

COUNCIL AGENDA

Date: Thursday, September 16, 2021
Time: 11:35 p.m. to 3:35 p.m.
Location: Zoom video conference
Chair: Shelley Briscoe-Dimock, President

	Time	Item	Materials	Pg. #	Action	Presenter
WELCOME & INTRODUCTIONS						
1.	11:35	Welcome and Opening Remarks			Information	S. Briscoe-Dimock
2.	11:36	Approval of Agenda	1. Draft Agenda		Decision	S. Briscoe-Dimock
3.	11:37	Conflict of interest declarations <i>Council will be asked to complete and return the Conflict-of-Interest Declaration form to document their status relative to the agenda.</i>			Information	S. Briscoe-Dimock
DISCUSSION & DECISIONS						
4.	11:40	Professional Practice Working Group Composition <i>Council is being asked to approve a slate for the Professional Practice Working Group (PPWG) and to approve the draft terms of reference.</i>	1. Briefing Note 2. Draft PPWG terms of reference		Discussion, Decision	M. Pioro
5.	11:55	Access to Care Statement Review <i>Council is being asked to approve proposed revisions to the Access to Care Statement.</i>	1. Briefing Note 2. Revised Access to Care statement		Discussion, decision	M. Pioro
6.	12:00	Standard Review Policy <i>Council is being asked to approve the proposed Standard Review policy as recommended by the Quality Assurance Committee</i>	1. Briefing Note 2. DRAFT Standard Review Policy		Discussion, decision	K. Lomp, M. Pioro

7.	12:10	<p>Election of Officers</p> <p><i>Before the vote, candidates will be given the opportunity to speak briefly. Elections will then be held using the voting function in the Zoom meeting.</i></p>	<p>1. Briefing Note</p> <p>2. CRPO By-laws Schedule 1</p>		Decision	D. Adams
LUNCH (12:30-1:30)						
8.	1:30	<p>Governance Reform Initiative: Succession Planning</p> <p><i>a. Council is being asked to approve the proposed amendments to CRPO by-laws related to term of office.</i></p> <p><i>b. Council is also being asked to review and approve the draft committee appointments and succession planning policies for adoption.</i></p>	<p>1. Briefing Note</p> <p>2. DRAFT Committee Appointments Policy</p> <p>3. DRAFT Succession Planning policy</p>		Discussion, Decision	S. Briscoe-Dimock
9.	2:00	<p>By-law amendments</p> <p><i>Council is being asked to review the public consultation feedback and discuss the proposed by-law amendments regarding election eligibility and term of office.</i></p>	<p>1. Briefing Note</p> <p>2. public consultation results</p>		Discussion, Decision	S. Briscoe-Dimock
10.	2:10	<p>Non-Council Committee Member Reappointments</p> <p><i>Council is being asked to approve the proposed slate of non-council members for another term of office.</i></p> <p>NEW! 10.1 Committee Appointments</p> <p><i>Council is being asked to approve by consensus the appointment of new public member, Grishanth Ram, to</i></p>	<p>1. Briefing Note</p>		Discussion, Decision	S. Briscoe-Dimock

		<i>the Registration and Nominations and Elections Committee.</i>				
11.	1:50	<p>Governance Reform Initiative: Policy Review</p> <p><i>Council is being asked to look at several existing CRPO policies as part of the ongoing review cycle, and to reach consensus to approve the revisions.</i></p>	<ol style="list-style-type: none"> 1. Briefing Note 2. Accepting Reimbursement for College travel expenses 3. Council Observer Guideline 4. Recording Council meetings 5. Reimbursing CRPO Guests 		Discussion, Decision	S. Briscoe-Dimock
INFORMATION						
12.	2:15	<p>Board Evaluation update</p> <p><i>Council will receive and discuss the efficacy and meeting pulse survey results, providing any feedback for next year's evaluation.</i></p>	<ol style="list-style-type: none"> 1. Briefing Note 2. Council Evaluation Components 3. Q1 & Q2 CRPO meeting evaluation reports 		Information, discussion	S. Briscoe-Dimock, C. Pettit (Pollinate)
BREAK (2:50-3:00)						
13.	3:00	<p>2020-2021 Annual Report & Audited Financial Statements</p> <p><i>Council will receive the final version of the annual report, including audited financial statements for information. The report will be submitted to the Minister of Health following the Council meeting.</i></p>	<ol style="list-style-type: none"> 1. Annual Report 2020-2021 (incl. audited financial statements) 		Information	S. Briscoe-Dimock, J. Falkenburger, S. Slater (Welch LLP)
14.	3:15	<p>Registrar's Remarks</p> <p><i>Council will have the opportunity to ask questions related to the Registrar's written report.</i></p>	<ol style="list-style-type: none"> 1. Registrar's Report 		Information	D. Adams

