This amendment pertained to section 23(1) in which the words *one of* were inserted erroneously in the description of what are actually two, non-exemptible requirements. Ms. Henry indicated that she would escalate consideration of the technical amendment with the hope that it could be processed in eight to ten weeks.

Subsequent to this conversation, a conversation was held with Mr. Stephen Cheng to answer a couple of questions he had related to the submission. In this call, it was noted that the College has received three reports from HPARB in which the question was raised as to why the Registration Committee did not consider *one of* the non-exemptible requirements sufficient to issue a candidate a Certificate of Registration for Supervised Practice. At this request, these cases were provided to him.

It is hoped that this amendment will receive approval in the very near future.

Briefing note on *Shaping the Future*

In the abovementioned conversation with Ms. Allison Henry, the status of the *Shaping the Future* Briefing Note provided to the Ministry in November 2016 was also discussed. This Briefing Note outlined the Council position as per the motion of March 2013 regarding cessation of Master's level registration. It was noted that the Council has not made any changes or taken any action related to this matter as the College has been waiting for a response from the Ministry as this would then inform next steps. While appreciating the Council's patience in waiting to hear from the Ministry she noted that with the recent and ongoing extensive work occasioned by Bill 87, this matter has not been able to move forward. She indicated that she did not anticipate any significant movement on this between now and the remainder of this year. In particular, the Ministry will need to understand the impact of the College's proposal on other Ministries and their programs.

Applied Behavioural Analysis

On June 8, 2017, the Ministry of Children and Youth Services issued a News Release announcing that, "The province is transforming the way that children and youth with autism, and their families, receive services and supports through the new Ontario Autism Program (OAP), beginning later this month." A copy is attached.

In addition to describing changes to the OAP, the Release states that:

- **Safe, effective autism services.** *The province intends to regulate ABA practitioners to help ensure families receive safe, high-quality services, have confidence in their providers and know where to go if they have a concern.*

Subsequent to the issuing of this New Release, the regulatory health Colleges and the professional associations received e-mail from Ms. Denise Cole, Assistant Deputy Minister, Health Workforce Planning & Regulatory Affairs Division, Ministry of Health and Long-Term Care which read:

Clarification - Applied Behavioural Analysts (ABA)

A short note to provide clarification on the recent media report that applied behavioural analysts (ABA) will be regulated health professionals in Ontario. The ministry is working with our colleagues in the Ministry of Children and Youth Services to ensure that Ontarians receive safe, quality ABA services and that individuals providing those services do so within an appropriate accountability framework. Please note that no decisions have been made about what that framework will be and we recognize that any scheme should be proportionate to the level of risk of harm to the public.

To assist with future decision-making, the ministry is working on a referral to HPRAC for the Minister's consideration. The referral is under development and, as usual, all colleges and associations will receive a copy of the referral after it is sent to HPRAC.

There is no further information at this time regarding the potential regulation of Applied Behavioural Analysts and any role the College may be asked to play.

Self-Assessment Guide and Professional Development Plan

The College's *Self Assessment Guide and Professional Development Plan* program has been widely discussed since its inception in the late '90's. Many experts in the field of lifelong learning such as Dr. Nadine Kaslow and Dr. Greg Neimeyer often reference it in discussing self-assessment tools available for psychological practitioners. Over the years, often at the invitation of Drs. Kaslow and Neimeyer, the College has made numerous presentations at a variety of conferences in Canada and the United States. The *Self Assessment Guide and Professional Development Plan* was the subject of a chapter in Dr. Neimeyer's book, *Continuing Professional Development and Lifelong Learning: Issues, Impacts and Outcomes* published in 2012. More recently, the program was referenced in an article on self-assessment tools and strategies, *Taking a Hard Look* authored by Rebecca Clay in the May 2017 issue of the *APA Monitor*. A copy is attached.



**NEWS**Ministry of Children and Youth Services

Ontario Transforming Autism Services for Children and Their Families

All Children and Youth with Autism Spectrum Disorder Eligible for New Ontario Autism Program

June 8, 2017 1:00 P.M.

The province is transforming the way that children and youth with autism, and their families, receive services and supports through the new Ontario Autism Program (OAP), beginning later this month.

Minister of Children and Youth Services Michael Coteau made the announcement today at the ErinoakKids Centre for Treatment and Development in Mississauga. The new OAP will ensure autism services for children and youth are delivered consistently across the province, allow for flexibility and choice based on each child's needs, and give families confidence in receiving quality services.

On June 26, families will begin to transition into the new OAP. The key components of the new program, beginning this month, include:

- **A single point of access.** There will be one entry point to the OAP in each of the nine service areas to make it easier for families to access services for their child.
- **Family-centred decision making.** As key partners in their child's care, families will be actively engaged in the assessment, goal-setting and intervention planning process for their child.
- **Collaborative approach to service.** A foundation of the new OAP will be the collaborative approach taken by community support service providers, clinicians and educators to support children's needs at home, during service and in school.
- **Service based on need.** Services will be flexible and individualized. The intensity and duration of the services a child or youth receives is based on their needs and strengths, regardless of age. Each child's service plan will be determined by clinical assessment.
- **A direct funding option.** A new direct funding option will be implemented by the end of this year. This will provide all families with a choice between receiving direct service or receiving funding to purchase their child's service.
- **Safe, effective autism services.** The province intends to regulate ABA practitioners to help ensure families receive safe, high-quality services, have confidence in their providers and know where to go if they have a concern.

The government is committed to ensuring families are supported through a smooth and seamless transition as they enter the new OAP. Transition planning within the new program will be individualized, planned in advance and will be achieved in partnership with each child's family, OAP professionals and service providers. Children and youth with a diagnosis of autism

spectrum disorder from a qualified professional will be eligible for the OAP up until the age of 18.

The province has worked closely with families, caregivers, advocates, clinicians and providers to build the new OAP, and will continue to engage with key stakeholders, including the OAP Advisory Committee, on the design and implementation of the new program. The new OAP will be fully in place by spring 2018.

QUOTES

" Our government is committed to ensuring that the new OAP will be co-ordinated, family-centered and responsive to children's unique needs, strengths and goals. I'm confident that families will be well-supported through the transition into the new program. For several months, I've worked directly with parents and caregivers to ensure this program is one that helps their child succeed and thrive. The regulation of ABA practitioners will also give families confidence in their providers and create consistent services across the province. I look forward to following young people's success through the new program."

- Michael Coteau

Minister of Children and Youth Services

" Today's announcement demonstrates a progressive approach to autism service delivery in Ontario. The Minister has taken into consideration many of the concerns raised by parents. The new Ontario Autism Program sets a new, higher standard for services for children and youth with autism. The Ontario Autism Coalition is pleased that age, severity and additional diagnoses will no longer affect eligibility for services. Regulation of behaviour analysts is another important step forward, one which was part of our original request to the government, 12 years ago. We look forward to a successful and effective implementation of the new OAP and we will continue to work with the Minister to ensure that Ontario children and youth with autism are given every opportunity to live to their full potential."

- Bruce McIntosh

OAP Advisory Committee

" With today's announcement, the Minister of Children and Youth Services has taken the first step towards an Ontario Autism Program that puts individuals and families first by ensuring that clinical decisions are based first-and-foremost, on each individual's unique needs. A commitment to pursuing the public regulation of behaviour analysts, with the necessary interim protections, helps ensure that high-quality behavioural services will be provided by appropriately qualified, regulated behaviour analytic professionals. Ontario's behaviour analysts are optimistic

about the impact this commitment can have on the lives of individuals receiving behaviour analytic services over the lifespan and across multiple service sectors."

- Louis Busch

President, Ontario Association for Behaviour Analysis

" ErinoakKids is honoured to be the site of Minister Coteau's announcement of the new OAP - a transformative program that is inclusive of all children and youth with autism, is flexible and adaptable to their unique needs, and puts parents firmly at the center of decision making regarding treatment and supports for their children. This innovative, inter-professional, collaborative approach to care is synonymous with service delivery philosophies and programming already in place at ErinoakKids. As the new OAP is implemented, we look forward to continued partnership with families, service providers and MCYS in promoting choice-based, responsive, quality services and supports to children and youth of all ages with autism."

- Bridget Fewtrell

President and CEO, ErinoakKids Centre for Treatment and Development

QUICK FACTS

- Parents can call 1-888-284-8340 toll-free for more information or to find their nearest ministry regional office.
- Minister Coteau will be hosting a tele town hall on June 27 at 5:30 p.m. to answer parents' questions. More details will be available on Ontario.ca/autism.
- The new program includes 16,000 new spaces over five years, so that more children and youth with autism can receive the services they need sooner.
- Families who are currently receiving direct funding to purchase services will continue receiving this funding until their child enters the new OAP.
- Autism or Autism Spectrum Disorder (ASD) is a lifelong, complex neurodevelopmental disorder. It is characterized by persistent deficits in social communication and interaction and repetitive behaviour. Symptoms of autism vary significantly and range in severity.
- Ontario is investing an unprecedented half-billion dollars over five years to create new services for children and youth with ASD.
- There are an estimated 40,000 children and youth in Ontario with ASD. Based on the most recent prevalence rate from the United States Centres for Disease Control and Prevention, prevalence has grown from 1 in 150 in 2002 to 1 in 68 in 2010.

LEARN MORE

- For more information, including an OAP implementation timeline, visit www.ontario.ca/autism.



TAKING A HARD LOOK

Self-assessment tools and strategies
can help practitioners ensure
they are practicing competently

BY REBECCA A. CLAY



TIAGO BALAO/ISTOCKPHOTO

Taking a Hard Look

When W. Brad Johnson, PhD, was undergoing radiation therapy, he wasn't worried about whether his medical crisis was affecting his performance as a psychology professor in the department of leadership, ethics and law at the U.S. Naval Academy.

But he should have been. ¶ "I had an inflated sense of how well I was doing," says Johnson, describing how concerns about his health blinded him to the fact that he wasn't doing his job as well as before. "Things were slipping through the cracks." ¶ That's when Johnson's closest friends in psychology stepped in to urge him to reduce his teaching load and other responsibilities. The experience underlined for him the importance of psychologists

not just assessing themselves but also of being ready to intervene when a colleague is too impaired to function effectively.

During graduate education, students have people keeping an eye on them, gauging their competence and identifying areas in need of improvement. That stops the moment you become a practitioner, says Nadine J. Kaslow, PhD, a professor of psychiatry and behavioral sciences at Emory University School of Medicine who has championed the competency-based approach to psychology training. "You have to assess yourself," she says.

Fortunately, there are tools and strategies that can help practitioners ensure they are practicing competently, including the College of Psychologists of Ontario Self-Assessment Guide and Professional Development

Plan, APA's Competency Benchmarks for Professional Practice, 360-degree evaluations or some combination of these. And APA's Advisory Committee on Colleague Assistance has suggestions for what to do when it's a fellow practitioner who is falling short.

SELF-ASSESSMENT STRATEGIES

For Kaslow, self-assessment is something she typically does during a quiet period of self-reflection at year's end. Often working with a colleague from what she calls her "inner core" to help ensure an accurate analysis, Kaslow takes stock of where she is, where her skills have grown rusty and what she needs to work on. She then sets goals for the coming year, outlines a plan for achieving them and reviews

her progress each quarter. But there are other, more structured methods of self-assessment psychologists can use, including:

■ **The College of Psychologists of Ontario Self-Assessment Guide and Professional Development Plan.** The college, a regulatory body that ensures competent, ethical psychological services, launched its self-assessment program in 1999 "to help members undertake an honest, personal assessment of strengths, weaknesses and any gaps in their current level of knowledge and skill," says Rick Morris, PhD, the college's registrar and executive director. While the self-assessment program is designed for use by the college's members, anyone can download the forms and go through the process themselves (see "Resources").

The first part of the Self-Assessment Guide asks users about their familiarity with legislation, standards, codes and guidelines. The second asks them to assess their competence in such areas as service to clients, supervision, teaching and research and then come up with a professional development plan. Members must complete the self-assessment every other year.

The finished self-assessment is strictly for members' own use as a self-improvement tool, but the college does want to make sure people actually go through the process. That's why members are required to send back a form attesting that they have completed the self-assessment, even though they don't have to submit the finished product to the college. "We know from

consultations we've done and just common sense that when people are filling out evaluations of themselves and sending them to a regulatory body, they may not be as frank with themselves or the college as they might be," says Morris, adding that the college expects 100 percent compliance. If members fail to submit the attestation form after several reminders, the college requires them to send in their completed plans so that the college's Quality Assurance Committee can review them and provide feedback; the college also randomly selects members to undergo "peer-assisted reviews" in which two peers review the member's practice and progress on his or her professional development plan.

■ **Competency Benchmarks.** APA's Competency Benchmarks lay out the core competencies

students need to tackle before they are ready to enter practice. While the benchmarks aren't in widespread use as a self-assessment tool for those already in practice, they could be a helpful resource for that group, too, says Rebecca Schwartz-Mette, PhD, an assistant professor of psychology at the University of Maine in Orono. "It makes sense," she says. "If this is what we expect of entry-level practitioners, it could also be used as a benchmark for maintaining competence across the spectrum."

■ **360-degree evaluations.** While assessing yourself is important, it's not enough, says psychologist Jac J. W. Andrews, PhD, who has researched 360-degree evaluations—also known as multi-source feedback—and called for psychologists to make this strategy's use as common

as it is with other health-care professionals. "We know that self-reflection isn't always consistent with reality," says Andrews, who chairs the school and applied child psychology department at the University of Calgary.

Self-assessment involves self-reflection and evaluation of professional strengths and limitations in functional and foundational domains and decisions about how to address developmental needs, Andrews points out. But, he says, "a major problem with self-assessment as an approach for evaluating competence is that very few self-assessment measures have established adequate psychometric properties, and they tend not to correlate well with ratings by peers or supervisors or with measures of performance."

Using well-constructed instruments, multi-source assessment incorporates self-assessment along with assessments from peers, co-workers and clients or patients, who provide information about such areas as clinical competence, professionalism, case management, interpersonal relations and communication. What's most useful about 360-degree evaluations is the chance to compare feedback from different sources, says Andrews, explaining that psychologists should analyze where there's agreement and disagreement among reviewers and between others' perceptions and their own.

