



Ontario Psychiatric Association

DIALOGUE

THE NEWSLETTER OF THE ONTARIO PSYCHIATRIC ASSOCIATION / UNE PUBLICATION DE L'ASSOCIATION DES PSYCHIATRES DE L'ONTARIO



JUNE

2006



MESSAGE FROM THE PRESIDENT

Dear Colleagues:

As I reported in the last issue of Dialogue, Council did meet to develop a strategic plan, which will set the direction for the Organization over the next two years. This plan is the beginning of a focused effort aimed at increasing our effectiveness and utilizing our resources to the best advantage for our members. Each strategy has been worked into an "on the ground" action plan. In this issue of the newsletter we share our strategy and priorities. In subsequent issues we will communicate our progress in each of the five identified priorities.

Since we now have a strong focus, we were able to determine a president's theme that reflects our direction. In addition, given that the strategic plan spans two years, I am pleased to report that Dr. Richard O'Reilly, the next OPA President has agreed continue the theme for an additional year. Therefore, the OPA President theme for the next two years is "Relationships and Partnerships". The issues facing psychiatry and mental health in Ontario are daunting. However, we are fortunate that there are many individuals and organizations who are working to improve the mental health care system and in doing so, improve the quality of life for Ontario citizens.

The OPA has a major role to play in setting the mental health agenda for the province. However, we recognize that by collaborating with others we can expand our influence and go beyond what we can accomplish independently. I am convinced that the sum will be greater than the parts with this approach.

In order to achieve the important goals we have set, and to really speak for psychiatry in a meaningful way, we need every psychiatrist in Ontario on board. Nothing can replace the power of the personal touch, and therefore I encourage each of you to speak with your colleagues about joining the OPA!

We are also making some changes to the upcoming Annual Meeting based on what we have heard from our members. We will move away from a three-day conference in January to a two-day conference in February. Please make note of the information in Dialogue and plan to attend and/or submit an abstract.

As the warm weather approaches, I wish all of you a pleasant summer with time for family, friends and fun.

Please contact me through the OPA office at any time opa@bellnet.ca

*Susan Abbey, MD, FRCP
2006 OPA President*



Ontario Psychiatric Association
Executive and Council



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Dr. Susan Abbey



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Dr. Richard O'Reilly



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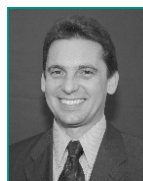
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The views expressed in this newsletter do not necessarily
reflect the views of the OPA Council.*

FROM THE EDITOR

With the strategic plan setting the direction for the next two years and a President theme that also spans two years, the OPA can now focus time and energy on issues that make the best use of volunteer and staff time to move the Organization forward. The theme of *Relationships and Partnerships* underscores our commitment to working collaboratively with other groups who share common interests for psychiatry and mental health. The theme and the strategy will combine to allow us to take on a greater role in setting the mental health agenda for Ontario. Details about our progress will be a regular feature in the Dialogue.

The Continuing Education Committee is making changes to the Annual Meeting. The date, which has traditionally been in January, has been moved to February and the conference will take place over two days rather than three. In this issue of Dialogue there is a Call for Abstracts. Please take time before the summer to submit an abstract or encourage a colleague to do so.

As always, your comments, suggestions and ideas are welcome at any time.

From the Council and staff of the OPA, we wish you a safe and enjoyable summer.

June Hylands
Editor

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Change of Venue!

The OPA Fall Conference will now be held in conjunction with the CPA's Annual Conference

Please make note of the following changes:

Date: Saturday, November 11th, 2006
Location: The Royal York Hotel, Room TBA
Featuring: *Dr. Lewis Aron*
Topic: Relational Therapy
AM Session: *The Relational Matrix: Psychotherapy and Psychoanalysis Re-Examined*
PM Session: *Birth Fantasies and Myths of Origin: A Case Presentation*

Registration will be limited!
For more information visit us at www.eopa.ca.



CALENDAR OF EVENTS

Members! Contact the OPA with the details on upcoming educational events and we will do our best to include them in the *Dialogue*. Additional information on these events can be obtained from the OPA Head Office.