15.	3:25	<p>Consent Agenda</p> <p><i>Consent agenda items are non-controversial or routine items that are discussed at every meeting. Council members seeking clarification or asking questions regarding consent agenda items must be directed to the President prior to the meeting. Consent agenda items can be moved from the consent agenda to regular discussion items if required. The Consent agenda will be approved under one motion.</i></p>	<p>Draft Minutes: May 13, 2021</p> <p>Committee Reports:</p> <ol style="list-style-type: none"> 1. Discipline 2. Examination 3. Executive 4. FTP 5. Inquiries, Complaints & Reports 6. Quality Assurance 7. Registration 		Motion	S. Briscoe-Dimock
16.	3:30	<p>Council Question Period</p> <p><i>Council members are invited to pose questions that are of interest and relevant to registrants and stakeholders.</i></p>			Information	S. Briscoe-Dimock
17.	3:35	ADJOURNMENT			MOTION	S. Briscoe-Dimock
		<p>a. Confirm Meeting & Prep Time</p> <p>b. 5-minute meeting evaluation</p> <p>c. Next Meetings:</p> <ul style="list-style-type: none"> • December 2, 2021 <p>d. Scheduling 2022 Council Meetings (dates TBD)</p>				

Briefing Note for Council

Meeting Date:	September 16, 2021
Agenda Item #	4
Issue:	Professional Practice Working Group Composition
Attachment(s):	Appendix A: Draft PPWG Terms of Reference
References:	<ul style="list-style-type: none"> • Committee competency matrix • Committee composition matrix
Action:	Information <input type="checkbox"/> Discussion <input type="checkbox"/> Decision <input checked="" type="checkbox"/>
Staff Contact:	D. Adams, M. Piro
Submitted by:	Executive Committee

Purpose & Public Interest Rationale:

All policies, standards of practice, and practice guidelines used by CRPO should be up to date and relevant to the current practice environment.

The collective knowledge, experience and perspective of Council members should be used when developing or amending policies, standards and practice guidelines to ensure that CRPO takes into evidence and data; the risk posed to clients and the public; and the current practice environment.

A Professional Practice Working Group (PPWG) will provide a forum for knowledge of practicing clinicians to inform resource development and will promote coordination between parallel initiatives across Council and Committees.

Source of Authority:

[CRPO's by-law 12.02](#) provides for the creation of additional non-statutory committees.

“Committee” means a committee of the College and includes statutory committees established under section 10 of the Code, standing committees, ad hoc committees, planning groups and working groups and any other committee established by Council under these by-laws

Background:

The draft PPWG terms of reference (attached, to be approved) state that working group composition includes:

- *professional members of Council, typically the committee chair (or their designate) of each of Executive; Registration; Quality Assurance; Inquiries, Complaints and Reports; and Client Relations, as well as a public member.*
- *non-Council members if Council wishes.*

From time to time, the Working Group may invite guest Council or non-Council members, and other subject matter experts, to provide necessary advice to the Working Group.

At the June Executive meeting, staff was asked to reach out to professional and public members for interest in serving on the PPWG. The Executive Committee considered availability and defined Council and committee competencies, as well as creative options such as rotating members or inviting expert guests.

Key Considerations:

The PPWG will advise the Registrar on professional issues that affect different committees and provide related direction across core regulatory function. This group will be asked to support the work of evaluating policies, standards of practice, and practice guidelines and other resources to determine whether they are appropriate, or require revisions, or if new direction or guidance is required based on the current practice environment.

Invitations to registrants and other stakeholders to participate in or inform the efforts of the Working Group will be made with a view to promoting diversity, equity and inclusion so that these principles and values are evident in the resulting work.

Note from the attached draft Terms of Reference:

- As an ad hoc, non-statutory working group, the Professional Practice Working Group provides advice and recommendations, and does not have formal authority.
- The Working Group advises the Registrar. The Working Group will report to Council at some, though not necessarily all scheduled meetings. Reports to Council are to be provided in writing with the explicit purpose of informing the work of Council and framed to identify public interest issues.