This approach offers a chance to identify psychologists' strengths and weaknesses in

RESOURCES

Assessing Psychologists in Practice: Lessons From the Health Professions Using Multisource Feedback

Andrews, J.W., et al. *Professional Psychology: Research and Practice*, 2013

College of Psychologists of Ontario Self-Assessment Guide and Professional Development Plan

www.cpo.on.ca/Self-Assessment_and_Professional_Development_Plan.aspx

APA's Benchmark Evaluation System

www.apa.org/ed/graduate/benchmarks-evaluation-system.aspx



THE BEST ASSESSMENTS ARE THOSE IN WHICH PSYCHOLOGISTS LOOK AT THEMSELVES, AS WELL AS GATHER FEEDBACK FROM PEERS, CO-WORKERS AND CLIENTS OR PATIENTS.

Taking a Hard Look

core competencies and provide useful feedback for professional development and enrichment, says Andrews. It could also increase psychology's accountability to the public, he adds. Consumers would see that psychologists are keeping up with their competencies and being judged by themselves and others as being competent, he says. National, provincial and state psychology associations as well as provincial and statewide psychology regulatory boards could even use information from multi-source feedback for oversight and governance of professional psychology, he points out.

ENLISTING YOUR COLLEAGUES

Another problem with self-assessment is that the psychologists who need it the most may be the ones least likely to



EVERY PSYCHOLOGIST NEEDS A GROUP OF CLOSE COLLEAGUES WHO CAN HELP MONITOR THEM. “THEY’RE THE VERY FIRST FOLKS TO RECOGNIZE WHEN WE’RE GETTING INTO TROUBLE OR HAVING A HARD TIME,” SAYS W. BRAD JOHNSON, PHD.

do it. That's why you need a group of close colleagues who can monitor you, says Johnson. “A competence constellation is a deliberately created network of colleagues whom we stay in very close connection with,” says Johnson, who laid out the idea of a communitarian approach to training in a 2014 paper with Kaslow, Schwartz-Mette and others in *Training and Education in Professional Psychology*. “They're the very first folks to recognize when we're getting into trouble or having a hard time.”

How can practitioners invite what Johnson calls “intrusive collegiality” into their professional lives? For a solo practitioner, Johnson says, the people keeping an eye on you could consist of a personal psychotherapist, a consultation group or a close group of colleagues—anyone you've got a

TOMM LUSTOCK/PHOTO

ARE PRACTITIONERS BECOMING MORE ETHICAL?

The results of research presented at APA's 2016 Annual Convention suggest that today's practitioners are less likely to commit such ethical violations as kissing a client, altering diagnoses to meet insurance criteria and treating homosexuality as pathological than their counterparts 30 years ago.

The research, conducted by psychologists Rebecca Schwartz-Mette, PhD, of the University of Maine at Orono and David S. Shen-Miller, PhD, of Bastyr University, replicated a 1987 study by Kenneth Pope, PhD, and

colleagues published in the *American Psychologist*. Schwartz-Mette and Shen-Miller asked 453 practicing psychologists the same 83 questions posed to practitioners three decades ago.

The items included clear ethical violations, such as having sex with a client or supervisee. But they also included behaviors that could reasonably be construed as ethical, such as breaking confidentiality to report child abuse; behaviors that are ambiguous or not specifically prohibited, such as lending money to a client; and even some that don't seem controversial,

such as shaking hands with a client. “Interestingly, 75 percent of the items from the Pope study were rated as less ethical in our study, suggesting a more general trend toward conservatism in multiple areas,” says Schwartz-Mette.

Participants were especially likely to rate what Schwartz-Mette calls “gray area issues” as less ethical than their counterparts from the 1987 study. Examples of these areas now deemed less ethical include becoming friends with a former client, accepting goods or services in lieu of fees, providing therapy to students or supervisees,

close enough relationship with that they're willing to give you difficult feedback if necessary. Johnson, for example, breakfasts regularly with a colleague who monitors whether Johnson is indulging in his bad habit of taking on too much.

You can and should consider intervening by sharing your observations and concerns, even if you're not especially close to a fellow practitioner, says Erica H. Wise, PhD, a past chair of APA's Advisory Committee on Colleague Assistance. Such conversations can be awkward, especially if you're not sure a colleague is engaging in professional behavior that falls below standards of competence, says Wise, who directs the psychology clinic at the University of North Carolina at Chapel Hill.

Situations can be ambiguous, Wise says, and APA's Ethics Code gives little guidance if

a situation doesn't involve an actual ethical violation. For example, while the Ethics Code calls for refraining from activities when personal problems prevent a psychologist from providing services competently, says Wise, it can be hard to know where the cutoff is for yourself and even more so for others.

That said, there's plenty practitioners can do when they're concerned about a colleague, says Wise. Practitioners should think carefully about what their concern is and what they actually know, then find a time to talk to the person. "Use 'I' statements: Say 'This is what I'm noticing, why it concerns me and what I think we need to do about it,'" says Wise, adding that some state psychological associations have colleague assistance programs that can help. "It should be presented as

● **APA's Advisory Committee on Colleague Assistance** has developed several resources on psychologist wellness. Access them at www.apa.org/practice/resources/assistance/index.aspx.

concern, not 'I think you're not OK,'" she says.

Of course, she adds, when a psychologist is aware that a colleague has engaged in behavior that is clearly unethical or harmful, the best approach is to consult with the state psychology board about making a report.

Wise and others believe that this communitarian approach to competence should be ingrained in the Ethics Code, which will undergo revision in 2017. In the meantime, says Schwartz-Mette, it's important to remember that self-assessment is meant to help practitioners improve, not to be punitive.

"We don't want to stigmatize individuals who are struggling," says Schwartz-Mette, noting that there will always be times in your career when you fall short. "There are always ways to seek and get support to improve functioning if need be." ■

hugging clients and charging for missed appointments.

There were generational differences within the new study, too, adds Schwartz-Mette. Practitioners within 10 years of receiving their professional degrees were more likely to rate items as unethical than practitioners who received their degrees more than 21 years earlier when it came to such areas as managing practice-related finances and managing boundaries with clients. The early-career psychologists were more likely to think that allowing a client to run up a large unpaid bill or

THE PERCENTAGE OF MEMBERS WITH COMPLAINTS FILED AGAINST THEM HAS STAYED STEADY AT LESS THAN 1 PERCENT PER YEAR.

attending a client's social event was unethical, for example. "It could be that these participants were fresh out of training and so more careful," says Schwartz-Mette.

Meanwhile, APA's Ethics Code has

evolved since Pope's original survey and now explicitly addresses some of the unethical behaviors in the survey, such as terminating therapy if a client can't pay and limiting treatment notes to name, date and fee.

The good news is that even though some psychologists may overstep ethical boundaries, it's not often. The percentage of members with complaints filed against them has stayed steady at less than 1 percent per year over the last two decades, according to Lindsay Childress-Beatty, JD, PhD, of APA's Ethics Office. —*Rebecca A. Clay*



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Finance and Audit Committee Report to Council

June 23, 2017

Committee Members:

Lynette Eulette (Chair)	Council	Peter Farvolden	College
D'Arcy Delamere	Public Member	Gilles Hébert	Council

The Committee met by teleconference on May 4, 2017 and reviewed the College's Financial Statements to February 28, 2017, the end of the third quarter.

The *Statement of Revenue & Expenses* (attached) provides a summary of the College's revenues and expenditures by cost centre with a comparison to the 2016-2017 budget approved in March 2016. In addition, projected spending to May 31, 2017 is shown. The approved budget had anticipated a deficit of \$254,276 at the end of the third quarter. Due to increased revenue and decreased spending, the surplus to budget is \$144,260 with a year-end projected Excess of Revenue over Expenses of approximately \$147,200.

In considering the *Statement of Revenue & Expenses* the Finance and Audit Committee reviewed the *Variance Report* which set out the items which deviated by the level of materiality set by Council; that is items where expenditures exceeded expected budget by \$5,000 and the items which were underspent by \$10,000 to expected budget. The Finance and Audit Committee was satisfied with the explanations presented for these over or under expenditures.

The Finance and Audit Committee reviewed the *Balance Sheet* (attached), showing the College's current assets and liabilities, presents the position of the College at the end of nine months as compared to last year at nine months. As noted in the line *Profit (loss) for period* (2nd line from bottom), overall earnings exceeded expenses by approximately \$144,363 for the period ending February 28, 2017.

In addition, the Committee reviewed the *Investment Report to February 28, 2017* which describes the College's various investments including Cash Equivalents and Short and Long Term Investments. Given the continuing low interest rates, it was noted that most of the College assets are invested in shorter term instruments. Should interest rates rise, the College would be in a position to take advantage of the improved investment environment.

The Finance and Audit Committee voted to receive the financial reports and noted that based on the documents reviewed, it is the view of the committee that the College continues to operate on a sound financial basis.

The Registrar provided the Committee with an update regarding a meeting held with representatives from the TD Bank regarding investment opportunities. The Registrar and the Manager, Administration undertook to prepare some financial information for discussion with the TD representatives following which they will present a suggested investment plan. Another meeting will be scheduled and Mr. D'Arcy Delamere, Public Member of Council, has agreed to attend.

The memorandum confirming the remittances of Taxes to Canada Revenue Agency and the Ontario Employer Health Tax for the period December 1, 2016 to February 28, 2017 was received.

THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
STATEMENT OF REVENUE & EXPENSES
9 Periods Ended 28/02/2017

	2016-2017 Budget	Budget YTD	2016-2017 YTD	2016-2017 % To Date	Expected % To Date	% Variance	\$ Variance	Year-End 31/May/17
REVENUE	3,252,029	2,464,522	2,529,515	78%	76%	3%	64,993	3,332,929
COST OF SALES	273,700	245,000	247,737	91%	90%	1%	2,737	272,550
GROSS MARGIN	2,978,329	2,219,522	2,281,778	77%	75%	3%	62,256	3,060,379
EXPENDITURES:								
Governance	119,600	84,200	56,806	47%	70%	-33%	-27,394	82,540
Registration	101,400	76,050	48,358	48%	75%	-36%	-27,692	101,400
Client Relations, Communications & Education	88,900	65,425	27,821	31%	74%	-57%	-37,604	38,410
Quality assurance	25,400	19,050	25,370	100%	75%	33%	6,320	35,600
Investigations and resolutions	104,300	79,925	87,239	84%	77%	9%	7,314	116,075
Hearings	281,400	211,050	107,934	38%	75%	-49%	-103,116	162,550
Government relations	0	-	-		-			0
Liaison (Professional Organizations)	38,700	30,050	22,382	58%	76%	-26%	-7,668	31,685
Administration	2,544,063	1,908,047	1,761,608	69%	75%	-8%	-146,439	2,344,850
Total Expenditures	3,303,763	2,473,797	2,137,518	65%	75%	-14%	-336,279	2,913,110
EXCESS OF REVENUE OVER EXPENDITURES	-325,434	(254,276)	144,260	-44%		-157%	398,535	147,269

THE COLLEGE OF PSYCHOLOGISTS

Balance Sheet
As Of February 28, 2017

Unaudited

<u>ASSETS</u>	Current Year	Prior Year
Current assets:		
Petty Cash	200.00	200.00
Bank	589,723.67	409,426.10
Cash Equivalents	404,652.96	3,284,122.98
Short Term Investments	5,161,806.86	2,070,211.24
Accounts Receivable Control	14,154.72	10,126.85
Interest Receivable	3,833.52	3,211.23
Prepaid Expenses	31,476.49	93,952.60
Total current assets	6,205,848.22	5,871,251.00
Fixed assets:		
Furniture & Equipment	51,385.55	51,385.55
Computer Equipment	63,416.24	58,468.57
Leasehold Improvements	197,547.38	197,547.38
Website & Database Development	264,257.85	159,577.92
Less accumulated depreciation	409,514.73	290,358.70
	167,092.29	176,620.72
Other assets:		
Long Term Investment	462,424.45	504,236.58
	462,424.45	504,236.58
	6,835,364.96	6,552,108.30
<u>LIABILITY AND SHAREHOLDER'S EQUITY</u>		
Current liabilities:		
Accounts Payable Control	56,266.86	54,014.38
Accounts Payable Other	182,201.31	137,032.05
Employee Tax Deductions Payab	19,961.38	19,668.72
Prepaid Fees	796,816.20	766,419.97
Total current liabilities	1,055,245.75	977,135.12
Long term liabilities:		
	0.00	0.00
Shareholder's equity:		
Retained Earnings	2,259,273.02	2,048,287.58
Investigations & Hearings Reserve Fund	748,672.00	748,672.00
Contingency Reserve Fund	979,000.00	979,000.00
Fee Stabilization Reserve Fund	1,075,000.00	1,075,000.00
Website & Database Development Reserve Fund	243,810.25	243,810.25
Premises Reserve Fund	250,000.00	152,453.00
Fair Registration Practices Reserve Fund	80,000.00	80,000.00
Profit (loss) for period	144,363.94	247,750.35
Total shareholder's equity	5,780,119.21	5,574,973.18
	6,835,364.96	6,552,108.30



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Staff Presentations - Report to Council

March 24, 2017 to June 23rd, 2017

Dr. Rick Morris, Registrar & Executive Director

- April 10, 2017: *Registration with the College of Psychologists*, York University, Toronto
- May 12, 2017: *College Update on Current Initiatives*, Association of Ontario Psychology Chiefs of School Boards, Barrie
- June 8, 2017: *Hospital Psychologists and Scope of Practice: Workshop* - Panelist, Canadian Psychological Association Convention, Toronto
- June 14, 2017: *Oral Examiners Briefing*, June Oral Examinations, Toronto

Mr. Barry Gang, Deputy Registrar/Director, Professional Affairs

- May 1, 2017: Northern Ontario Psychology Internship Consortium, Thunder Bay



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Discipline Committee Report to Council

Fourth Quarter, March 1, 2017 – May 31, 2017

Committee Members:

Robert Gauthier (Chair)	Council	Tim Hill	College
Ruth Berman	Council	Gilles Hébert	Council
Kristin Bisbee	Public Member	Elizabeth Levin	Council
Clarissa Bush	College	Maggie Mamen	College
Judy Cohen	Public Member	Donna McNicol	Public Member
Dorothy Cotton	Council	Denise Milovan	Council
D'Arcy Delamere	Public Member	Patricia Minnes	Council
Lynette Eulette	Council	Mary Ann Mountain	College
Michael Grand	Council	Donna Reist	College
Allyson Harrison	College	Josie Rose	Public Member
Jaffar Mohammad Hayat	Public Member	Ethel Teitelbaum	Public Member
Jan Heney	College	Pamela Wilansky	College

There were three referrals made to the Discipline Committee in the 4th Quarter, two of which are at the Pre-Hearing Conference stage and one at the Notice of Hearing stage. In addition, a matter referred to the Discipline Committee in the 3rd Quarter is at the Pre-Hearing Conference stage as well. The Notices of Hearing for all matters currently before the Discipline Committee are available here:

https://members.cpo.on.ca/public_register/show/21428?section=discipline#ui-tabs-12

https://members.cpo.on.ca/public_register/show/2302?section=discipline#ui-tabs-12

https://members.cpo.on.ca/public_register/show/20259?section=discipline#ui-tabs-12

https://members.cpo.on.ca/public_register/show/914?section=discipline#ui-tabs-12

No hearings took place during this quarter, however two Pre-Hearings are scheduled for June 28, 2017 and another Pre-Hearing is scheduled for July 25, 2017.