August 20-23, 2006 - 139th Annual Meeting Of The Canadian Medical Association

Delta Prince Edward Hotel and Convention Centre
Charlottetown, PEI
For more information and to register visit www.cma.ca

October 25-27, 2006 - CASP Conference 2006

Complexity of Suicide: Prevention, Intervention and Aftermath

University of Toronto Conference Centre - 89 Chestnut Street, Toronto, Ontario
Conference Website: <http://www.suicideconference2006.ca/>
Preliminary Program and Call for Abstracts - <http://www.cme.utoronto.ca/PDF/PSR0601.pdf>
For more information contact the Conference Secretariat at 416-978-2719
Toll Free: 1-888-512-8173 - Fax: 416-946-7028 - E-mail: ce.med@utoronto.ca

November 11, 2006 - The Psychotherapy Section of the OPA presents their Annual Fall Conference

Speaker Dr. Lewis Aron discussing Relational Therapy

AM Session: *The Relational Matrix: Psychotherapy and Psychoanalysis Re-Examined*
PM Session: *Birth Fantasies and Myths of Origin: A Case Presentation*
Location: The Royal York Hotel, Room TBA
For more information please visit us at www.eopa.ca.

November 12-14, 2006 - Second International Conference on Interpersonal Psychotherapy: Extending the Reach of IPT

Location: Toronto, Ontario
Study Credits - College of Family Physicians of Canada Mainpro-M1 Royal College of Physicians & Surgeons of Canada - AMA Category 1
Abstract Submission Deadline: July 3rd, 2006 - Link to Call For Abstracts:
<http://www.cme.utoronto.ca/PDF/PSR0623.pdf>
For further information visit: <http://www.utpsychiatry.ca/conference/isipt2006/>
Or contact the Conference Secretariat at ce.med@utoronto.ca

Why join the OPA?

Dedicated to excellence in psychiatric education, advocacy, representation and the advancement of public policy.

The Ontario Psychiatric Association was incorporated in 1956. Dr. Edward Ryan, Superintendent of Rockwood Hospital, established the Ontario Neuro-Psychiatric Association in 1920.

Objectives of the Ontario Psychiatric Association:

- **EXCHANGE** of scientific information
- **PROMOTE** an optimal level of professional development and practice
- **ADVOCATE** for persons with mental illness and their families
- **REPRESENT** the members in their relationships with governments at all levels, universities, other medical associations and other associations
- **PROMOTE** the prevention of mental disorders in Ontario

Member Benefits:

- Access to specialty Sections, workshops and courses
- Opportunities for networking
- Peer Mentorship Programme
- Registration discounts for the Annual Conference
- Complimentary membership for Residents and longstanding members
- Voting privileges at the Annual General Meeting and general meetings (Full Member, Life Member and Member in Training only)
- Opportunities for maintenance of competence and continuing education credits
- Effective representation to the Canadian Psychiatric Association

- Joint partnership, with the Ontario Medical Association Section on Psychiatry, by means of the Coalition of Ontario Psychiatrists
- *Dialogue* - the quarterly Association Newsletter provides up-to-date information on issues affecting psychiatry and psychiatric practice

Other Information:

- Standing Committees: Advocacy, Communications, Continuing Education, Finance/Audit, and Member Services
- Membership Categories:
Full Member - is a legally qualified practitioner who is licensed to practice medicine in Ontario and is:
(a) Registered as a specialist in psychiatry by the Royal College of Physicians and Surgeons of Canada, and is in active practice, or,
(b) Teaching psychiatry in a university or other senior psychiatric position.

Member-in-Training - is a person who is registered in an approved, psychiatric, post-graduate training programme, or, in an undergraduate medical programme, in Ontario.

Associate Member - is any person who is a legally qualified medical practitioner or who occupies a position in nursing, psychology, social work, occupational therapy, or any other profession or occupation, closely related to psychiatry.

Life Member - is any Member who has reached the age of 65 and whose years of age and years of Full Membership totals 80 in the Association.

For more information about the OPA please visit our website at www.eopa.ca.