Recommendations:

Executive Committee recommends:

- adopting the Professional Practice Working Group terms of reference; and,
- appointing the proposed slate of working group members:
 - Shelley Briscoe-Dimock, RP (Executive & ICRC Chair)
 - Kenneth Lomp, RP (QAC Chair)
 - Andrew Benedetto, RP (Registration Chair)
 - Sue Lymburner, RP (Client Relations Chair)
 - Keri Selkirk (Public Member)
 - David Keast (Public Member)

Type of document: Terms of reference	Approved by: Council
Date approved:	Next Review date:
Amendment Dates:	

Appendix A: Professional Practice Working Group Terms of Reference

Name and type	Professional Practice Working Group Ad Hoc
Purpose	To ensure the knowledge of practicing clinicians informs policy and resource development. To promote coordination between parallel initiatives across Council and Committees.
Specific Areas of Responsibility	<ol style="list-style-type: none"> 1. Acting as an advisory body to the Registrar on professional practice and regulatory risk management issues. 2. Applying professional knowledge to policy and resource development, particularly regarding inter-committee initiatives where connections may be necessary or appropriate. 3. Acting as a resource to CRPO committees by: <ol style="list-style-type: none"> a. advising on the development of specific professional practice policies and resources, considering the context of clinical practice settings; b. reviewing and making recommendations on specific professional practice policies and resources; c. reviewing professional practice policies and resources and making recommendations.
Composition	<p>Members of the Working Group shall be appointed by Council for a period of one year.</p> <p>Membership of the Professional Practice Working Group shall consist of:</p> <ul style="list-style-type: none"> • professional members of Council, typically the committee chair (or their designate) of each of Executive; Registration; Quality Assurance; Inquiries, Complaints and Reports; and Client Relations, as well as a public member. • non-Council members if Council wishes. <p>From time to time, the Working Group may invite guest Council or non-Council members, and other subject matter experts, to provide necessary advice to the Working Group.</p>
Competencies	Working Group members are required to meet the minimum Council Competencies and Committee Competencies .
Decision-Making Process	Wherever possible, decisions will be made by consensus. Where necessary, formal voting will be used.

Delegated Authority	As an ad hoc, non-statutory working group, the Professional Practice Working Group provides advice and recommendations, and does not have formal authority.
Reporting	The Working Group advises the Registrar. The Working Group will report to Council at some, though not necessarily all scheduled meetings. Reports to Council are to be provided in writing with the explicit purpose of informing the work of Council and framed to identify public interest issues.
Appointment of Chair	The Working Group will select a Chair from among its members.
Quorum	The quorum is three (3) members unless otherwise provided in the Code or the by-laws or unless the Working Group is composed of only three (3) members, in which case, the quorum for such a Working Group shall be two (2) members. Despite anything in the by-laws, a Working Group is properly constituted despite any vacancy so long as there are sufficient members to form a quorum of the Working Group.
Meetings	Working group meetings will, wherever possible, be held at a place and on a date set in advance and shall occur on an ad hoc basis and at such frequency as necessary for the Working Group to conduct its business.
Staff Support	The Registrar acts in an ex-officio role as a Working Group resource and in a non-voting capacity. Other staff members provide support to the Working Group.
Communication with Council	The Working Group Chair will report to Council as needed, depending on the nature of the work undertaken by the Working Group.
Records	The Working Group Chair will ensure that notes of all Working Group meetings and proceedings are recorded and maintained at the College office.
Conflict of Interest	All Working Group members have a duty to carry out their responsibilities in a manner that serves and protects the interest of the public. As such, they must not engage in any activities or in decision-making concerning any matters where they have a direct or indirect personal or financial interest. All Working Group members have a duty to uphold and further the intent of the <i>Psychotherapy Act, 2007</i> to regulate the profession of psychotherapy in Ontario, and not to represent the views of advocacy or special interest groups.
Inquiries	Inquiries relating to the work of the Working Group should be forwarded to the Registrar or staff member providing support to the Working Group.
Public Communications	Media inquiries regarding activities of the Working Group, regulation of the profession, or operation of the Council or College shall be forwarded to the Registrar. The Registrar and President act as spokespersons on behalf of the College.

Parliamentary Authority

Schedule 2 of the by-laws outlines the Rules of Order of Council.