Respectfully submitted,

Robert Gauthier, M. Sc., M.Ed., C.Psych.Assoc.
Discipline Committee Chair
June 9, 2017



THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO

Inquiries, Complaints and Reports Committee Report to Council

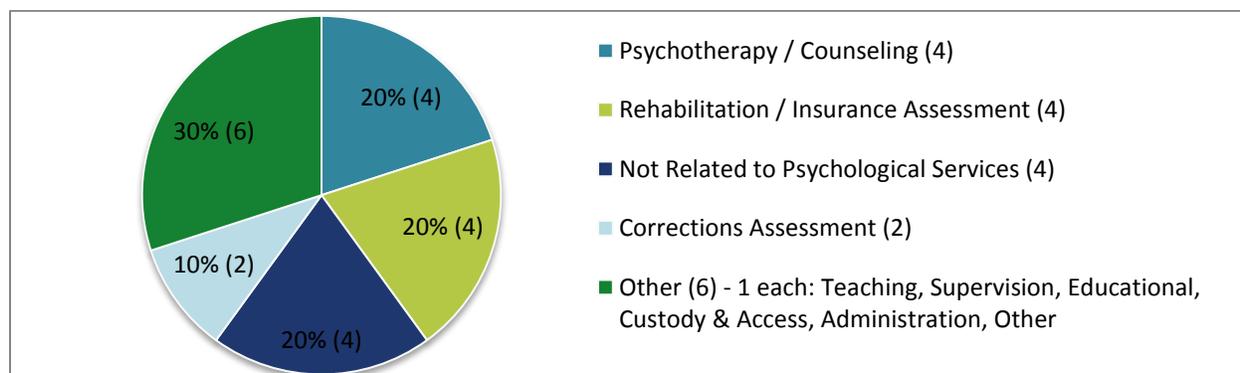
Fourth Quarter, March 1, 2017 to May 31, 2017

Committee Members:

Sara Hagstrom (Chair)	College	D'Arcy Delamere	Public Member
Diane Addie	College	Elizabeth Levin	Council
Ruth Berman	Council	Donna McNicol	Public Member
Kristin Bisbee	Public Member	Debbie Nifakis	College
Gilles Boulais	College	David Smith	College
Ian Brown	College	Ethel Teitelbaum	Public Member
Judy Cohen	Public Member	Glenn Webster	College
Dorothy Cotton	Council		

New Complaints and Reports

In the 4th Quarter, the College received 16 new complaints and opened four new Registrar's Investigation, for a total of 20 new matters.



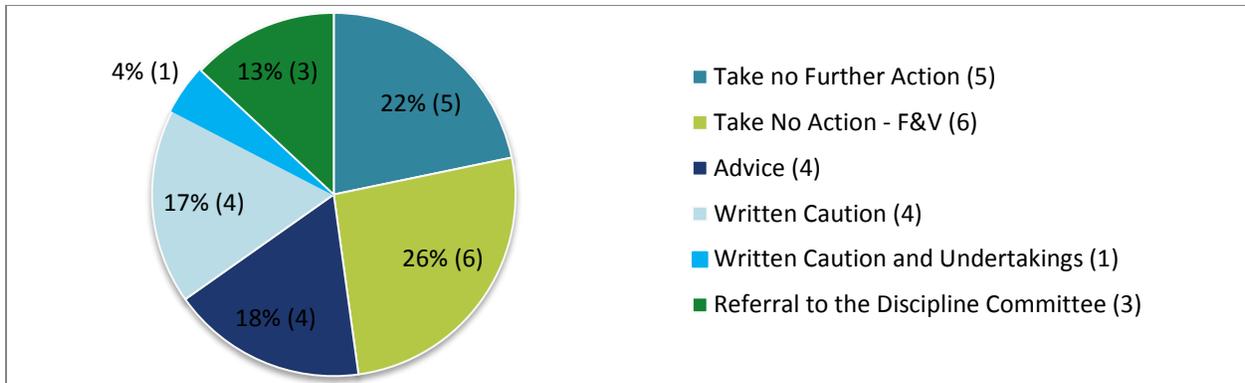
Four of these matters were not related to psychological services while four each arose from psychotherapy/counselling services and rehabilitation/insurance assessments. An additional two matters related to corrections assessments, and one matter arose in each of the following areas: Teaching, Supervision, Educational Assessments, Custody & Access/Child Welfare Assessments, Administration, and Other Psychological Assessments.

ICRC Meetings

The ICRC met on April 25, 2017, and a total of 6 cases were considered. In addition, 20 teleconferences were held to consider 26 cases. The next ICRC meeting will take place on June 13, 2017, with 7 cases scheduled to be considered.

ICRC Dispositions

The ICRC disposed of 23 cases during the 4th Quarter. The ICRC decided to take no further action in five of these cases. In an additional six cases, the ICRC decided to take no further action pursuant to section 26(5) of the Health Professions Procedural Code, believing these complaints to be frivolous, vexatious, made in bad faith, moot, or otherwise an abuse of process.



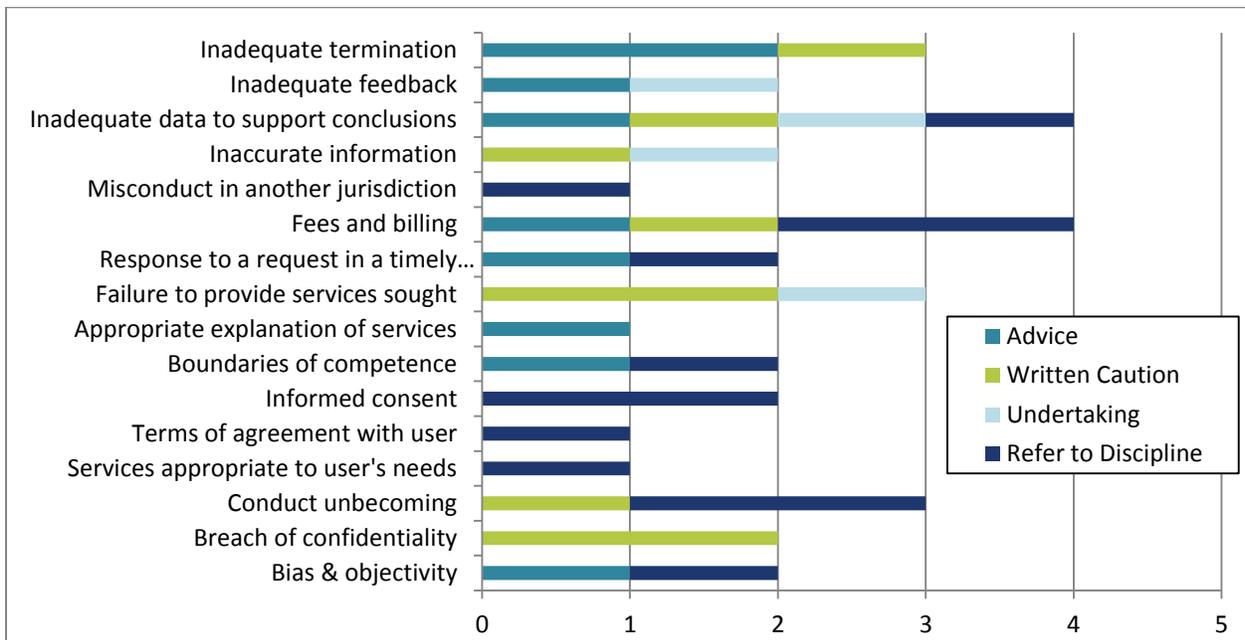
Of the remaining 12 cases, the ICRC decided to provide Advice in four and Written Cautions in five. One matter with a Written Caution also included an Undertaking between the member and the College for remedial purposes. The ICRC decided to refer three matters to the Discipline Committee.

Disposition of Allegations

In the 4th Quarter, the 23 cases disposed of included the consideration of 67 allegations.

The most common allegations were: inadequate data to support conclusions (7); bias and lack of objectivity (6); false or misleading statements (6); conduct unbecoming a member of the CPO (6); fees and billing problems (5); inadequate handling of termination (4); breach of confidentiality (3); failure to obtain informed consent (3); failure to practice within boundaries of competence (3); and failure to respond to a request in a timely manner (3).

The ICRC provided Advice with respect to nine allegations and Written Cautions with respect to nine allegations. Undertakings were agreed to with respect to three allegations associated with Written Cautions, and one allegation associated with Advice. 13 allegations were referred to the Discipline Committee. The substance of these allegations is illustrated below.



Health Professions Appeal and Review Board (“HPARB”)

In the 4th Quarter, five ICRC decisions were appealed to HPARB. Six HPARB appeals were also concluded in this quarter. Three ICRC decisions were confirmed and one decision was sent back for additional investigation. HPARB decided not to proceed with one matter, and dismissed another for being frivolous, vexatious, made in bad faith, moot or otherwise an abuse of process. Finally, one appeal was withdrawn by the person who requested the appeal.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Sara Hagstrom", written in a cursive style.

Sara Hagstrom, Ph.D., C.Psych.
Chair : Inquiries, Complaints and Reports Committee
June 7, 2017

New Matters, by Case Type**YTD**

	Q1	Q2	Q3	Q4	Current	Previous
Complaints	16	16	16	16	64	66
Registrar's Investigations	2		1	4	7	1
Health Inquiries	0		1		1	3
Total	18	16	18	20	72	70

New Matters Investigated, by Nature of Service**YTD**

	Q1	Q2	Q3	Q4	Current	Previous
Administration	2		2	1	5	
Capacity Assessment		1			1	1
Consultation					0	1
Corrections Assessment				2	2	1
Custody & Access / Child Welfare Assessment	2	1		1	4	13
Educational Assessment	3	1		1	5	7
Industrial / Occupational Assessment	1				1	2
Mediation					0	
Neuropsychological Assessment	1	3			4	
Not applicable / incapacity			1		1	3
Not Related to Psychological Services	3	2	2	4	11	4
Other Psychological Assessment				1	1	
Psychotherapy / Counseling	2	7	7	4	20	18
Rehabilitation / Insurance Assessment	4	1	4	4	13	10
Sexual Abuse Assessment						1
Supervision			1	1	2	4
Teaching / Training				1	1	3
Unknown			1		1	2
Total:	18	16	18	20	72	70

Health Professions Appeal and Review Board**YTD**

	Q1	Q2	Q3	Q4	Current	Previous
Reviews Requested	2	2	4	5	13	19

YTD

	Q1	Q2	Q3	Q4	Current	Previous
Decision Confirmed	2	1	3	3	9	11
HPARB F&V				1	1	1
Inadequate Investigation				1	1	2
Notice to not Proceed	1				1	1
Withdrawn				1	1	4
Total:	3	1	3	6	13	19

Dispositions by Case

	YTD					
	Q1	Q2	Q3	Q4	Current	Previous
Complaint Withdrawn		1			1	
Closed – no jurisdiction					0	
In Abeyance					0	
Incapacity Investigation					0	
Other – Advice	3	2	5	4	14	15
Other - Advice with Undertaking					0	
Other - Take no Further Action	2	8	11	5	26	30
Other - Take no Further Action and Undertakings					0	
Other - Oral Caution					0	2
Other - Oral Caution and Undertakings					0	1
Other - Undertaking (Health Inquiry)	1				1	
Other - Oral Caution and SCERP*					0	1
Other - Written Caution	2		3	4	9	14
Other - Written Caution and Undertakings	1			1	2	2
Other - Written Caution and SCERP*	1	1			2	5
Referral to the Discipline Committee	1		1	3	5	
Take No Action, if Complaint Frivolous, Vexatious, Made in Bad Faith, Moot or otherwise an Abuse of Process	1	1	4	6	12	17
Total:	12	13	24	23	72	87

*Specified Continuing Education or Remedial Program

	Withdrawal	Take No Further Action F&V	Take No Further Action	Advice	Advice with UT	Written Caution	Written Caution & UT	Oral Caution	Oral Caution & UT	Oral Caution & SCERP*	Written Caution & SCERP*	SCERP*	Refer to Discipline
Inaccurate information		1	3				1						
Inadequate data to support conclusions		3	10	3		2	1						1
Inadequate feedback					1								
Inadequate handling of termination			2	2		2							
Inappropriate advertising and announcements													
Inappropriate conduct toward a colleague		1											
Inappropriate conduct toward a student													
Inappropriate conduct toward an employee			1										
Incapacity			1										
Incompetence		1	3										
Insensitive treatment of clients			3										
Lack of adherence to undertaking or agreement													
Lack of objectivity		1	1			1							
Misrepresentation of Non-Member													1
Non-Sexual Abuse													
Problematic statements made at trial													
Providing services while impaired		1											
Quality of services			1										
Record keeping Problems			2										1
Sexual abuse			1										
Sexual harassment		1	1										
Sexual misconduct			1										
Unauthorized Services			1										

*Specified Continuing Education or Remedial Program



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Quality Assurance Committee Report to Council

Fourth Quarter, March 1, 2017 – May 31, 2017

Committee Members:

Donna Ferguson (Chair)	College
Judy Cohen	Public Member
Agnieszka Gajdzis	College
Elizabeth Levin	Council
Patricia Minnes	Council

The Committee met by teleconference on May 8, 2017.

Peer Assisted Review (PAR)

Of the 30 Peer Assisted Reviews scheduled to take place in 2016-17, 21 have been completed. Four reviews were deferred due to exceptional circumstances. The remaining 5 reviews are currently in progress.