Ontario Psychiatric Association - Council Meeting AGENDA

Date: Friday April 7th, 2006
Time: 10:00 - 5:30 P.M.
Location: Ontario Medical Association - Small Board Room 525 University Avenue, 2nd Floor, Toronto

1.0 *Remarks from the President and Approval of Agenda*

2.0 *Approval of Minutes of January 25th and January 28th 2006*

3.0 *Strategic Planning*

- 3.1 Review the process
- 3.2 List and discuss the issues
- 3.3 Cluster the issues into categories

4.0 *Business Arising*

- 4.1 President Theme Update

5.0 *Treasurer's Report*

- 5.1 Report on finances

6.0 *Reports of Task Forces and Committees*

- 6.1 Advocacy Committee

6.2 Communications Committee

6.3 Continuing Education Committee

6.4 Finance/Audit Committee

6.5 Member Services Committee

7.0 *Standing Reports*

7.1 CPA Reports

7.1.1 Directors

7.1.2 Council of Provinces

7.1.3 Standing Committees

7.1.3.1 Education

7.1.3.2 Professional Standards & Practice

7.1.3.3 Scientific & Research

7.2 OMA Section on Psychiatry

7.3 Working Group on Mental Health Services

7.4 Coalition

7.5 Section Reports

8.0 *New Business*

Interesting Websites For You To Explore

http://www.parl.gc.ca/common/Committee_SenRecentReps.asp?Language=E&Parl=39&Ses=1

Out of The Shadows At Last

Transforming Mental Health, Mental Illness and Addiction Services in Canada

This link is to the final report of The Standing Senate Committee on Social Affairs, Science and Technology.

www.mhsio.on.ca - Mental Health Service Information Ontario (MHSIO) - is a province-wide information and referral service providing Ontarians with round-the-clock access to information about mental health services and supports across the province. Service is provided in over 140 languages to consumers, families, service providers and others seeking information about mental health resources.

The toll-free number for this service is 1-866-531-2600.

www.wingsofmadness.com - This website is for people and/or families of people suffering from clinical depression. In it's eleventh year. It addresses the often debilitating illness which affects one in five people, children as well as adults. It includes various sections including articles, a webguide and communication

www.pendulum.org - Pendulum Resources is a web based consumer resource for information on Manic Depression and Bipolar Disorder, and is the web presence of the Pendulum Email list, an on-line support group for Manic-Depressives. Unless otherwise indicated, information on this site is by consumers, for consumers.

www.canadian-health-network.ca - The Canadian Health Network is a website of the Public Health Agency of Canada. The Canadian Health Network feels that health promotion helps us to understand the many influences on our health from social and environmental factors such as housing, income, education, clean air and a sense of belonging, to our everyday choices about diet and exercise.

It is a wealth of information to help consumers prevent disease and make healthy choices for yourself and your community.

The OPA Adopts a Strategic Plan

The Council of the Ontario Psychiatric Association met on April 7th 2006 to develop a strategic plan to guide the Organization over the next two years. The purpose of the planning exercise was to

1. Provide a summary of the current issues and perspectives on key matters that impact Ontario psychiatrists and their patients.
2. Acting collectively, and in a spirit of collaboration, develop plans and initiatives for the OPA over the next two years.
3. Identify priorities and timelines to implement a meaningful “go forward” plan for the OPA.

Participants listed and examined issues facing the profession and the Organization. Strategies were then identified to address those issues. These were clustered into “issue groupings” and then prioritized using *seriousness, urgency and growth* as the criteria.

Seriousness: From your perspective rate the issue in terms of its seriousness. (High, medium, low)

Urgency: Regardless of the seriousness of an issue, some things are time sensitive. Independent of other indicators, how urgent is the issue? (High, medium, low)

Growth: If this issue is not addressed immediately, will it get worse, stay the same or get better?

Many issues and suggestions were identified under the categories of: advocacy, mandate, relationships and partnerships, membership, communication and education.

Five issues were identified as the focus for the OPA over the next two years.

1. Membership growth
2. Developing relationships / partnerships
3. Increasing the profile of the OPA
4. Ensuring relevance to our members
5. Increasing revenue

As these issues are accomplished, or in the process of being managed, Council can move on to other items that were identified.

It is worth noting that there are many issues and challenges facing psychiatry and the mental health system. Council is aware of the number and complexity of the issues. This list is not meant to negate the scope of the concerns. However, the priorities chosen were, at least in part, selected as they

1. Impact the OPA as an effective organization for members
2. Can be pragmatically influenced by the OPA

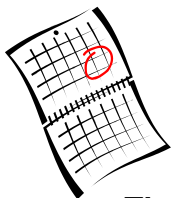
The following summary comes from Dr. O'Reilly and appears to anchor the direction of the strategic plan.