DRAFT

Briefing Note for Council

Meeting Date:	September 16, 2021
Agenda Item #	5
Issue:	Access to Care Statement Review
Attachment(s):	Appendix A: DRAFT revised Access to Care Statement
References:	CRPO Regulatory Objectives
Action:	Information <input type="checkbox"/> Discussion <input type="checkbox"/> Decision <input checked="" type="checkbox"/>
Staff Contact:	M. Pioro
Submitted by:	Executive Committee

Purpose & Public Interest Rationale:

One of CRPO’s five regulatory objectives is to “promote access to mental health services within the system.” A clear statement on this issue supports registrants, associations and mental health system partners to advocate for the removal of barriers to access to mental health care.

Reviewing the existing statement, making any necessary updates and disseminating the updated version will support the maintenance of cooperative and collaborative work that aligns the oversight of the profession with evolving needs within the province’s health care system and is responsive to changing public expectations.

Background:

CRPO’s [Position Statement on Access to Care](#) was approved by Council in November 2018. The Council briefing note from that meeting is still relevant today [present-day notes in brackets]:

For context, specific barriers include that RPs: are not on the approved list of providers to complete referral letters for gender affirmation surgery [has not changed];

cannot sign Ontario Disability Support Program applications [has not changed];

are not included in the list of regulated providers in the Financial Services Commission of Ontario’s Professional Services Guideline for care related to motor vehicle accidents [there have been changes in this regulatory sector, but RPs are still not defined as “health practitioners” for the purpose of completing specific insurance-related forms];

are required to bill HST on their services [has not changed].

Additional barriers include the limitations on or absence of coverage for RP services in third party insurance coverage available to many individuals [this has gradually improved].

CRPO has been asked to engage in these issues – including those that relate to fees and compensation - through requests from associations and from individual members. Members attending the town halls in October [2018] repeatedly expressed concern about their ability to provide care in the face of these barriers. However, as a regulatory college, it would not be appropriate for CRPO to take a position supporting how much or how members are compensated and so staff has been cautious in their responses.

Nevertheless, as the body charged with the public protection, it may be appropriate for the College to take a position with regards to barriers to access to care provided by RPs. Therefore, with due consideration given to the limits of the regulatory mandate, the Council is being asked to consider adopting a position statement on access to care that would support the recognition of the RP title, affirm CRPO's efficacy in protecting the public and acknowledge the role that members play in the provision of mental health services in Ontario.

Key Considerations:

Council is asked to review the Position Statement on Access to Care. It includes suggested revisions in tracking. Specifically, the number of registrants has been updated, the scope of practice has been added, and there are edits for clarity.

Consider what additional changes may be appropriate.

Recommendations:

Executive Committee recommends that Council approve the proposed revisions to the Access to Care Statement.

Appendix A: Position Statement on Access to Care

The College of Registered Psychotherapists of Ontario (CRPO) supports measures to remove barriers that are challenging equitable access for Ontarians to the care that Registered Psychotherapists (RPs) are well-positioned to provide.

A strong regulatory environment means that all stakeholders in the health care system can be confident in the quality of care provided by RPs. The College of Registered Psychotherapists of Ontario is committed to establishing and maintaining the standards for qualified and accountable psychotherapy services in Ontario. As the provincial regulator of Ontario's more than 68,520 RPs [NTD: Staff proposes to periodically update this number without bringing back for substantive reconsideration by Council], protecting the public is our primary mandate.

The scope of practice of RPs is the "assessment and treatment of cognitive, emotional or behavioural disturbances by psychotherapeutic means, delivered through a therapeutic relationship based primarily on verbal or non-verbal communication."¹

Since 2015, CRPO has established and implemented regulatory mechanisms that provide accountability for safe, ethical and competent psychotherapy practice, including:

- ensuring anyone applying for registration with CRPO meets rigorous educational standards before they can practise as an RP or use the protected title "Registered Psychotherapist"
- establishing and enforcing standards and guidelines for the practice and conduct of registrants
- upholding the quality of care by developing a robust quality assurance program to ensure registrants continually improve their skills and knowledge
- responding to complaints and reports about the care provided by registrants

The public has grown to expect that RPs will be accessible registrants-partners of their care teams, whether in ~~both~~ private practice, and in community health care organizations, in the community as well as or in hospitals. However, some challenges in the delivery system remain, impeding access to care that RPs are well-positioned to provide. By leveraging the growing number of RPs within ~~the~~ system broadly, the province's mental health care services could be better optimized, resulting in improved access to appropriate continuity of care with providers and in the setting of choice.

¹ *Psychotherapy Act, 2007*, S.O. 2007, c. 10, Sched. R, section 3.