At the May 8, 2017 meeting, the Committee decided to implement the following eligibility criteria for Peer Assisted Reviewers:

- Desire to assist peers to help improve and enhance their practices
- Strong sense of professional responsibility and commitment to peer support
- Strong knowledge of the relevant standards, legislation, policies and guidelines
- Registration for Autonomous Practice for at least five years and currently in practice
- Not in a conflict of interest or in a relationship within which there is a power imbalance with respect to the person being reviewed;
- Not currently a member of Council or a College Committee; and
- Not currently involved in an ICRC investigation or Disciplinary process

Because some of the exclusionary criteria are related to sensitive information, potential reviewers are not expected to provide reasons for declining an invitation to become a reviewer.

Mandatory Continuing Professional Development

At its last meeting, the Council approved distribution of the Mandatory Continuing Professional Development (CPD) program. The first two year CPD cycle for members with “odd” registration numbers begins this summer, with the first Declaration of Completion due in the summer of 2019. Those with even registration numbers will begin the two year cycle at the time that they complete the Self-Assessment Guide (SAG) in 2018.

Donna Ferguson
Chair: Quality Assurance Committee
June 13, 2017



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Client Relations Committee Report to Council

Fourth Quarter, March 1, 2017 – May 31, 2017

Committee Members:

Francine R. Layton (Chair)	College
Kristin Bisbee	Public Member
Jaffar Hayat	Public Member
Gilles Hébert	Council
Denise Milovan	Council
Leah Stein-Sagi	College

The Client Relations Committee has not met since the last report to Council.

Funding for Clients Who Have Been Sexually Abused by Members

At this time, there are three individuals who have been deemed eligible and are receiving funding in relation to sexual abuse by members. There have been no requests for funding since the last Council meeting.

Respectfully submitted,

Francine Roussy Layton (Chair)

June 5, 2017



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Briefing Note – June 2017 Council Meeting

Policy II-3(ii) Release of Member's Response to the Complainant

Strategic Direction Reflection

Acting in a responsibly transparent manner; Communicating clearly and effectively with stakeholders, particularly applicants, members and the public

Motion for Consideration

That amendments to *Policy II-3(ii) Release of Member's Response to the Complainant* be approved.

Background

In April 2017, the Inquiries, Complaints and Reports Committee (ICRC) reviewed *Policy II-3(ii) Release of Member's Response to the Complainant*. This policy sets out the procedure for, and provides guidance regarding, the decision to release some or all of the member's response to the complainant. The ICRC proposed some amendments:

1. That the decision regarding release of the member's response to the complainant will be made by a panel of the ICRC, rather than solely by the Chair as is currently the practice.
2. Reordering the procedures such that the considerations for disclosing or withholding some or all of the response will be more central. This is now the new section 3.
3. Currently, the policy indicates that, (5.) the College will accept *new* information from the complainant after receiving the member's response, within 30 days. To expedite the handling of complaints, the practice has been to indicate that such information is due within 14 days, while making provisions for extensions, if necessary. The amended policy would formalize this practice within the new section 5.
4. Some wording changes of a housekeeping nature.

The proposed amendments were reviewed by the Executive Committee which was in favour of the proposals but with an addition. In reviewing the factors to be considered by the panel in making its decision, the Executive suggested that the new section 3 be amended such that, in addition to possible prejudice to persons "involved in a criminal or in a civil suit proceeding", consideration be given to "family law" matters. This was added within the second paragraph of the new section 3. With this additional change, the Executive Committee voted to recommend the amended policy to Council for consideration and approval.

A "tracked changes" version of *Policy II-3(ii) Release of Member's Response to the Complainant* showing the proposed amendments is attached.

Budgetary Implications

The amended proposed policy requires that a panel of the ICRC be convened to determine what parts of the member's response, if any, should not be disclosed. It is anticipated that this will be done primarily by teleconference unless there is a scheduled ICRC meeting about to occur. It is impossible to predict

how often a panel will be called upon to make this decision in future but, in the past year, nine such requests were made. Per diems for professional member are the only expense that would be incurred. Considering the same number of requests going forward, the annual per diem costs would be approximately \$2200 (3 panel members @ \$81.25 per teleconference X 9 teleconferences).

Contact for Questions

Dr. Rick Morris, Registrar & Executive Director

College of Psychologists Policy and Procedure Manual			
SECTION: COUNCIL and COMMITTEES			POLICY #: II – 3(ii)
POLICY: Release of the Member's Response to the Complainant		COVERAGE: Inquiries, Complaints and Reports Committee	
CREATED: June 2000	REVISED: December 2007, June 2009 2017	NEXT REVIEW: 2014/2015 2020/2021	PAGE #: 1 of 2

POLICY STATEMENT:

The member's response to a complaint shall ordinarily be provided to the complainant by the College, however the member's clinical records and other documentation will not be released.

BACKGROUND:

Pursuant to the direction of the *Health Professions Appeal and Review Board* and in response to concerns raised by members of the public, the College Council ~~created~~ ~~reviewed the~~ policy on the release of the member's response to the complainant in June 2000.

PROCEDURE:

1. The College shall advise a member against whom there is a complaint that if the member has reason to believe that disclosure of his/her response to a complaint could result in harm to the complainant or any other person, the member should raise these concerns in writing, provide his/her opinion and reasons as to why all or part of the response should not be ~~withheld from~~ disclosed to the complainant.
2. When the disclosure of a member's response is at issue, a panel of the Inquiries, Complaints and Reports Committee will be convened to determine whether all or part of a member's response should not be disclosed to the complainant.
3. The ~~College-panel~~ will weigh the member's arguments against the advantages of releasing the response and make a decision regarding disclosure of the member's response to the complainant. In making this decision, the panel may take guidance from s.32(3) of the Health Professions Procedural Code (Code), being Schedule 2 to the Regulated Health Professions Act, 1991, in assessing whether releasing the member's response could result in harm to the complainant or any other person. Section 32(3) of the Code provides the Health Professions Appeal and Review Board (HPARB) with authority to refuse to disclose anything in the complaint file that may, in HPARB's opinion:
 - a) disclose matters involving public security;
 - b) undermine the integrity of the complaint investigation and review process;
 - c) disclose financial or personal or other matters of such a nature that the desirability of avoiding their disclosure in the interest of any person affected or in the public interest outweighs the desirability of adhering to the principle that disclosure be made;
 - d) prejudice a person involved in a criminal or in a civil suit or proceeding; or
 - e) jeopardize the safety of any person.

The College however, is not restricted to those situations identified in s.32(3) of the Code, and may consider any other circumstance, such as one which may prejudice a person involved in a family law matter, in which harm may be caused by the release of the member's response.

College of Psychologists Policy and Procedure Manual			
SECTION: COUNCIL and COMMITTEES			POLICY #: II – 3(ii)
POLICY: Release of the Member’s Response to the Complainant		COVERAGE: Inquiries, Complaints and Reports Committee	
CREATED: June 2000	REVISED: December 2007, June 2009 <u>2017</u>	NEXT REVIEW: 2014/2015 <u>2020/2021</u>	PAGE #: 2 of 2

~~2.4.~~ The member will be advised that if the complainant is not a client of the member (or the parent, legal guardian, or legal representative of the client), the College will not include any information that would violate the confidentiality of the client, in the disclosure of the member’s response to the complainant. For example, in a case where an individual has concerns about services received by a spouse or an adult child, they may choose to lodge a complaint. In such a situation, the complainant would be entitled to receive only those parts of the member’s response that do not include confidential information. In the event of a review of the Inquiries, Complaints and Reports Committee’s decision by ~~the Health Professions Appeal and Review Board (HPARB)~~, the College would also notify HPARB of the concerns with respect to confidentiality.

~~3.5.~~ In the letter to the complainant enclosing the member’s response, the complainant will be asked if he/she wishes to proceed with the complaint after reviewing the member’s response. If the complainant wishes to proceed, he/she will be advised that the College will accept *new* information from him/her within ~~30-14~~ days, and that the member will be given an opportunity to respond to any new information provided. Requests for extensions to provide new information occasioned by the member’s response will be considered.

~~4. The College may take guidance from s.32(3) of the Health Professions Procedural Code (Code) of the Regulated Health Professions Act in assessing whether releasing the member’s response could result in harm to the complainant or any other person. Section 32(3) of the Code provides HPARB with authority to refuse to disclose anything in the complaint file that may, in HPARB’s opinion:~~

- ~~a) disclose matters involving public security;~~
- ~~b) disclose financial or personal or other matters of such a nature that the desirability of avoiding their disclosure in the interest of any person affected or in the public interest outweighs the desirability of adhering to the principle that disclosure be made;~~
- ~~c) prejudice a person involved in a criminal or in a civil suit or proceeding; or~~
- ~~d) jeopardize the safety of any person.~~

~~The College however, is not restricted to those situations identified in s.32(3) of the Code, and may consider any other circumstance in which harm may be caused by the release of the member’s response.~~

6. Review by the Health Professions Appeal and Review Board

If, because of potential harm to the complainant or another person, all or part of the member’s response is not released to the complainant, and if the matter is ultimately referred to HPARB for a review, the College will:

- a) advise HPARB that the member’s response (or parts thereof) was not released to the complainant during the investigation;
- b) explain the reasons why the member’s response (or parts thereof) was not released to the complainant during the investigation; and
- c) ask HPARB not to release the member’s response (or the relevant parts thereof) to the complainant.



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Briefing Note – June 2017 Council Meeting

Policy III F-4 Per Diems and Council and Committee Compensation

Strategic Direction Reflection

Advancing the Councils governance practices

Motion for Consideration

That the *Office Overhead Allowance for Eligible Private Practitioners* be increased by (amount to be determined) by amending section 10 of *Policy III F-4 Per Diems and Council and Committee Compensation* to read:

10. Office Overhead Allowance for Eligible Private Practitioners

- i. This section applies to private practitioners who derive more than half of their income from self-employment.
- ii. This allowance is not intended to replace lost income. Rather it is intended to offset additional significant expenses associated with running a practice office: rent, insurance, property taxes, secretarial support; that is, expenses which are normally claimed against income.
- iii. An office overhead allowance is payable at the rate of ~~\$125~~ (\$ to be determined) per day in quarter day increments parallel to the per diem payment for meeting attendance.

This change to be effective June 1, 2017.

Background

At the Council meeting of March 24, 2017, a question was raised regarding whether the per diem (\$325) paid to Council and Committee members for meetings as well as to others who undertake work on behalf of the College continues to be appropriate. It was noted that the current per diem amount has been in place since June 2013, having previously been \$295. Per diems are paid in ½ day increments for attendance at meetings and in ¼ day increments for teleconferences. Specifically, concern was expressed regarding the limited number of members in private practice who put their names forward for Council elections or Committee work. It was suggested that the amount of the per diem paid may be an inhibiting factor for some private practice members who may wish to work with the College but don't feel they can afford the loss in income they would incur. It was noted that the College provides an *Office Overhead Allowance for Eligible Private Practitioners* of \$125, paid in ¼ day increments to offset some of the fixed costs they continue to incur while doing College work (e.g., rent, admin, office services).

At a recent Finance and Audit Committee meeting, the Committee commented that for those Council and Committee members who are employed, the per diem may not impact on their income as they often continue to receive their salary while undertaking College business. For some of these individuals, the per diem is a 'bonus' received above and beyond their usual salary. In some cases, these individuals are required to give their per diem to their employer, so they aren't "paid" twice, while others may be

required to use vacation days for the time spent in College activities. In any case, the income of employed individuals is not generally impacted. In contrast, members in private practice do not have any other source of income for the time spent participating in College activities.

This matter was discussed at the recent Executive Committee meeting with information provided regarding the current per diems paid by other regulatory health Colleges. This information indicated that the College is very close to the mean (\$358) and above the median (\$275) among the Colleges. Following a lengthy discussion, the Executive Committee decided not to recommend an increase in the per diem rate given the College's current per diem, as compared to the other Colleges.

The Executive Committee took note of the fact that the concern appeared to be related primarily to private practice members' participation. The Executive decided it would be more appropriate to examine, and potentially amend, the office overhead allowance paid to eligible private practitioners currently set at \$125 per day. The Executive Committee voted to recommend that Council not increase the current per diem rate, applicable to all members, but rather approve an increase in the office overhead allowance with the amount to be determined by Council. The Registrar was directed to provide Council with information on the budgetary implications of increasing the office overhead allowance. The Executive further suggested that, if approved by Council at the meeting in June 2017, the change should be retroactive to June 1, 2017.

Budgetary Implications

The Office Overhead Allowance paid in 2016-2017 totaled \$16,250; equivalent to 130 days. Based on an anticipated similar experience in 2017-2018, an increase in this allowance would result in the following costs.

Overhead Allowance	Current (\$125)	\$200	\$250	\$300
Cost	\$16,250	\$26,000	\$32,500	\$39,000

Next Steps

1. Should Council decide to increase the Office Overhead Allowance for Eligible Private Practitioners, section of *Policy III F-4 Per Diems and Council and Committee Compensation*, will be amended to reflect the change.
2. If the effective date is approved to be June 1, 2017, then payments previously made will be adjusted.

Contact for Questions

Dr. Rick Morris, Registrar & Executive Director



THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO

Briefing Note – June 2017 Council Meeting

By-Law 21: Committee Composition

Strategic Direction Reflection

The integral role of the College Committees to the self-regulatory process suggests that the Committee structure and composition impacts all of the College's Strategic Directions

Motion for Consideration

That amendments *By-Law 21: Committee Composition* be approved for circulation to the membership. These amendments will permit additional appointments to the Quality Assurance Committee (QAC) and the Client Relations Committee (CRC).

Moved By TBD

Rationale

In considering the Committee appointments for 2017-2018, both the Nominations and Leadership Development Committee and the Executive Committee noted that a specific number of members is prescribed in By-law for the QAC and the CRC. This contrasts with the other Committees in which the number of appointments is a prescribed minimum. It was felt that it was appropriate to amend the composition for the QAC and the CRC to be consistent with the other Committees. This would permit the appointment of additional members of the profession who have expressed interest in College Committee work and, as well, allow for additional members dependent upon Committee workload.

Background

At the September 2016 meeting of Council, it was reported that, in the response to the *Call for Interest in College Committees*, very few Psychological Associate members had replied. This prompted a discussion regarding the need to amend *By-Law 21: Committee Composition* such that it would be *preferable* to have both titles represented on every Committee rather than *required*, as is currently the case.

Before making this change, it was suggested that efforts be made to proactively reach out to Psychological Associate members in an effort to increase the level of expressed interest. Specifically, during the call for Committee interest undertaken in the spring, a letter would be sent to all Psychological Associates asking that they consider this opportunity, and to the OAPA asking that they encourage their members to consider this.