“We need organizational renewal focusing on increasing membership and securing our finances as the most urgent issues. To attract and keep psychiatrists to the Association we need to be seen to be relevant. Relevancy requires that we are seen to be a strong advocate for our patients. It will also be achieved through our role as a CME provider.”

In order for the strategic plan to be implemented, operational, “on the ground” actions must be developed to support the strategy. Many strategic planning efforts fall short of their intended value as a result of insufficient operational and business plan development and because the plan is not utilized as a tool to continue the work. Determining the strategic directions and priorities is an important first step, which has been completed. Specific actions have been developed so that Council can

- Track progress
- Identify “slippage”
- Make “course corrections” as necessary
- Continue to add actions to the list as the work progresses and the need becomes apparent

Each action has been delegated to a committee or individual. As we move forward Council will use the *Dialogue* to keep OPA members apprised of the work and how it relates to the stated strategic direction.



Mark Your Calendars for the OPA 87th Annual Conference!

The 2007 conference is being held *February 23rd & 24th, 2007*
at the Marriott Eaton Centre Downtown ~ 525 Bay Street

Abstract submissions are now being accepted. The deadline for submissions is October 13, 2006. Please see the Call for Abstracts in this issue of Dialogue, or visit us online at www.eopa.ca to submit.

The Association of General Hospital Psychiatric Services (AGHPS) provided the following update to the OPA on its past and future activities:

The American Psychiatric Association conference was held in Toronto from May 20th-25th 2006. Although the exact number of participants is not currently available, it is estimated that the Conference attracted approximately 20,000 psychiatrists from around the world to Toronto. This was, therefore, a rare opportunity to access a large number of non-Ontario psychiatrists within a short time frame and provide them with information regarding practicing in Ontario.

The Ministry of Health and Long Term Care provided one time funding for the AGHPS to actively promote and recruit psychiatrists for positions in Ontario.

The AGHPS contacted the Schedule I hospitals throughout Ontario, asking for a summary of psychiatric positions available and information about their hospital and community. We received information about specific vacancies. These were consolidated onto one list - current vacancies with a short position description and contact information. We also received brochures and "print pieces" about specific hospitals.

The AGHPS hosted an exhibit booth. In addition to printed information, we had staff and psychiatrists on hand to answer questions and promote the benefits of practicing in Ontario. At least one psychiatrist was available during the entire conference to meet with interested colleagues from outside Ontario. In addition, the AGHPS held a small reception for those psychiatrists who expressed an interest in meeting other colleagues in an informal social setting.

The traffic to the booth was quite steady, although it slowed considerably by the last day (May 24th). Most psychiatrists were interested in determining what the credentialing requirements would be. They were also interested in the consolidated list of vacancies and the level of compensation. The map of Ontario was of interest and quite a few psychiatrists asked about distances, weather, etc.

Although there were hospital brochures at the booth, most psychiatrists did not want to carry so much material and were interested in the basics credentialing, list of vacancies and who to contact. We did distribute AGHPS business cards and indicated that we could arrange to facilitate meetings if/when they were further along in their decision making process. Overall, we were able to reach a large number of psychiatrists. The project appeared to be effective, although this is difficult to quantify without actually "signing up" psychiatrists. We were left with an impression that at least a couple of psychiatrists were actively seeking practice in Ontario, several were seriously considering a move to Ontario, many left with a better understanding of the professional issues.



The Ontario Psychiatric Association (OPA)

Annual Conference

Call For Abstracts

Face Sheet

Call for Papers
Deadline for Submission is October 13th 2006.
Please fill out the face sheet below and fax to 905-849-8606 or go online at www.eopa.ca.

Title: _____

Senior Author: _____ OPA Member: [] Yes [] No

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Co-Authors/Panellists:

(Please include names of all participants as you wish them to appear in the Annual Conference Final Programme)

Name	City/University	OPA MEMBER	
		Yes	No

Submission Type:

- [] Symposium (2-3 hours)
- [] Workshop (1.5 hours)
- [] Oral Presentation (20 minutes)
- [] Poster

Length of Presentation:

Please indicate the amount of time requested: _____

Paper Sessions: I wish my paper to be submitted for the following paper session. (Circle all that apply)

- | | |
|-------------------------------|---|
| 1. Diagnosis & Consultation | 8. Psychotherapies |
| 2. Administration | 9. Psychopharmacology & Organic Therapies |
| 3. Education | 10. Mental Health Act |
| 4. Community & Rehabilitation | 11. Forensic |
| 5. Psychosomatic | 12. Basic Science Research |
| 6. Child & Adolescent | 13. Family, Women's & Men's Issues |
| 7. Psychogeriatrics | 14. Other (specify) _____ |

Audio Visual Aids:

A laptop computer, LCD and screen will be provided in each presentation room. If you require any additional audio visual aids please specify: _____

Are you receiving funding from industry for your presentation? If so, please note your affiliation.