Briefing Note for Council

Meeting Date:	September 16, 2021
Agenda Item #	6
Issue:	Professional Practice Standards review approach and cycle
Attachment(s):	Appendix A: Policy Proposal & Draft Standard Review Policy
References:	-
Action:	Information <input type="checkbox"/> Discussion <input type="checkbox"/> Decision <input checked="" type="checkbox"/>
Staff Contact:	E. Beaton, M. Piore
Submitted by:	Quality Assurance Committee

Purpose & Public Interest Rationale:

Registrants and the public benefit from clear, appropriate, and up-to-date practice standards.

Background:

CRPO's inaugural practice standards were approved in January 2014, well before CRPO began regulating the profession in April 2015. Since then, CRPO has received many instances of feedback on the standards. CRPO has also gained practical experience through QAC, ICRC, registration and the Practice Advisory about where which standards are confusing, problematic or challenging for registrants, and what might be missing from them.

A comprehensive review of the Standards is due. The Ontario Ministry of Health, in their [College Performance Measurement Framework](#) (CPMF), expects the following of all health regulatory colleges:

All policies, standards of practice, and practice guidelines are up to date and relevant to the current practice environment (e.g. where appropriate, reflective of changing population health needs, public/societal expectations, models of care, clinical evidence, advances in technology).

a. The College has processes in place for evaluating its policies, standards of practice, and practice guidelines to determine whether they are appropriate, or require revisions, or if new direction or guidance is required based on the current practice environment.

b. Provide information on when policies, standards, and practice guidelines have been newly developed or updated, and demonstrate how the College took into account the following components:

- i. evidence and data,
- ii. the risk posed to patients / the public,

- iii. the current practice environment,
- iv. alignment with other health regulatory Colleges (where appropriate, for example where practice matters overlap)
- v. expectations of the public, and
- vi. stakeholder views and feedback

To make this significant initiative manageable, staff is proposing a policy that enables standards to be reviewed as needed, or periodically (no less than every five years). The standards do not all need to be reviewed at the same time. Some standards will require little changes, while others will require more adjustments or enhancements.

Staff proposes the following steps for standards review:

- Working on one or a few standards at a time
- Presenting QAC with research and a preliminary review
- Seeking initial direction in reviewing or revising a standard
- Conducting additional research or consultation
- Returning to QAC with a more concrete draft for approval for broad consultation
- Revising in light of feedback for review by QAC and final approval by Council

Key Considerations:

- Is the above approach clear and manageable?
- How often is the Committee prepared to meet, and how much meeting time should be devoted to each standard?
- What background research or presentation format would help QAC do this work?

Next Steps:

- Staff will continue to present the QAC with standards for review. An initial discussion of Standard 1.7 and possible revisions occurred at the QAC meeting on July 26th.
- That Council approve the attached draft *Standard Review Policy*.

CRPO Policy Proposal

Staff contact:	M. Pioro, E. Beaton
Group responsible for maintaining and approving the policy:	Council on recommendation from QAC
Submission Date:	September 16, 2021
Policy proposal type:	<input checked="" type="checkbox"/> new <input type="checkbox"/> revision <input type="checkbox"/> rescind
Policy title:	Standard Review Cycle

Rationale

1. Is the proposed policy consistent with [mission, vision, values, strategic plan, and regulatory objectives of CRPO](#)?

Yes (developing and maintaining practice standards, falls within multiple strategic plan domains including Trusted Authority, Clear Communications, Effective Infrastructure).

2. Why is the policy needed (or not)? What is the problem or risk of harm the policy intends to address?

The CPMF requires CRPO to have up-to-date standards, processes for reviewing standards, and criteria for the development of standards. The public can be harmed if standards are not up-to-date or are not based on appropriate input from the public and profession.

3. Analyze the risk:
 - a. What is the severity and occurrence of the risk?
 - b. What are the causes of the risk?
 - c. Are the risks currently managed?
 - d. Where and why is the problem occurring?
 - e. Can the problem be solved locally, by communication, or by education?
 - f. Is there a regulatory solution in line with the principles of good regulation (see CRPO Regulatory Objective #3)?

N/A. This is a general policy, not a specific standard.

4. Who would be affected by the policy? For example: clients, registrants, stakeholders, Council members, etc.

This policy primarily applies to CRPO staff, committees and Council, though it may also influence when and how CRPO seeks consultation with external stakeholders.

5. Are there risks or unintended consequences to the proposed policy, and if so, are these outweighed by the benefits?

N/A.

6. What are alternatives to the proposed policy and their implications?

N/A.