A review of the interest expressed in the spring 2017 suggests this was somewhat successful in reaching the Psychological Associate members. In 2017-2018, 13 Psychological Associate members put their names forward to serve on Committees in contrast to 3 in 2016-2017. This does not include the Psychological Associates represented on Council. Given the level of interest expressed, it does not appear that a change in the By-law related to representation by title is required.

In considering the Committee appointments, especially the increased interest by Psychological Associate members, concern was expressed about the limited number of opportunities for member involvement. This led to a review of the *By-Law 21: Committee Composition* in which both the Nominations and Leadership Development Committee and the Executive Committee noted the restriction on adding additional members to the QAC and CRC.

The Executive Committee is recommending that Council consider amending *By-Law 21: Committee Composition* to make the Committee Composition consistent across all Committees. The recommendation is to amend section 21.6 and 21.7 to include the words “at least” before the designation of the number of Council, College and Public Members to be on each Committee. A tracked changes version of *By-Law 21: Committee Composition* is attached.

Budgetary Implications

The expense incurred related to adding individuals to Committees is depending on many factors primarily the number of meetings (per diems) and the location in which the member resides (travel, accommodation and meals).

Approximate annual cost of adding one additional member to the Quality Assurance Committee and/or the Client Relations Committee would range from \$1000 to \$2900.

3 meetings (@ 325 per diem per meeting) = \$975

Expenses if residing in Toronto – approximately \$25 per meeting = \$75

Expenses if residing outside of Toronto (hotel, travel, meals) = \$1950 (average travel costs assumed)

Next Steps

1. Section 94. (1)(h.2) of the Health Professions Procedural Code under the *Regulated Health Professions Act, 1991* permits Council to make by-laws “providing for the composition of committees”. Creation or amendments of certain by-laws, including one pertain to Committee Composition, must be circulated to the membership at least 60 days before it is approved by Council [94. (2)]. If approved by Council, this by-law amendment would be circulated to the members and brought back to Council for approval.

Contact for Questions

Dr. Rick Morris, Registrar & Executive Director

BY-LAW 21: COMMITTEE COMPOSITION

[Approved by Council December 1999; amended March 2001 and June 2002, December 2006, September 2007, March 27, 2009, June 2009 [June 2017](#)]

This by-law is made under the authority of the Regulated Health Professions Act, 1991 as amended, and the Psychology Act, 1991 as amended.

- 21.1 (1) The Executive Committee shall be composed of:
- (a) four members of the Council who are members of the College;
 - (b) both titles shall be represented among the members in section (a); and
 - (c) two members of the Council appointed to the Council by the Lieutenant Governor in Council.
- (2) The President and Vice-President of the Council shall be members of the Executive Committee and the balance of the members shall be elected to complete the composition of the Executive Committee as set out subsection (1).
- (3) The President of the Council shall be the chair of the Executive Committee.
- 21.2. The Registration Committee shall be composed of:
- (a) at least three members of the Council who are members of the College;
 - (b) at least two members of the Council appointed to the Council by the Lieutenant Governor in Council; and
 - (c) at least two members of the College who are not members of the Council.
- 21.3. The Inquiries, Complaints and Reports Committee shall be composed of:
- (a) at least two members of the Council who are members of the College;
 - (b) at least three members of the Council appointed to the Council by the Lieutenant Governor in Council; and
 - (c) at least two members of the College who are not members of the Council.
 - (d) a member of a panel who would otherwise cease to be a member of the Inquiries, Complaints and Reports Committee after an investigation of a matter has been commenced by the panel shall continue, for the purposes of concluding that matter, to remain a member of that panel and of the committee until the final disposition of the matter by the committee.
- 21.4. The Discipline Committee shall be composed of:
- (a) at least six members of the Council who are members of the College;
 - (b) at least four members of the Council appointed to the Council by the Lieutenant Governor in Council; and
 - (c) at least two members of the College who are not members of the Council.
- 21.5. The Fitness to Practice Committee shall be composed of:
- (a) two members of the Council who are members of the College;
 - (b) one member of the Council appointed to the Council by the Lieutenant Governor in Council; and
 - (c) two members of the College who are not members of the Council.
- 21.6. The Quality Assurance Committee shall be composed of:
- (a) at least two members of the Council who are members of the College;
 - (b) at least one member of the Council appointed to the Council by the Lieutenant Governor in Council; and
 - (c) at least two members of the College who are not members of the Council.

21.7. The Client Relations Committee shall be composed of:

- (a) [at least](#) two members of the Council who are members of the College;
- (b) [at least](#) two members of the Council appointed to the Council by the Lieutenant Governor in Council; and
- (c) [at least](#) two members of the College who are not members of the Council.



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Briefing Note – June 2017 Council Meeting

Committee Audit 2017 - 2018

Strategic Direction Reflection

Advancing the Council's governance practices

Motion for Consideration

That the Finance and Audit Committee and the Client Relations Committee be audited in 2017 – 2018 as per Policy I-7 *Committee Audits*.

Moved By TBD

Rationale

While the legislation does not require the College to conduct audits of its Committees and processes, Council decided that Statutory and Non-Statutory Committees would undergo periodic reviews as a quality assurance initiative.

Background

In 2003 – 2004 a review of the Complaints Committee was conducted followed by an audit of the Jurisprudence and Ethics Examination Committee. Subsequently, the College Council decided to formalize the process and Policy I-7 *Committee Audits* was created in December 2005. Since that time all the Statutory and Non-Statutory Committees, except Client Relations and Fitness to Practice, have been scheduled for review at least once although not all audits took place. The following table presents a history of Committee Audits, scheduled and completed.

Fiscal Year	Committee
2003-2004	Complaints
2004-2005	JEEC
2005-2006	Registration
2006-2007	Discipline
2007-2008	Quality Assurance
2008-2009	None
2009-2010	Registration (OFC Audit)
2010-2011	Executive Committee proposed, postponed
2011-2012	JEEC proposed, postponed to 2014
2013-2014	JEEC
2014-2015	Executive Committee
2015-2016	FAC proposed, postponed

A review of the history table suggests that any of the Committees could be considered “due” except the Executive Committee or Jurisprudence and Ethics Examination Committee. At its meeting in May 2017 the Executive Committee reviewed the history of Committee Audits. It was noted that, at this time, there are no issues or concerns with Committee functioning and therefore no Committee for which an audit would be considered urgent or necessary. The Executive Committee moved to recommend that the Finance and Audit Committee and the Client Relations Committee be audited in 2017 – 2018.

Budgetary Implications

Funds have been allocated to “Special Projects” to fund an audit in 2017 – 2018. No specific amount was established as it is recognized that the cost of the audit varies by the nature of the Committee under review. It is anticipated that audits of the Finance and Audit and the Client Relations Committees would similarly be inexpensive given the size of the Committees and their important, yet limited, activity.

Next Steps

1. With Council’s approval of audits for the Finance and Audit and the Client Relations Committees, the Registrar will work with the Committee Chairs and liaison staff to plan and implement the audits.

Contact for Questions

Dr. Rick Morris, Registrar & Executive Director

COLLEGE OF PSYCHOLOGISTS OF ONTARIO
STRATEGIC DIRECTION 2017 - 2022
Updated May 17, 2017

Vision *[What we aspire to be]*

The College strives for excellence in self-regulation in service of the public interest.

Mission *[Why we exist]*

To regulate the practice of psychology in serving and protecting the public interest

Strategies *[How we accomplish our Mission]*

In accomplishing our Mission, the College promotes excellence in the practice of psychology by:

- Enforcing standards fairly and effectively through:
 - Developing, establishing and maintaining standards of qualifications for individuals seeking registration,
 - Developing, establishing and maintaining standards of practice and professional ethics for all members,
 - Developing, establishing and maintaining standards of knowledge and skill and programs to promote continuing evaluation, competence and improvement among members;
- Communicating clearly and effectively with stakeholders, particularly applicants, members and the public;
- Supporting and assisting members to meet high standards;
- Responding to changing needs in new and emerging practice areas;
- Collaborating in shaping the regulatory environment;
- Acting in a responsibly transparent manner; and,
- Advancing the Council's governance practices.

Values *[What we uphold in all our activities]*

Fairness

The College approaches decisions in a just, reasonable and impartial manner.

Accountability

The College acts in an open, transparent and responsible manner and communicates about its processes.

Integrity

The College acts honestly, ethically, and responsibly.

Respect

The College treats members of the public, members of the College, prospective members and other stakeholders with respect.

Agenda Key	MISSION: To regulate the practice of psychology in serving and protecting the public interest by:	Current/Recent Examples	In Development/Proposed Examples
M1	<ul style="list-style-type: none"> • Enforcing standards fairly and effectively through: <ul style="list-style-type: none"> – Developing, establishing and maintaining standards of qualifications for individuals seeking registration, 	<ul style="list-style-type: none"> • 	<ul style="list-style-type: none"> • <i>Briefing Note</i> on Implementation of Council's March 2013 decision respecting future of psychology regulation in Ontario submitted to Ministry (November 2016)
M2	<ul style="list-style-type: none"> • Enforcing standards fairly and effectively through: <ul style="list-style-type: none"> – Developing, establishing and maintaining standards of practice and professional ethics for all members, 	<ul style="list-style-type: none"> • Review of Standards of Professional Conduct underway (Fall 2016) 	<ul style="list-style-type: none"> •
M3	<ul style="list-style-type: none"> • Enforcing standards fairly and effectively through: <ul style="list-style-type: none"> – Developing, establishing and maintaining standards of knowledge and skill and programs to promote continuing evaluation, competence and improvement among members 	<ul style="list-style-type: none"> • 	<ul style="list-style-type: none"> •
M4	<ul style="list-style-type: none"> • Communicating clearly and effectively with stakeholders, particularly applicants, members and the public 	<ul style="list-style-type: none"> • Publication of <i>e-Bulletin</i> quarterly • Staff presentations to students and members (ongoing) • Strategic Direction 2017 – 2022 to members • Executive Committee Reception with London members (May 2017) 	<ul style="list-style-type: none"> •
M5	<ul style="list-style-type: none"> • Supporting and assisting members to meet high standards 	<ul style="list-style-type: none"> • Practice advisor service (ongoing) • Barbara Wand Symposium (December 2016) 	<ul style="list-style-type: none"> • Barbara Wand Symposium in Ottawa (June 2017) • Review of Standards of Professional Conduct

		<ul style="list-style-type: none"> • Revision of the Self-Assessment Guide (May 2017) • Continuing Professional Development Program Implementation • Examination and Corporation Fee Reductions (June 2017) • Practical Applications within new Standards will be continuously updated (June 2017) 	<p>underway (Fall 2016)</p> <ul style="list-style-type: none"> • Updating of Policy II-3(ii) Release of the Member's Response to the Complainant
M6	<ul style="list-style-type: none"> • Responding to changing needs in new and emerging practice areas 	<ul style="list-style-type: none"> • New technological standard within the revised Standards of Professional Conduct 2017 	<ul style="list-style-type: none"> •
M7	<ul style="list-style-type: none"> • Collaborating in shaping the regulatory environment 	<ul style="list-style-type: none"> • Participation in ASPPB, ACPRO, FHRCO • College participation in inter-College Psychotherapy Working Group • FHRCO Sexual Abuse Prevention Task Force Chaired by Deputy Registrar (2016-2017) • College participation in FHRCO discussions regarding Bill 87 (transparency and other changes to the RHPA) • College Council responded to the Standing Committee on Bill 87 (March 2017) 	<ul style="list-style-type: none"> •

M8	<ul style="list-style-type: none"> Acting in a responsibly transparent manner 	<ul style="list-style-type: none"> Posting of Council materials package before meetings on website (June 2016) Council Meetings to begin with a Declaration of Conflicts of Interest (June 2017) 	<ul style="list-style-type: none">
M9	<ul style="list-style-type: none"> Advancing the Council's governance practices 	<ul style="list-style-type: none"> New Briefing Note format for Council materials March 2017 Council training day 	<ul style="list-style-type: none"> Revision to Role of the Executive Committee Agenda to Reflect Strategic Direction of Item Introduction of Board Self-Assessment process (June 2017)

Notes: Some items could be entered in more than one place. When an item could belong to more than one area, it has been placed in the primary category.

The items shown in BLUE have been added by Registrar and Executive Committee since March 2017 as activities undertaken in service of the College's Strategic Directions 2017 - 2022



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Briefing Note – June 2017 Council Meeting

Bill 87 – Protecting Patients Act, 2017

Strategic Direction Reflection

Acting in a responsibly transparent manner; Advancing the Council's governance practices

On May 3, 2017, the College provided a written submission to the Standing Committee on the Legislative Assembly on the proposed amendments to the Regulated Health Professions Act, 1991 in Bill 87. A copy of this submission is attached. On May 30, 2017, sections of the *Regulated Health Professions Act, 1991* were amended with the passage of Bill 87. The following is a summary of some of the new provisions. Please note this is not an all-inclusive list and it should not be regarded as official College policy or as a substitute for legal advice. As noted, many of the provisions came into force immediately, while some have yet to be proclaimed.

1) Increased Ministerial Powers

Now in Force

The Minister may make regulations directing:

- The College to provide information to the Minister to permit the Minister to evaluate whether the College is carrying out its duties or whether to exercise the Minister's duties. This authority could include the power to request information about individuals (e.g., the handling of a complaint or a mandatory report).
- The College to collect and disclose information to entities other than the Minister for human resources planning or electronic record keeping purposes, including research, e.g., Local Health Integration Networks (LHINs)
- That the College's Patient/Client Relations programs address additional issues, such as civility of communications with patients.

In Force upon Proclamation

- The Minister may make regulations regarding the structure of statutory committees. This can include establishing committee composition and panel quorum or special requirements for panels dealing with sexual abuse. This authority does not extend to altering College Councils in terms of size or composition.