Official Abstract Form

To submit this portion of the abstract you will need to go online at www.eopa.ca.

Please note: When preparing your abstract, use "Arial" font with 11-pitch font size for the entire document. DO NOT use bolding, italics, underlining, etc. Use both uppercase and lowercase lettering as appropriate (e.g. Macdonald).

Title: _____

Abstract: (Please use a separate page if extra space is required)

Learning Objectives: (Please provide 2-3 - these objectives should describe what the participants will learn in terms of knowledge, skills or attitude - e.g. Your statement might be: "At the end of this session, the participants will be able to") *(This is a necessary component for accreditation under M.O.C.)*

(1) _____

(2) _____

(3) _____

Self Assessment Questions: *(This is a necessary component for accreditation under M.O.C.)*

(1) _____

(2) _____

Two References:

(1) _____

(2) _____

Types of Submissions

Symposium

90 to 120 minutes in duration. Ideally, a symposium should include several participants from different institutions, areas of the province or disciplines.

Workshop

90 to 120 minutes in duration. These focus on specific topics and are particularly aimed at skill transmission including case analysis, skills building or role-play.

Course

2 hours, 3 hours or 5 hours in duration. Courses are designed to provide an overview of an area. They may be offered at introductory or advanced levels.

Paper Session

15 minutes followed by a 5 - 10 minute question period led by the speaker(s).

Video Session

Videos related to psychiatric disorders and mental health issues. The presenter will be asked to introduce and lead a discussion regarding their video.

Poster Session

There will be a formal poster session (time to be determined), but we ask that posters be on display throughout the meeting.

N.B. Under Maintenance of Certification (M.O.C.) Guidelines, all submissions must allocate a minimum of 25% of the time for audience interaction (i.e. discussion period, Q & A)

Personal Continuing Education Needs and The OPA Annual Meeting

1. In my practice, my three most important current educational needs are:

- 1.
- 2.
- 3.

2. My learning needs include review lectures on:

3. Special Workshops/Courses that would be of interest to me are:

4. Suggested speakers for the major academic lectures are:

5. Political and economic issues relevant to Ontario Psychiatrists that I would like addressed in a special forum are:

6. Other suggestions:

Please fax this form by October 13th, 2006 to:

Ontario Psychiatric Association

Fax: 905-849-8606

344 Lakeshore Rd. E, Suite B, Oakville, ON L6J 1J6

Regulation of Psychotherapy

Many of our members have expressed an interest in the issue of regulation of psychotherapy. The following is provided for information and is taken directly from HPRAC's report "Regulation of Health Professions in Ontario: New Directions". (Chapter 7 - Regulation of Psychotherapy).

The Minister's Question

In February 2005, the Health Professions Regulatory Advisory Council (HPRAC) received a referral from Hon. George Smitherman, Minister of Health and Long-Term Care, in which he sought advice from HPRAC on:

whether psychotherapy should be an additional controlled act under the Regulated Health Professions Act, 1991, (RHPA) and if so, which regulated professions should have psychotherapy in their scopes of practice and how standards should be set and measured; and

whether psychotherapists should be regulated under the RHPA as a profession, what their scope of practice should be and what controlled acts they should be authorized to perform, as well as any protected titles, and whether it is appropriate that psychotherapists be regulated under an existing profession-specific act.

11. Conclusions

Psychotherapy and psychotherapists are not regulated in any comprehensive or consistent way in Ontario. Anyone, with or without credentials, may practice psychotherapy and call him/herself a psychotherapist.

Psychotherapy is provided by a spectrum of practitioners, ranging from regulated health professionals (physicians, psychologists, social workers), to those with master's degrees in psychology plus specialized training in psychotherapy, and those who have little or no formal training.