7. Indicate relevant evidence and data that supports developing or changing the policy:

This policy is based on the requirements of the CPMF.

8. Is the policy consistent with the current practice environment? For example, the policy reflects changing population's health needs, public/societal expectations, models of care, clinical evidence, advances in technology.

N/A.

9. Does the policy align with other regulatory colleges where appropriate? For example, where practice matters overlap.

Other health profession colleges are subject to the same CPMF requirements as CRPO.

10. Have appropriate experts and/or stakeholders provided input into the policy?

N/A.

11. Is the policy consistent with legislation, and is legal review required?

No. This policy is not based on specific legal requirements.

12. What kind of public consultation is required, if any?

This policy sets out the general approach to how CRPO reviews and updates standards. It is primarily an internal process document. It mentions broad consultation when new or revised standards are developed. However, the Standard Review Policy itself likely does not require consultation.

13. What is the communication and implementation plan, if the proposed policy is approved?

The policy will be posted publicly on the CRPO website. Staff and QAC will implement it by reviewing practice standards on an ongoing and as needed basis. As this is primarily an internal policy, additional communication and implementation is not required.

Type of policy: Regulatory	Approved by:
Date approved:	Next Review date:
Amendment dates:	

Standard Review Policy

Background

In professional regulation, a standard is the minimum expectation regarding a registrant's conduct. While standards can be unwritten expectations held by the profession, many are codified by the regulator following research and consultation with the public and profession. CRPO uses the *Professional Practice Standards for Registered Psychotherapists* for a number of purposes, for example:

- To communicate the minimum level of performance expected of all registrants
- As evidence in disciplinary hearings
- To establish benchmarks for professional behaviour which are used in QA programming and education and monitoring programs

The Standards are also used by registrants and stakeholders. For example, registrants will use the Standards to understand what is expected of them generally. They may also use the Standards to understand specific legal obligations or to address specific matters that arise in practice.

Educators, clinical supervisors and employers rely on standards to understand the obligations of those working within the profession, and, among other things, may rely on the standards as they assess or manage the performance of students, employees and supervisees.

Given the centrality of the standards, it is necessary that any standards issued by CRPO are up-to-date and effective.

Policy

Evidence-initiated review process

CRPO gathers evidence relating to standards on an ongoing basis. Evidence may be generated from a variety of sources, including but not limited to:

- Stakeholder feedback
- Legal development
- Research articles
- The practices of other regulators or professional associations
- Expert opinions
- Data from CRPO's departments

Evidence will be screened to determine whether immediate review or revision to any standard is required.

Time-based review process

If the evidence-initiated process described above has not prompted a review of a standard within a five year period, CRPO will initiate a review of the standard.

Review criteria

Standards are reviewed in light of:

- i. evidence and data
- ii. the risk posed to clients/the public
- iii. the current practice environment
- iv. alignment with other health regulatory colleges (where appropriate, for example where practice matters overlap)
- v. expectations of the public
- vi. stakeholder views and feedback

Maintaining a record

CRPO maintains a log of reviews and revisions to the *Professional Practice Standards*.

Briefing Note for Council

Meeting Date:	September 16, 2021
Agenda Item #	7
Issue:	Election of Officers
Attachment(s):	Appendix A: Schedule 1 to the By-Laws Process for Election of Officers
References:	CRPO By-laws Executive Committee Terms of Reference
Action:	Information <input checked="" type="checkbox"/> Discussion <input checked="" type="checkbox"/> Decision <input checked="" type="checkbox"/>
Staff Contact:	D. Adams

Public Protection Rationale:

The Executive Committee is established as a statutory committee to provide leadership to Council, to promote governance excellence at all levels, to facilitate effective functioning of the College, and to act on behalf of Council in circumstances requiring immediate action between meetings.

Source of Authority:

The [Health Professions Procedural Code](#) (the Code), which is Schedule 2 to the RHPA, sets out a comprehensive set of rules that all health regulatory colleges must follow, including 10.1 the creation of an Executive Committee(s) 10.1 and the establishing of by-laws providing procedures for the election of officers (s 94 (1) (e)).

[Section 6](#) of CRPO's by-laws addresses the election of officers.

Background:

[Section 13.01](#) of the by-laws state: "The Executive Committee shall be composed of the President, the Vice-President and three (3) members of Council. Three (3) members of the Executive Committee shall be Members and two (2) members of the Executive Committee shall be Public Members."

