Draft Policy: Activities that Do Not Constitute the Controlled Act of Psychotherapy

This policy articulates CRPO's position on those activities that it does not consider to be part of the **controlled act of psychotherapy**. It is important to note that these activities may be part of the scope of practice of psychotherapy.

Various practitioners providing services in the health, education, social services, victim services and community sectors may have a 'therapeutic' (i.e., beneficial / supportive) relationship with their clients and use psychotherapy techniques occasionally as an ancillary part of their duties. However, this does not necessarily constitute a psychotherapeutic relationship, where the intention is to engage in psychotherapy.

In order for a Registered Psychotherapist (RP) to engage in the controlled act of psychotherapy:

- there must be a psychotherapeutic relationship between client and RP;
- the RP must be providing treatment intended to help individuals improve mental health and wellbeing;
- the RP must be using a technique that is captured by the categories of prescribed therapies;
- the client must be suffering from a serious disorder of thought, cognition, mood, emotional regulation, perception or memory; and
- the client's disorder may seriously impair the individual's judgement, insight, behaviour, communication or social functioning.

CRPO has developed a list of activities that are deemed to be *outside* the controlled act of psychotherapy. Registered Psychotherapists may do some of these activities as an ancillary activity within the scope of their psychotherapy practices, but providing only the services below would not constitute the controlled act. These activities include, **but are not limited to**:

- Advocating
- Applied Behavioural Analysis
- Case management
- Clinical follow-up/care and discharge planning
- Coaching
- Coordinating services
 - o Parental coordination
- · Counselling and support
 - o advising / advice giving
 - o instruction
 - assisting in resolution of dilemmas
 - assisting in improvement of coping strategies
- Crisis intervention/management
 - de-escalation
 - safety planning
 - o referral to other services
- Hypnotherapy
 - smoking cessation
- Information/advice and knowledge transfer
 - instructing
- Intake and referral

- Mediating
- Milieu therapy / milieu-based interventions
- Monitoring
- Problem solving
 - o information and advice giving
 - o 12 step program
 - o social skill development
 - o instruction
 - o emotional regulation
- Psychometric testing or assessment
- Rehabilitation
 - helping an individual to deal with the physical symptoms of a medical illness.
 - resuming activities of daily life
 - learning or relearning skills that assist in carrying out the activities of daily life
- Single session counselling
- Spiritual or faith guidance/counselling
- Teaching
 - o social skill development
 - emotion regulation
 - prescriptive programs