2) Sexual Abuse Provisions

Now in Force

- Expansion of 'frank' sexual acts for which the penalty is mandatory revocation, e.g., touching of a sexual nature
- Mandatory revocation applies where another regulator makes a finding of professional misconduct that involves the expanded criteria listed above of revocable sexual acts
- Discipline panel may not order gender-based restrictions in any case
- Immediate suspension of certificate of registration upon finding for which mandatory revocation is penalty

- Minimum suspension required when finding of sexual abuse is made and mandatory revocation is not ordered

The Minister may make regulations:

- Designating certain offences (e.g., sexual assault; fraud) as requiring mandatory revocation
- Prescribing how Colleges will investigate and prosecute sexual abuse cases
- Prescribing “further and duties” for College, e.g., requiring College to provide legal counsel for individuals alleging sexual abuse
- Maximum fine on a first offence for an individual who fails to make a mandatory report relating to sexual abuse has doubled to \$50,000. For corporations, it has been quadrupled to \$200,000

In Force upon Proclamation

- Expanding eligibility for funding for therapy related to sexual abuse; funding may begin at the time complaint is made
- May make regulations expanding types of expenses covered, e.g., child care, travel, not just cost of therapy
- Definition that a former patient/client remains a “patient/client” for the purposes of the sexual abuse provisions for a period of one year from following service, or longer if prescribed in a College regulation

3) Transparency

Now in Force

- College public registers expanded to include:
 - oral cautions and Specific Continuing Education or Remediation Program (SCERP)
 - acknowledgements and undertakings as long as they remain in effect
 - date and status of referrals to discipline and a copy of the specified allegations
 - result of every disciplinary decision
 - date a former member died, if known
- Minister may make a regulation requiring additional information to be placed on the public result
- Posting of dates, agendas and materials for upcoming Council meetings on website. *In camera* material may be withheld, but grounds for this must be included in the package posted

In Force upon Proclamation

- Members to report all other regulatory bodies with which they are registered and any findings of professional misconduct or incompetence (but not incapacity) made by those bodies.
- Members to report all charges for an offence and any resulting bail conditions or other similar restrictions; convictions must already be reported. No requirement now that these be included on the public register

4) Other

Now in Force

- ICRC may make an interim suspension order prior to a referral to discipline or to the Fitness to Practise Committee
- Registrar may approve ADR resolutions and withdrawals of complaints by complainants

Contact for Questions

Dr. Rick Morris, Registrar & Executive Director

By E-mail: wshort@ola.org

May 3, 2017

Standing Committee on the Legislative Assembly
Mr. Monte McNaughton, MPP, Chair
Mr. William Short, Clerk
Room 1405, Whitney Block
Queen's Park, Toronto, ON M7A 1A2

Dear Mr. McNaughton:

Re: Bill 87, *Protecting Patients Act*, 2017

The College of Psychologists of Ontario welcomes the opportunity to make a submission on the proposed amendments to the *Regulated Health Professions Act, 1991 (RHPA)* found in Schedule 4 of Bill 87, *Protecting Patients Act, 2017*.

Introduction

The College of Psychologists is the regulatory body for the profession of Psychology in Ontario. As such, the College regulates the registration of, and services provided by, *Psychologists* and *Psychological Associates*. Our members work in hospitals, school boards, universities, agencies, correctional services, clinics and in private practice, and provide a variety of psychological services to clients of all ages and backgrounds. There are currently approximately 3350 *Psychologists* and 450 *Psychological Associates* actively providing services in Ontario.

As the regulatory body for the practice of Psychology in Ontario, the College is committed to the prevention of sexual abuse by health care professionals and, to this end, generally supports the changes proposed in Bill 87. In addition to the provisions directed at strengthening sexual abuse prevention, the College is also supportive of the transparency measures and those directed at improving the Colleges' complaints, investigations and discipline processes within the *RHPA*.

The College is a member of the Federation of Health Regulatory Colleges of Ontario (FHRCO). As a member, we have been involved in the many discussions held regarding Bill 87, its importance and impact. To this end, the College is generally supportive of the submissions of the Federation but we wish to add some additional comments.

Reducing and Eliminating Sexual Abuse

Funding for Therapy and Counselling

The College of Psychologists is supportive of efforts to ensure that victims of sexual abuse are afforded the opportunity to obtain therapy/counselling as early as possible. This would include the changes contained in Bill 87 which would make funding available to an individual who makes a complaint, or is the subject of a report that alleges sexual abuse, commencing when the complaint or report is made.

There is concern however, that the language of Bill 87 could restrict the availability of funding as it suggests that the College no longer will have the authority to create alternative criteria. Currently, the College may award funding to an individual, if there is sufficient evidence presented to the Patient Relations Committee, to support a reasonable belief that the person, while a patient/client, was sexually abused by a member. Such situations can arise when there are criminal findings of sexual assault of a client or where the client has not been named in the report or complaint. The College recommends that in addition to the criteria in Bill 87, that the Patient Relations Committee continue to be able to consider eligibility where there is sufficient evidence to support a reasonable belief that abuse occurred.

The College supports the provision that would expand the permitted use of funding to cover related expenses such as child care or transportation in assisting an individual to access necessary therapy or counselling.

Definition of Client/Patient

The College supports the intent of the amendments to address the definition of who would be a client/patient in the context of sexual abuse. The College of Psychologists has broadly defined “client” to mean: *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.*

Currently the College has a two-year prohibition against intimate relationships with former clients/patients. The prohibition goes on to state however that, *even after two years, a member must not enter into an intimate or sexual relationship with a former client when the member knows or reasonably ought to know that the former client is vulnerable to exploitation or may require future service or some other professional involvement specifically from them.* The College would support amendments which provide the authority to determine the appropriate interval between the ending of the client/patient-provider relationship and the commencement of a personal one based on the nature of that relationship.

Mandatory Revocation

The College supports the expansion of mandatory revocation for frank sexual acts including, as Bill 87 proposes, when a regulator outside of Ontario makes a finding of professional misconduct that would be grounds for mandatory revocation in Ontario. Since there are practitioners who may be registered with more than one College in Ontario, it is suggested that the language ensure that mandatory revocation regarding findings by any regulator clearly captures both those within and outside of Ontario.

Other Orders by the Discipline Committee in Sexual Abuse Cases

The College supports the proposal that a member be suspended immediately upon a finding which requires mandatory revocation. In addition, the College supports the establishment of mandatory suspensions as a new minimum penalty for findings of sexual abuse that do not involve acts for which mandatory revocation is required. The College supports the inclusion in Bill 87 of the authority that would permit the Inquiries, Complaints and Reports Committee to restrict or suspend a member’s certificate of registration, at any time following the receipt of the complaint or report, where there is a belief that the member may pose a risk of harm to his/her clients/patients. As well, as the College does

not utilize gender-based terms, conditions or limitations on a member's certificate of registration in Discipline penalties or any other situation, we would support the express prohibition of these.

Fines Increased for Failing to Make a Mandatory Report

The College recognizes the importance of the mandatory reporting provisions and supports the proposed amendments that would increase the penalties for failure to make a mandatory report.

Enhancing Transparency

The College of Psychologists is generally supportive of the increased transparency proposals provided for in Bill 87. Prior to the introduction of the Bill, our College, along with many others, has been considering an expansion to the member information published on the public register. In further increasing the transparency of College operations, the College is already posting College Council Agendas, Minutes and meeting materials on our website in advance of meetings.

Increased Powers of the Minister

Numerous sections of Bill 87 propose Ministerial regulation-making authority. Without the opportunity to review the actual proposed language of a regulation, it is impossible to assess or comment upon the impact or implications. As an example, Bill 87 proposes the Minister may, through regulation, require additional information about members be available on the public register with the suggestion that this could include the posting of "criminal charges". The College has concerns with respect to such postings before these have been adjudicated by the courts. If provided the opportunity, the College would wish to suggest that wording be considered which would "permit" rather than "require" such publication and only in cases where the nature and circumstances of the charges clearly demands they be noted.

Similarly, there are suggestions that regulations could be introduced which include discretion based on whether the matter impacts on "suitability to practice". If such regulations were to be introduced, the College would wish to comment on the need for some criteria with respect to "suitability to practice", how it is determined and by whom. These are but two examples of potential Ministerial regulations about which the College would wish to have input.

Overall, the College supports efforts to enhance the effectiveness of self-regulation of health professions in Ontario and would look forward to the opportunity, to join with our Federation colleagues, in consulting with the Minister on regulations being considered.

Thank you for the opportunity to provide these comments.

Yours sincerely,



Rick Morris, Ph.D., C.Psych.
Registrar & Executive Director

cc: Dr. Lynette Eulette, President
College of Psychologists of Ontario



**THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO
L'ORDRE DES PSYCHOLOGUES DE L'ONTARIO**

Briefing Note – June 2017 Council Meeting

Generative Discussion: Council Self-Evaluation

Strategic Direction Reflection

Advancing the Council's governance practices

The information is provided for your information with **No Action Required at this time**

Background

The College Council and Executive have, on many occasions, discussed the benefits of introducing a Council Self-Assessment process. This would be a collective look at the way in which the Council, as a whole, undertakes and fulfills its fiduciary responsibilities. In the spring, the Executive Committee did a 'test run' of the proposed process and survey available through the Governance Centre for Excellence (GCE). It was an interesting and educational process. Each member of the Executive, as well as the Registrar and Deputy Registrar, completed the *GCE Board Self-Assessment Tool*. This was an individual, on-line exercise. The individual surveys were compiled by the GCE and an anonymous, summary report provided. This report was reviewed at the May meeting and more time will be spent on this as part of the summer Executive Training Day. While the results of the Executive's completion of the survey was interesting, it was recognized that the exercise would be far more robust if completed by the full Council.

The Executive is recommending that Council undertake this process beginning with each member of Council completing the survey in late August so that the results will be available for discussion at the September Training Day.

Two documents are attached for your reference.

1. The *GCE Board Self-Assessment Checklist and Questionnaire* is made up of Step 1 and Step 2. Step 1, *Current Governance Practices and Policies Checklist* will be completed by the College and made available to you as reference material when you complete Step 2, the *GCE Board Self-Assessment*. A link to this on-line survey will be provided in August. Please Note, the survey should not be completed at this time but rather is being provided for information only.
2. *Is Your Board Ready for Self-Assessment?* This is an excellent discussion paper on Council self-evaluation.

Next Steps

1. Discussion of the GCE Board Self-Assessment and feedback process.
2. Distribution of the link to the on-line survey in August for completion by Council members
3. Discussion of report from the Governance Centre for Excellence summarizing the Council surveys
4. Creation of an Action Plan to address issues, gaps or deficiencies noted

Contact for Questions

Dr. Rick Morris, Registrar & Executive Director

A Preview of the Board Self-Assessment Tool



ACKNOWLEDGEMENTS

The Governance Centre of Excellence (GCE) would like to acknowledge the contributions of Jim Mackay (Berkeley Consulting Group) and Anne Corbett (Borden Ladner Gervais) in the development of the Board Self-Assessment Tool.



Background and Purpose

The Governance Centre of Excellence's Board Self-Assessment Tool was developed to complement the Guide to Good Governance, second edition, and is based on the framework for good governance described in the guide. Its purpose is to enable boards to assess their overall governance against

current leading practice guidelines. The self-assessment process involves an optional preparation stage and the administration of an online, survey-type questionnaire to be completed by each board member.

Step #1: Current Governance Practices and Policies Checklist (Optional Preparation)

The purpose of the preparation step is to document the existence and completeness of the board's formal documentation of current governance practices and policies, by completing a checklist. It is suggested that the Corporate/ Board Secretary, working with the Chair of the Board and/ or the Chair of Governance Committee and CEO, complete the checklist, and distribute the completed checklist to each director prior to administering the questionnaire. This will show the board the degree to which good governance practices are being followed and identify where these governance policies, processes and documents are located.

Prepared with this information, individual board members may respond more knowledgeably to the questionnaire. Some organizations with well-documented information on their governance processes, which is communicated effectively to board members, may find this preparation unnecessary. For those not in that position, it is recommended as a way to ensure board members are well-informed regarding current governance practice. The completed checklist does not need to be provided to the GCE.

Step #2:

Board Self-Assessment Tool

The questionnaire contains seven sections:

1. **Performing board roles:** Addresses how well the board performs its primary functions including the strategic plan, monitoring the organization's financial viability and quality performance, supervising the CEO and overseeing stakeholder relationships.
2. **Board role and management relationship:** Addresses the board's understanding of its governance role and its relationship with management.
3. **Board quality:** Addresses the quality of board members and their collective skills. It includes board membership, board member orientation and continuing education.
4. **Board structure:** Addresses issues related to board committees.
5. **Meeting processes:** Addresses various elements of a board's meeting processes, such as, the organization of meetings, and appropriateness of board materials.
6. **Overall board functioning:** Addresses board evaluation, balancing board meeting time between various types of issues, the duties and obligations of individual directors, and those related to a director's fiduciary duties.
7. **Individual Director's functioning:** Addresses how well the individual feels they are knowledgeable and performing the governance role.

The questionnaire should be completed individually by all board members, including the Chair of the Board (e.g., if there are 15 board members, there should be 15 individual responses). Responses are collected anonymously. It takes about 20 minutes to complete and must be completed in one sitting.

Once completed, the GCE will aggregate and tabulate the results, and format them into an easy-to-read report that can be distributed to board members through the primary contact they have chosen. The report will contain the board's average score as well as province-wide average scores, for each assessment criterion. A companion handbook, *A Board's Handbook to Develop a Governance Action Plan*, will also be provided.

Boards may use the results in a variety of ways to improve its governance going forward, including:

- The Governance Committee may review the results and develop objectives and priorities for governance development
- The whole board may discuss the feedback and implications at a board retreat or special sessions on governance

CONFIDENTIALITY

All survey data is treated with strict confidentiality. The GCE does not reveal raw data entries or the results of any individuals, nor do we discuss organizational/board policies or practices with any third party. All reports will only contain aggregated data of the group.