On August 4, 2021, Council members were provided with the notice of election of officers and nomination forms in accordance with Schedule 1 of the CRPO by-laws (Appendix A). Council members were invited to submit their nominations to run for the positions of President, Vice-President, and three members (at-large) by September 2, 2021, with the election of officers taking place at the September 16 Council meeting.

The following Council members were nominated for the position of **President**:

- Shelley Briscoe-Dimock, RP

As no other nominations were received for the position of President, Shelley Briscoe-Dimock will assume the role by acclamation.

The following Council members were nominated for the position of **Vice-President**:

- Kenneth Lomp, RP

As no other nominations were received for the position of Vice-President, Kenneth Lomp will assume the role by acclamation.

The following Council members were nominated for a position as **Member (Professional)** of Executive Committee:

- Andrew Benedetto, RP
- Michael Machan, RP

As two nominations were received for the position of Member (Professional), an election will take place. The successful candidate will assume the role of Member (Professional).

The following Council members were nominated for a position as **Member (Public)** of Executive Committee:

- Steven Boychyn
- Keri Selkirk

Since the submitted nominations fulfill the requirement that two members of the Executive be public members, K. Selkirk and S. Boychyn will be acclaimed as Executive Committee members (public).

Proposed Motions:

[Be it moved]

1. that Council accepts the acclamation of Shelley Briscoe-Dimock as President;
2. that Council accepts the acclamation of Kenneth Lomp as Vice President;
3. that Council accepts the acclamation of Keri Selkirk as Member (Public)
4. that Council accepts the acclamation of S. Boychyn as Member (Public)
5. that Council accepts the election of _____ as Member (Professional)

SCHEDULE 1 TO THE BY-LAWS

Process for Election of Officers

The elections will be supervised by the Registrar. The Registrar may be assisted by staff.

Before the first regular meeting of the newly elected Council each year or any other Council meeting designated for the purpose by Council resolution, the Registrar shall send an invitation to all Council members requesting any person wishing to stand for election to the offices of the President, Vice-President and Executive Committee member to indicate so, in writing, to the Registrar.

A Member's written intent must be supported by the signatures of two other Council Members and be returned to the Registrar no later than 5:00 p.m. fourteen days before the meeting of Council when the election of officers shall take place. A Member may not withdraw his or her nomination later than 5:00 p.m. fifteen days before the meeting of Council when the election of officers shall take place. The College shall post the names of nominees on its web-site as nominations are received.

At the meeting of Council when the election of officers shall take place, the Registrar shall present the names of eligible candidates who have indicated their interest for the position of President.

Where there is only one nominee for a position, that person shall be elected by acclamation. In the event that there is more than one candidate for the office, the voting will be conducted by ballot, with the result being tabulated and then recorded and reported by the Registrar. Where there are no nominations for a position, nominations can be made from the floor.

Before the vote, candidates shall be given the opportunity to speak briefly (order to be determined by lot). The election of a candidate shall be confirmed by a majority vote of those present and voting.

Where no candidate receives a majority vote, the candidate receiving the fewest votes shall be disqualified and the Council shall, by ballot, vote on the remaining candidates until one candidate receives a majority vote.

In the event of a tie, a second ballot will take place. Candidates will have an opportunity to speak briefly before the vote. If the second ballot also results in a tie, the winning candidate will be determined by lot.

The results of each election will be tabulated and reported by the Registrar and staff, with the number of votes accorded to each candidate to remain confidential.

Once the President is elected, the Vice President shall be nominated and elected in a similar manner. Once the Vice President has been elected, the remaining Executive Committee positions shall be filled in a similar manner ensuring that there is an appropriate number of Members and Public Members.

Once the election is completed, the Registrar shall call for a motion to destroy the ballots. The elected members of the Executive Committee may then speak briefly.

The above process shall be followed for every election of officers after section 6 of the Act is proclaimed into force.

Briefing Note for Council

Meeting Date:	September 16, 2021
Agenda Item #	8
Issue:	Governance Reform: Succession Planning
Attachment(s):	Appendix A: DRAFT Committee Appointment Policy Appendix B: DRAFT Succession Planning Policy
References:	College Performance Measurement Framework Situational Analysis on the State of Governance Council Competency Matrix Committee Competency Matrix Committee Composition Matrix CRPO by-laws 5.02 Term of Office
Action:	Information <input checked="" type="checkbox"/> Discussion <input checked="" type="checkbox"/> Decision <input checked="" type="checkbox"/>
Staff Contact:	M. Pioro / A. Fournier
Submitted by:	Executive Committee

Purpose & Public Interest Rationale:

Council and statutory committee members must have the knowledge, skills, and commitment needed to effectively execute their fiduciary role and responsibilities pertaining to the mandate of the College.