Overwhelmingly, respondents to HPRAC's *Discussion Guide* and speakers at public consultations told us that the practice of psychotherapy by unskilled practitioners pose a risk of harm to the public. Harm may result from inappropriate assessment and treatment, delayed referral to qualified professionals, and abuse of clients sexually, emotionally and financially. The potential for abuse is heightened when psychotherapy is practiced in isolation without supervision or peer support.

The potential for harm to vulnerable clients has been recognized by other jurisdictions, which are considering regulation or have introduced regulatory schemes.

HPRAC's analysis supports a conclusion that the potential for harm by unskilled or unscrupulous practitioners of psychotherapy calls for regulatory intervention. HPRAC has examined a number of regulatory options, including 1) the creation of a registry 2) amending the RHPA harm clause; 3) title protection; 4) title protection with scope of practice; 5) regulating unregulated practitioners under an existing college; and 6) designating a new controlled act for psychotherapy under the RHPA.

HPRAC evaluated these options while weighing the public interest, the need for professional accountability, and access issues. HPRAC concluded that title protection and an enforceable scope of practice provide the best balance, and that the most appropriate statutory vehicle is the RHPA, which provides a comprehensive yet flexible approach to regulation.

Following a reasonable transition period, during which practitioners would be asked to submit information to the Transitional Council as part of a provincial Registry of List, HPRAC recommends that a permanent regulatory body, the College of Psychotherapists, be established.

One of the first steps in the regulatory process would require existing regulatory Colleges whose members practice psychotherapy (College of Psychologists of Ontario, College of Physicians and Surgeons of Ontario, Ontario College of Social Workers and Social Service Workers, and the College of Nurses of Ontario) to develop high minimum qualifications, general practice guidelines and continuing competence requirements specific to the practice of psychotherapy for their members who practice psychotherapy. This could be accomplished by means of a directive from the Minister under a provision of the RHPA.

A collaborative interdisciplinary approach to the practice of psychotherapy by Colleges is fundamental to protecting the public interest, and ensuring that people who need psychotherapeutic services can rely on qualified practitioners from a range of disciplines.

A critical consideration is the need for public education, including how to find a qualified practitioner, clients' rights and how to lodge a complaint against a practitioner. A public awareness campaign on the process leading to regulation will be essential for both practitioners and members of the public.

12. Recommendations

HPRAC recommends to the Minister:

1. That psychotherapy and psychotherapists be regulated under the Regulated Health Professions Act.
2. That a College of Psychotherapists of Ontario (Ordre des psychotherapeutes de l'Ontario) should be established.
3. That an enforceable scope of practice of psychotherapy should be defined in the Act, and that the scope of practice should restrict the practice of psychotherapy to certain regulated professionals and that an exemption for certain activities should be included as follows:
 - (1) Psychotherapy is the provision of a psychological intervention or interventions, delivered through a therapeutic relationship, for the treatment of cognitive, emotional or behavioural disturbance.
 - (2) No person other than a member in good standing of the College, the College of Psychologists of Ontario, The College of Physicians and Surgeons of Ontario, The Ontario College of Social Workers and Social Service Workers, and the College of Nurses of Ontario who has met the qualifications specific to the practice of psychotherapy as established by their College shall engage at any time in any of the activities as set out in (10).
 - (3) The act does not apply to counsellors providing information, encouragement, advice or instruction about emotional, social, educational or spiritual matters.
 - (4) Notwithstanding (3), treatment that goes beyond the bounds of counselling should not be exempted.
4. That the Council of the College should be composed of (a) at least six and no more than nine persons who are members elected in accordance with the College's by-laws; (b) at least five and no more than eight persons appointed by the Lieutenant-Governor-in-Council who are not members of the College, another College or Council under the RHPA.
5. That the Council of the College should establish an Advisory Committee to include representatives of the College of Psychologists of Ontario, College of Physicians and Surgeons of Ontario, Ontario College of Social Workers and Social Service Workers, and the College of Nurses of Ontario.
6. That the Council should have a President and Vice-President elected annually by Council from among its members.
7. That every member of the College who practices psychotherapy or resides in Ontario and who is not in default of payment of the annual membership fee should be entitled to vote in an election of members of the council.
8. That the use of the title "psychotherapist" should be restricted to members of the College and members of the College of Psychologists of Ontario, the College of Physicians and Surgeons of Ontario, the College of Social Workers and Social Service Workers, and the College of Nurses of Ontario who are qualified to practice psychotherapy.