CONTACT US FOR QUESTIONS

Katy Miller
416 205 1406
kmiller@thegce.ca

CURRENT GOVERNANCE PRACTICES AND POLICIES CHECKLIST

Name of Board: _____

	Status (Check one)	Comments (e.g., name and location of relevant policy)
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1. Board Role & Management Relationship (Guide Chapter 3)

1.1	The board has a formal role statement that expressly describes the areas and functions in which it exercises a governance role.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
1.2	The board has a statement of accountabilities that identifies key stakeholders and describes the organization's accountability relationships.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
1.3	The board has an approved statement of the role of the CEO and the relationship with the board reflecting its governance model and principles.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
1.4	The board has a written policy and processes and tools for evaluating the governance performance.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

2. Performing Board Functions (Guide Chapter 4)

Providing Strategic Direction

2.1	There is a current or updated strategic plan with a clear set of strategic goals and directions for the organization.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
2.2	The board has a process for regularly monitoring and evaluating progress towards strategic goals.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
2.3	The board provides clear direction with respect to annual and long-term goals and priorities.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Financial and Quality Performance

2.4	The board has a clear process for overseeing the development of the annual budget/financial plan for the organization and monitoring its implementation.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
2.5	The board and/or a committee of the board regularly reviews quality plans and policies related to the quality of services and programs.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
2.6	There is a formal performance measurement system with indicators for monitoring all key areas of operational performance relevant to the board.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
2.7	The board receives regular reports with performance indicators, including variances and management's explanatory comments.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

		Status (Check one)		Comments (e.g., name and location of relevant policy)
Overseeing the CEO (and Chief of Staff if applicable)				
2.8	The board has a documented process for evaluating the CEO annually including reviewing the CEO's annual goals.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
2.9	The board has a sound formal process for evaluating the Chief of Staff annually including reviewing the Chief's annual goals.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
2.10	The board has a written plan for CEO succession.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
2.11	In making annual compensation/incentive compensation decisions, the board ensures that the processes and recommendations are consistent with leading practice and applicable government legislation and regulation.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Stakeholder Relations				
2.12	The board provides reports of the organization's plans, recent performance and financial condition to the major stakeholders on a timely basis.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
2.13	The board has a formal policy or process for engaging key stakeholders in the organization's planning and decision-making process.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

3. Board Quality (Guide Chapter 7)

3.1	As a guide to the recruitment of new directors, the board has a profile of current members and target profile of skills and experience.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
3.2	The board has an approved recruitment and screening process, which includes proactive outreach for nominees, written criteria and process for evaluating potential directors.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
3.3	The board has formal statements and policies that support and emphasize directors' duties and behaviours, such as conflict of interest, code of conduct, attendance, confidentiality, and loyalty expectations.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
3.4	The board has a formal, high-quality, mandatory orientation program for new members.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
3.5	There is an established policy and process that ensures ongoing education and development of directors.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
3.6	The board has a formal process for assessing the contribution of directors and providing individual development advice.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
3.7	There is an annual evaluation process of the board and its committees.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

		Status (Check one)		Comments (e.g., name and location of relevant policy)
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4. Board Structure (Guide Chapter 8)

4.1	The board has a position description for the role of the board chair.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
4.2	The board has criteria and a process for selecting the board chair.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
4.3	There is a written process that is used in selecting other officers and committee chairs annually.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
4.4	All committees have written terms of reference that are reviewed annually, and updated as required.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
4.5	All committees have annual, approved written objectives and work plans.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

5. Meeting Processes (Guide Chapter 8)

5.1	The board develops and uses an annual work plan outlining when major topics will be addressed.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
5.2	There is an established practice for creating the regular meeting agendas with clear roles for the Chair and CEO, and an opportunity for individual directors to make suggestions.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
5.3	There is an annual board retreat where major topics selected by the board are discussed.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
5.4	The board agendas provide regular opportunities for deeper discussions of specific topics of special interest to the board in its governance role.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
5.5	The board has a policy and/or guidelines for dealing with certain matters in-camera.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
5.6	The board has a formal practice of meeting without management and feedback is provided to the CEO.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
5.7	Meetings are regularly evaluated and that feedback is provided to the Chair.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
5.8	The board has a consent agenda policy for items of a routine, recurring, or non-contentious nature.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

STEP #2: GCE BOARD SELF-ASSESSMENT TOOL

Instructions

Based on your experience and involvement with the board, rate the degree to which you agree that the statement is true for your board. In considering each statement, interpret it flexibly, recognizing that

organizations use different words for the same thing. For example, some use ‘performance indicators’, while others use ‘measures’.

1. Performing Board Roles (Guide Chapter 4)

		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	NA / Don't Know
Providing Strategic Direction							
1.1	The current Strategic Plan for your organization provides a clear set of relevant and realistic goals and strategic directions to the organization.	<input type="checkbox"/>					
1.2	The board is adequately involved in the process of developing the Strategic Plan.	<input type="checkbox"/>					
1.3	The board encourages the identification and assessment of initiatives to create a more integrated local health services system.	<input type="checkbox"/>					
1.4	The board regularly monitors and evaluates progress towards strategic goals and directions.	<input type="checkbox"/>					
1.5	The board provides meaningful direction to program/service quality in its Strategic Plan and annual goals and priorities.	<input type="checkbox"/>					

		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	NA / Don't Know
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Monitoring Financial Viability and Quality Performance

1.6	The board effectively oversees the development of the annual budget and financial plans for the organization.	<input type="checkbox"/>					
1.7	The performance measurement system is helpful to board members and uses contemporary methods (e.g., dashboards and balanced scorecards).	<input type="checkbox"/>					
1.8	The performance measures and other information received by the board permit directors to monitor results and identify areas of concern.	<input type="checkbox"/>					
1.9	When there are significant financial and/or quality performance variances, management provides the board with acceptable explanations and plans for dealing with those variances.	<input type="checkbox"/>					
1.10	The board is informed about significant risk issues in a timely manner.	<input type="checkbox"/>					

Overseeing the CEO (and Chief of Staff if applicable)

1.11	There is an effective process for establishing the CEO's annual goals.	<input type="checkbox"/>					
1.12	There is an effective process for measuring the CEO's performance.	<input type="checkbox"/>					
1.13	There is an effective process for establishing the Chief of Staff's annual goals.	<input type="checkbox"/>					
1.14	There is an effective process for measuring the Chief of Staff's performance.	<input type="checkbox"/>					
1.15	The board has a sound plan for the CEO's development and succession.	<input type="checkbox"/>					
1.16	The board has a sound plan for the Chief of Staff's development and succession.	<input type="checkbox"/>					

		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	NA / Don't Know
--	--	----------------	-------	---------	----------	-------------------	-----------------

Overseeing Stakeholder Relations

1.17	The board ensures that the organization communicates its performance and plans to its key stakeholders in an effective and transparent fashion.	<input type="checkbox"/>					
1.18	The board speaks with 'one voice' in all communications with stakeholders.	<input type="checkbox"/>					
1.19	The board ensures that the organization engages relevant stakeholders when considering strategic planning and services integration opportunities.	<input type="checkbox"/>					

2. Board Role and Management Relationship (Guide Chapter 3)

2.1	The board understands and performs its governance role and does not become overly involved in operational issues.	<input type="checkbox"/>					
2.2	The board members are adequately informed about the programs, services, operations and administration of the organization in making governance decisions.	<input type="checkbox"/>					
2.3	The board's goals, expectations and concerns are openly communicated to the CEO and management.	<input type="checkbox"/>					
2.4	The CEO communicates with the board in an open, candid, respectful and timely manner. (*Select N/A for this question if you are the CEO)	<input type="checkbox"/>					

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	NA / Don't Know
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3. Board Quality (Guide Chapter 7)

3.1	The board is the right size. It is small enough for effective board discussions, yet large enough to have an appropriate breadth of skills and experience and the ability to carry the committee workload.	<input type="checkbox"/>					
3.2	The membership of the board has sufficient diversity of skills, experience and backgrounds for good governance.	<input type="checkbox"/>					
3.3	The board membership is sufficiently independent to ensure good governance of the organization.	<input type="checkbox"/>					
3.4	New board members receive adequate orientation to prepare them to contribute effectively to the board.	<input type="checkbox"/>					
3.5	The board provides in-depth, ongoing continuing education to its board members.	<input type="checkbox"/>					

4. Board Structure (Guide Chapter 8)

4.1	The board has the appropriate number of committees to support the work of the board.	<input type="checkbox"/>					
4.2	Committee meetings involving board members and staff are constructive and there is open communication, meaningful participation, critical questioning and timely resolution of issues.	<input type="checkbox"/>					
4.3	The board respects the work of its committees and does not redo committee work.	<input type="checkbox"/>					
4.4	Committee reports are effective in providing the necessary information to the board.	<input type="checkbox"/>					
4.5	The Finance Committee or equivalent (Resources, Stewardship) effectively performs its role and fulfills the responsibilities of its terms of reference.	<input type="checkbox"/>					
4.6	The Quality Committee effectively performs its role and fulfills the responsibilities of its terms of reference.	<input type="checkbox"/>					
4.7	The Governance Committee (or equivalent) effectively performs its role and fulfills the responsibilities of its terms of reference.	<input type="checkbox"/>					

		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	NA / Don't Know
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5. Meeting Processes (Guide Chapter 8)

5.1	Board meetings are well organized and the Chair manages them to allow sufficient time for discussion of major issues and to ensure appropriate participation by all.	<input type="checkbox"/>					
5.2	The board has a well conceived and realistic annual work plan.	<input type="checkbox"/>					
5.3	Board materials are sufficiently informative so that board members can participate in discussions and make decisions.	<input type="checkbox"/>					
5.4	Board materials arrive sufficiently in advance to allow for board members to prepare properly for the meetings.	<input type="checkbox"/>					
5.5	The board uses in-camera sessions appropriately.	<input type="checkbox"/>					
5.6	The board uses a consent agenda practice that conserves board time without compromising board oversight.	<input type="checkbox"/>					
5.7	Minutes accurately reflect board discussions and decisions.	<input type="checkbox"/>					
5.8	The board's 'meetings without management' focus on the governance process and support from management.	<input type="checkbox"/>					

6. Overall Board Functioning (Guide Chapters 6 to 8)

6.1	Directors work well together, seeking consensus, and treat each other with respect and courtesy.	<input type="checkbox"/>					
6.2	Directors ask constructive questions and express their views in a respectful manner.	<input type="checkbox"/>					
6.3	Once decisions are taken by the board, all members support the position.	<input type="checkbox"/>					
6.4	Directors respect the confidentiality of board in-camera discussions.	<input type="checkbox"/>					
6.5	Directors declare conflicts of interest, where appropriate.	<input type="checkbox"/>					

		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	NA / Don't Know
6.6	The board has sufficient opportunities to go into adequate depth on critical issues from time to time (retreats or 'deep dives' at regular meetings).	<input type="checkbox"/>					
6.7	The board has effective evaluation tools to help it make modifications in its governance processes.	<input type="checkbox"/>					
6.8	The board balances its time well between considering future issues and dealing with current governance matters.	<input type="checkbox"/>					
6.9	The board addresses important issues and decisions at a sufficiently early stage.	<input type="checkbox"/>					
6.10	On balance, the board allocates its time effectively between important issues and those of lesser importance.	<input type="checkbox"/>					

7. Individual Director's Functioning

7.1	I have a good understanding of the difference between the board's governance role and the role of the CEO and management.	<input type="checkbox"/>					
7.2	I have a good understanding of the organization's strategic plans, activities and operations.	<input type="checkbox"/>					
7.3	I have a good understanding of the challenges in the external environment affecting the organization.	<input type="checkbox"/>					
7.4	I feel good about my level of contribution to the board's deliberations.	<input type="checkbox"/>					

www.thegce.ca

Is Your Board Ready for Self Assessment?

A guide for non-profit leaders

By Jeff Wahlstrom



About This Publication

This document is a guide for non-profit leaders who are considering whether to undertake a formal board self-assessment. It was developed by Jeff Wahlstrom, of Starboard Leadership Consulting, and marketed through the Maine Association of Nonprofits.

Copying, distributing, or altering this document or the self-assessment questions contained within, either in part or in its entirety, is not permitted without the permission of Starboard Leadership Consulting, LLC.

About the Author

Jeff Wahlstrom is the president and a managing director of Starboard Leadership Consulting. He has more than 25 years of hands-on experience as a nonprofit leader, board member, and consultant to an extensive list of for-profit and non-profit clients. He regularly provides counsel to boards of directors on governance best practices, succession and transition planning, crisis management, and strategic planning. Jeff lives in Bangor, Maine and may be contacted at (207) 992-4407 or cjw@starboardleadership.com.

About Starboard Leadership Consulting, LLC

Serving nonprofit and municipal leaders, chief executives, and family owned businesses, Starboard Leadership Consulting, LLC, provides board performance, governance, and strategic planning advice, as well as leadership development, transition and succession planning, and management support services. At Starboard, we share a passion for helping organizations and family businesses excel. Drawing on our own resources and our many connections with experts in related disciplines, we bring a depth of experience that allows us to design and implement strategies for the many challenges faced by our clients. Starboard Leadership Consulting is an affiliate of Rudman & Winchell Counselors at Law in Bangor, Maine.

Additional Resources

You will find a wealth of resources, useful tools, and information about nonprofit governance best practices on the Maine Association of Nonprofits website: www.nonprofitmaine.org or by calling them at (207) 871-1885. While most of their services and resources can be accessed for free, we encourage you to consider becoming a member of the Maine Association of Nonprofits in order to fully benefit from the array of services available.

To Purchase a Copy

To purchase a copy of Starboard Leadership Consulting's on-line Board Self-Assessment tool, go to the Maine Association of Nonprofits' website: <http://www.NonprofitMaine.org/BoardSelfAssessment>.

Table of Contents

Introduction	2
What Is Board Self-Assessment?	2
What Board Self-Assessment Can and Cannot Do	3
Are You and Your Organization Ready?	4
Getting Everyone On Board	6
What the Board Will Be Asked	8
The Process – Step by Step	9
Frequently Asked Questions	10
Final Thoughts	11

Is Your Board Ready for Self-Assessment?

Introduction

Almost any recent compilation of board best practices will list board self-assessment as something today's boards should commit to on a periodic, if not annual, basis. But why?

There is little argument that the strongest organizations almost always have the strongest boards. Strength is not always defined as having a “who's who” board made-up of wealthy and influential individuals. After all, some of those “who's who” boards have been at the helm of nonprofits that have experienced pretty spectacular and well publicized meltdowns. The reality is that it is not so much *who* is on the board but *how* the board operates.

The best boards are always asking, “How can we do this even better?” If, in response to that question, the board only looks at the staff and at programs, it is missing an essential element and the organizational component over which they have the most control. In the same way that the board might ask staff to develop objectives and measurements for programs for which they are responsible, the board should consider setting objectives for its own performance. Board self-assessment is a logical component of this work and a great place to start.

This guide offers, and is built upon, several years of experience in developing, administering, and interpreting board self-assessments. While we will reference the on-line board self-assessment tool that we first developed in 2005, it is our sincere hope that this guide will be of help to you no matter what kind of self-assessment process or tool you might be considering.

We often say that the real power of any board self-assessment tool is the conversation it begins—a conversation among board members that starts by asking, “How can we do this better?” We are glad that you are ready to begin that conversation, and we hope that his guide will be of help.

What Is a Board Self-Assessment?

When we talk about “board self-assessment,” we are talking about (as the name suggests) the board assessing itself. It is not a performance evaluation of the executive director, the organization, or even individual board members. Rather, it is an opportunity for the board to look at itself and ask, “How are we doing as a board?”

While this guide will focus on the use of the assessment tool developed by Starboard Leadership Consulting, we will be the first to suggest that there is nothing magic about the self-assessment tool we or others use. Whether you use an on-line instrument or a paper survey, purchase an existing product or make-up your own, board members will be asked to review a list of core responsibilities and best practices and indicate how well

Is Your Board Ready for Self-Assessment?

they think the board is doing in achieving them. The results are always illuminating, but they usually result in more questions than answers. The magic, if we can call it that, comes in the discussion and the process that follows.

Board self-assessment needs to be regarded as a *process* and not a one-time activity or as simply the completion and tabulation of a survey. Consider the administration of the self-assessment tool as the starting point in a journey that the board embarks upon together—a journey towards the development of a “board governance agenda.”

Think of the board governance agenda as a governance “to do” list for the board. Just like your “to do” list at work or at home, as soon as you cross off one item, you are likely to add one or two more items to the bottom. A board governance “to do” list, or agenda, is much the same. While there are some quick fixes, like, “Start putting the mission statement on the top of each board agenda,” nurturing and strengthening a board is an ongoing process. Even boards operating at the highest levels are always fine-tuning their recruitment process, identifying new topics for board education, and reviewing meeting evaluations to learn what they can do better.

In short, the board self-assessment process is a failure if it results in a new “to do” list for the executive director or is viewed as an interesting activity to fill time at the annual board retreat. Its value comes when the tool leads to a healthy and productive discussion about the board’s strengths and weaknesses and results in an agreed upon plan for building a stronger board and governance model.

What Board Self-Assessment Can and Cannot Do

It was noted earlier that board self-assessment is *not* a one-time, quick fix activity, and it makes sense to go into it clearly understanding what it can do for you and what it cannot:

Can

- Tell you how the board *thinks* it is doing at this particular point in time.
- Provide a summary of responses that can serve as a baseline from which to work in your governance improvement efforts.
- Help you begin the essential conversation with your board about its strengths and weaknesses.
- Provide a format for discussing some ongoing issues and concerns (term limits, lack of board support for fundraising, recruitment, etc.).

Is Your Board Ready for Self-Assessment?

- Serve as a launching pad for an ongoing governance committee, the development of a governance agenda, and a continuing effort to strengthen your board.

Cannot

- Take the place of an organizational assessment or serve as a vehicle to evaluate the work of the executive director.
- Solve your problems with that “difficult” board member.
- Miraculously transform the board overnight.

It is worth noting that almost all of us learned how to be board members and how boards work by serving on a board. We didn't take a course or get training. We went to meetings, and those meetings, and those boards, became our models for how boards work. Unfortunately, our models were often faulty at best and downright dysfunctional at worst. As a result, how board members respond to the questions posed as part of board self-assessment can be colored by what they have experienced to date and not by accepted best practices.

Be sure to use the board self-assessment process to highlight and explore the best practices that are being employed by other boards. You may need the assistance of a capable board member or an outside consultant to help make the case for adopting these practices, but you can be certain that the end result will be well worth the effort.

Are You and Your Organization Ready?

Not every organization or every board is ready for the board self-assessment process. For instance, it probably doesn't make sense to embark on this process if the organization is facing a crisis or some other pressing matter that is requiring everyone's full attention. Nor should you launch this process when staff and board leadership are at odds with one another or when the organization or the board lack the capacity to enact the strategies they might develop.

While it is easy to build a long list of reasons for NOT initiating a board self-assessment process, the reality is that if you have staff and board leadership who are determined to strengthen the board, anything is possible, and good results are probable.

Here are some questions to ask yourself as you consider your organization's readiness for board self-assessment:

- Are the staff and board leadership ready to commit to the process and see it through? The greatest chance of success and lasting results come when the board

Is Your Board Ready for Self-Assessment?

chair (or vice chair) and the executive director are of one mind in this regard. A lack of commitment by either can doom this process and just waste time.

- Are you anticipating or going through a board leadership transition? This can be an ideal time for the soon-to-be or new chair to set his or her leadership agenda for the board.
- Are you anticipating or going through a staff leadership transition? Consider asking the board this question: “What do we need to do in order to be the board our new leader needs us to be?” We’ve worked with several organizations that have wanted to signal to executive director candidates that they are serious about building board capacity and have seen the board self-assessment as a means of doing that.
- Has it been a few years since the last board self-assessment process? While many organizations have not done a board self-assessment process before, there are others that do some level of assessment annually. It may make sense to undergo this process every 2-3 years, or, perhaps, as board leadership turns over.
- Do you have a governance committee already in place? Like board self-assessment, a standing governance committee that is responsible for board development, recruitment, and the general health of the board has become an accepted best practice. The board self-assessment will help to guide this committee’s work and will get them focused on more than just the annual recruitment process.
- Do you have board members who you can recruit to see this process through? If you don’t have a governance committee in place, do you have at least two or three board members who will be champions for the development and enactment of a board governance agenda?
- Can you link this work to the strategic planning process? Unfortunately, too often the strategic planning process results in an enormous “to do” list for the staff, and the board walks away without specific tasks. The board self-assessment process not only gives them some work to own, but it can also help to point out their role in moving the strategic plan forward (taking an active role in resource development, for example).
- Are you ready to commit the time? As noted earlier, this is not as simple as filling out a survey and simply reviewing the results. Board members need to be ready to commit to a retreat and an ongoing process. Don’t underestimate the time involved, but don’t let that stop you from doing some of the most important and valuable work you can do!

Is Your Board Ready for Self-Assessment?

One note about timing: we are often asked whether it makes sense to start this process when new board members have just come on board or whether you should wait until they've had time to get to know the organization and the board. The fact is that board members come and go, and while it would not make sense to have a brand new board member fill-out a self-assessment survey as his or her first official board duty, the first impressions of new board members can be extremely valuable. We find the “unsure” responses to be as enlightening as any others. If you wait for the *perfect* moment, you will never begin this work.

Getting Everyone On Board

It is impossible to overstate the importance of securing a shared commitment to the board self-assessment process by the board chair (or incoming chair) and the executive director. Ideally, this should feel like a team effort, as real governance change or improvement is not possible if one or the other is a half-hearted participant or even resistant.

We typically recommend that the leadership team recruit a couple of other board members to play an active role in the process and take some ownership for seeing the assessment results translated into a governance agenda. These board members might become the core of an ongoing governance committee, even if it begins in an ad hoc manner.

“But what do I do if I am ready to embark upon this work but others are not?” Whether real or perceived, it is not uncommon to feel like you are the only one who “gets it.” The reality is that you probably aren't alone. Others know that the board is not performing at the level that it should, but they don't know how to articulate that or what options to suggest.

If you are observing any of the following, you can be certain there are others who will welcome a discussion about improving board performance:

- Are you having trouble with attendance and achieving a quorum?
- Are board members *choosing* to attend other meetings over yours?
- Are board members coming to meetings without doing the necessary reading or preparation in advance?
- Are board members more active in “parking lot discussions” *after* meetings than they are during your meetings?

Is Your Board Ready for Self-Assessment?

- Are board members coming to meetings late or always finding a reason to leave early?
- Are you experiencing a disturbing amount of micromanagement by the board?
- Do you hear repeated grumbling about the need for new board members?

Look around the board room and consider who might give you an honest response to this question: “On a scale of 1-10, what would be your hard-nosed assessment of the effectiveness of this board?”

Ask the question. The number he or she gives you in response is not as important as the conversation it begins. It is very likely that you’ll hear some frustration that may surprise you.

Even with this knowledge, it isn’t always easy to begin the conversation with board or staff leadership who may see a discussion about board effectiveness as threatening or as suggesting that they are not doing their jobs well. Here are a few strategies for starting the conversation:

- Start sharing information about board best practices and high-performing boards with your board leadership.
- Share this guide and suggest, “Here’s something we might want to consider.”
- Approach this as a way to get the board on board with their fundraising responsibilities. Board self-assessment is a great way to begin this conversation.
- Using an evaluation form that is similar to what you would fill out at the end of a workshop, develop a short and easy form to assess your meetings. Review the results with the board chair or executive committee.
- Think of someone your board would consider to be a highly desirable board member and then ask this question, “If we were going to ask _____ to join our board, and she said, ‘yes,’ would she see us as a board that has its act together?”
- Do you have a new board recruitment effort underway? A strategic planning process that is about to begin? A leadership transition? An upcoming fundraising campaign? An accreditation visit or a grant renewal? These kinds of events are a great opportunity to ask, “Is this a good time for us to take a look at our board and how we operate?”

Is Your Board Ready for Self-Assessment?

- If you can't get interest the first time, keep trying, or move on to other board volunteers. The incoming chair or vice chair should have a real stake in this work.

What the Board Will Be Asked

Whether you use Starboard Leadership Consulting's on-line tool (available through the Maine Association of Nonprofits), purchase another tool, or design your own, you can anticipate that each board member will be asked to consider his/her level of agreement with a series of statements that cover the core responsibilities of board members. The following are examples of the kinds of statements board members will be asked to place on a scale that ranges from "strongly agree" to "strongly disagree":

- Our board has a constructive partnership with the chief executive that is built on trust, candor, respect and honest communication.
- Our board members share a compelling vision for the organization's future.
- During our meetings and in our work together, we allocate an appropriate amount of time to the issues and strategic priorities that matter most.
- Our meetings provide opportunities for constructive, respectful debate of issues.
- Board members put the interests of the organization above all else in making decisions.
- Our board members give and/or raise funds to help us achieve our identified priorities.
- Our board promotes the highest ethical values and ensures appropriate oversight and accountability.
- Our board is results oriented and evaluates the performance of major programs and services.

In a thorough self-assessment process, board members will respond to as many as a dozen statements under headings like "finance," "fundraising," "board recruitment," or "strategic direction." When the responses are compiled, the areas of agreement among board members are just as revealing as those items with a broad range of responses.

Is Your Board Ready for Self-Assessment?

The Process – Step by Step

If you have determined that your board is ready to embark on the board self-assessment process, here are the steps that you can anticipate if you use an on-line self-assessment tool:

1. **Determine who will own the results** – It is essential to know up-front who will be charged with leading the effort and moving the board agenda forward. Find and recruit the champions and make sure they are clear on their ongoing responsibility for this effort.
2. **Make sure that the full board is on board** – Be sure that all board members understand why you are doing this work and what you hope to have as an outcome. In most cases, it is highly advantageous to get the board's commitment to participate in a retreat that will review the results and develop next steps.
3. **Administer the survey** – Send a compelling e-mail message to the board along with a link to the on-line self-assessment. Set a deadline and then plan to prompt, cajole, and nag to get full participation.
4. **Review the results** – Look for the obvious issues, note where there is a significant difference in how board members responded to specific items, and consider the comments. Most organizations find it helpful to work with a consultant who can assist in interpreting the results and provide information as to how the responses compare to those of other organizations.
5. **Provide the board with results** – In advance of a board retreat, share the results with the entire board.
6. **Hold a board retreat** – It is enormously helpful to have the board conduct its own section-by-section analysis of the results. The board members perceptions of the issues and problems are most important. Having a neutral facilitator or consultant lead them through this process is highly recommended.
7. **Develop a governance agenda** – Often started during the retreat, it is essential to talk about the next steps and how to move this work forward. Having a clear “to do” list for the board is a must!
8. **Activate your governance committee** – Whether you have a formal committee or not, the champions you recruited (see step #1) need to set a meeting schedule and begin moving forward on the governance agenda.

Is Your Board Ready for Self-Assessment?

9. **Keep it alive** – So many other things can get in the way of this work. Set a monthly schedule of meetings to keep moving on the governance agenda and don't ever cancel those meetings. This work should be ongoing.

Frequently Asked Questions

Is a retreat required? Our board doesn't like retreats.

We find that it is always best to engage the entire board in considering the results and talking about strategies. With capable facilitation, this work can often be done successfully in 4 hours, so a full-day retreat may not be required. An alternative is to provide the board with an overview of the results and then go into much greater detail with the governance committee or executive committee. This is not as desirable, however.

What if some board members don't complete the self-assessment?

If you have a healthy majority of the board, don't let this discourage or distract you. Getting full, or almost full, participation in the retreat is more important.

We don't have a governance committee. Can the executive committee do this?

The executive committee will always be distracted by other events and activities. Even a small governance committee of 2-3 people who are focused on this work will be better.

Is this something we can do on our own, or do we need a consultant?

You are likely to find it helpful to have someone look at the results with you and facilitate the retreat, if nothing else. A facilitator or consultant can ask questions and probe for responses where a board or staff member might feel uncomfortable. Also consider whether you may need assistance in providing expertise or facilitation to the governance committee. Keeping the work moving forward sometimes requires the regimen that a consultant can provide.

How do we ensure that the board chair or executive director won't take the results personally?

While the self-assessment is about the work of the board as a whole, it is possible that organizational leaders can review the results and feel like they are personally responsible for any low scores or negative comments. Leaders who embark upon this kind of effort deserve enormous praise for beginning the conversation and constant reminders that, "this is not about you... it is about us as a board."

Is Your Board Ready for Self-Assessment?

This may be too big of an undertaking for our board and our organization at this moment. Any thoughts on making it manageable?

Those organizations that don't appear to have the capacity, board interest, or time to start this work are usually the ones who most desperately need to get started. If you need to build board capacity and you have been looking for the right catalyst, the board self-assessment process can be just what is required. Often there is an urgent need for new and capable board members, but it is hard to attract the board members you need if your board is not functioning at a pretty high level. In this "chicken and egg" dilemma, we encourage you to start with board self-assessment, develop a board governance agenda, take some corrective actions, and then begin your recruitment process.

Final Thoughts

Volunteer board members deserve to have engaging and rewarding volunteer experiences. Nonprofits deserve to have the leadership and support of a board that brings their best to every meeting and to the organization. The board self-assessment process is a great way to see whether your board and your organization are meeting these mutual goals. Remember, however, that providing your board with a board self-assessment tool to fill out is just the starting point. This is a long journey that should proceed at a steady pace. Ideally, every step along the way will result in a stronger board and a stronger organization.

Congratulations on starting the journey. Please tell us about what you learn along the way so that we can share it with others, and don't hesitate to contact Starboard Leadership Consulting with your questions or comments. Send your e-mail to Jeff Wahlstrom at cjw@starboardleadership.com. We look forward to hearing from you!