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9. That a person who is not a member of the College or a member of the College of Psychologists of Ontario, the College of Physicians and Surgeons of Ontario, the Ontario College of Social Workers and Social Service Workers, and the College of Nurses of Ontario who practices psychotherapy should not represent him or herself as a person who is qualified to practice psychotherapy in Ontario.
 10. That the Lieutenant-Governor-in-Council, on recommendation of the Minister, should appoint, for a period of three years, a Transitional Council, Chair and Vice-Chair.
 11. That the Transitional Council should be composed of a Chair; a Vice-Chair; at least six and no more than nine persons who are currently unregulated practitioners of psychotherapy; at least four and no more than six persons who are nominated by the College of Psychologists of Ontario, the College of Physicians and Surgeons of Ontario, the College of Social Workers and Social Service Workers, and the College of Nurses of Ontario; and at least five and no more than eight persons who are not currently unregulated practitioners of psychotherapy of members of a regulated College or Council under the RHPA.
 12. That the Transitional Council should have the authority to appoint a Registrar and the Registrar and the Council's committees should have the authority to accept and process applications for the issuance of certificates of registration, charge application fees and issue certificates of registration.
 13. That the Transitional Council and its employees and committees should have the authority to do anything that is necessary or advisable until the Council is established.
 14. That upon appointment of its members, the Transitional Council should move immediately to develop:
 - (a) A list of currently unregulated psychotherapists including the names of persons who practice psychotherapy, their education and training, billing practices, as well as the form of psychotherapy that each registrant practices.
 - (b) High minimum qualifications for the practice of psychotherapy.
 - (c) General standards of practice for psychotherapy.
 - (d) Quality assurance programs for psychotherapy.
 - (e) The educational qualifications and equivalency standards to address the registration of currently unregulated practitioners.
 15. That the Minister of Health and Long-Term Care should issue a direction under section 5 (1) (d) of the RHPA, and the Minister of Community and Social Services should issue a direction under Section 11 of the Social Work and Social Services Workers Act, requiring the College of Psychologist of Ontario, the College of Physicians and Surgeons of Ontario, the College of Social Workers and Social Service Workers and the College of Nurses of Ontario to establish high minimum qualifications and general standards for the practice of psychotherapy in their professions.
 16. That where one or more of those Colleges, in the opinion of the Ministers, fails to establish the qualifications and the necessary mechanisms to implement and enforce these qualifications and standards within the time specified by the Ministers in their directives, the qualifications established by the College of Psychotherapists should be deemed to apply.
 17. That subject to the approval of the Lieutenant-Governor-in-Council, and with prior review of the ministers, the Council of the College of Psychotherapy of Ontario should be authorized to make regulations
 - Prescribing high minimum qualifications for the practice of psychotherapy.
 - Prescribing and governing the therapies involving the practice of the profession and prohibiting other therapies.
 - Exempting modalities that do not constitute the practice of psychotherapy.
 - Adding protected titles.
 - Any matter relevant to the profession of psychotherapists and/or the practice of psychotherapy.
 18. That complimentary amendments should be made to the Nursing Act, 1991, Medicine Act, 1991, Psychology Act, 1991 and Social Workers and Social Service Workers Act, 1998.
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Are you moving?

Has your phone, fax or email information changed?
Help keep our database up to date, and please let us know!
Email any updates to the OPA office at opa@bellnet.ca.
Or fax them to 905-849-8606.

MEMBERS ON THE *MOVE* *MOVE* *MOVE*

To get your new appointment in “Members on the Move”, send us the following information - your name, position, date of appointment, the organization you were with and the new organization (if applicable), your email, phone number and address.

We will run these announcements as we receive them, and as space in the *Dialogue* allows. Please forward your items in writing to the OPA Office, 344 Lakeshore Road East, Suite B, Oakville, Ontario, L6J 1J6 or by email to: opa@bellnet.ca. Please ensure these are clearly marked “*Dialogue* Members on the Move”.

Dr. Elspeth MacEwan has recently opened a new office in Ottawa, with a focus on group psychotherapy. They are located at:
613-203-1305 Richmond Road
Ottawa, ON
K2B 7Y4
Phone: 596-4344
For more detailed information visit:
www.mydoctor.ca/dremacewan