Succession planning helps to ensure that Council and committee membership is comprised of people with a diverse set of skills, attributes and perspectives to work together to fulfill the mandate of public protection. As required in the College Performance Measurement Framework (measure 1.1), statutory committee and Council members must demonstrate that they “have met pre-defined competency / suitability criteria” prior to becoming a member of Council or statutory committee.

Background:

Having a succession planning process in place ensures a well-composed Council and Executive Committee with competent individuals who are willing to serve on Council and as officers. An established, articulated process for recruiting Council members and Executive Committee officers supports a formal, organized approach to recruitment, appointments, and professional development. Further, such a process ensures that the Council will always have a pipeline of qualified individuals to select from when there is an Executive Committee officer vacancy for any reason.

Term of Office

The CRPO by-laws state that the term of office of an elected member of Council begins immediately after the election and will continue for approximately three years ([section 9.04](#)).

Darrel Pink noted, in his report *Situational Analysis on the State of Governance*:

The timing of elections, various appointments and the assumption of committee responsibilities is not logical and results in gaps and substantial time when committees do not operate. Elections are not held on a fixed date. They can occur in May or June, which means the first meeting of a new member may be in June, if the election occurs before the meeting, or in September. The President assumes office in June, but the Executive does not take office until September so the former committee remains. Council members start their committee work in September.

The result is a three month hiatus in most committee work over the summer.

Staff reviewed the by-laws of several other regulatory colleges to determine whether the elected individuals assumed office immediately following the election, or if there was a gap between being elected to serve on Council and being officially appointed to commence their term. Of the ten Colleges¹ staff looked at, seven noted in their by-laws that terms begin at the first regular Council meeting after election. The remaining three Colleges noted that terms on Council commence with the meeting where the election of officers takes place, in conjunction with Council approval of committee composition, and one college provides Council with recommendations from their elections and appointments committee which is then ratified by Council.

Key Considerations:

Governance calendar

The timelines and some of the processes related to Council election and committee appointment are established in CRPO's by-laws; others are the result of historical practice.

These include:

- [10.02 – Election Date](#) (General Elections), which directs an election of members to Council shall be held on a date determined by the Registrar between May and June, inclusive, of each year on a staggered schedule across the electoral districts
- [6.02 – Election Procedure](#) (Executive Officers), which directs that at the first regular Council meeting after the elections for Council members, Council shall elect the President, Vice-President and any other officer positions
- [5.02 – Term of Office](#) (Executive Officers), which directs that the term of office for each officer of the College shall commence immediately following their election as an officer and shall continue until the next election for officers approximately one year later

The election of the Executive Committee has typically taken place in September of each year due to the practice of not holding Council meeting during summer months.

A full review of and recommendations regarding committee appointments have historically been made at the meeting following the election of the Executive Committee (usually November or early December) to allow the new Executive Committee members to review and recommend the committee slate to Council.

¹ College of Midwives, College of Physiotherapists, College of Physicians and Surgeons, College of Occupational Therapists, College of Massage Therapists, College of Dental Surgeons, College of Pharmacists, College of Dieticians, College of Nurses and College of Psychologists.

The impacts of these processes and timelines relative to succession planning and the assumption of leadership roles include:

- the potential for the loss of professional members from the Executive Committee in June should their term end and they choose not to stand / are not re-elected in June
 - o Staggered elections mean that elections are held the same year in either two (Central – which has two seats, and Ontario) or three districts (North, East and Central East or West, South West and Central West), which could possibly lead to a changeover of three professional Executive Committee members in a given year
- we note that the potential loss of public members at any point exists given that CRPO has no control over re-appointment or re-appointment dates
- no ability to identify or develop Council members to assume leadership roles because of the 'open' nature of the elections and lack of specific requirements (beyond Council membership) for candidacy
- the expectation that anyone running for an Executive Committee position will be able to assume the duties of their position immediately following election
 - o for professional and public members, who serve on Council in a part-time capacity, this may not be reasonably achieved. This requirement could be a deterrent to qualified members of Council who would, given ample time, be able to readjust professional or personal schedules to serve on the Executive.
- for professional members who are newly elected in May or June, the practice has been for Executive Committee to appoint them to committees (with Council ratifying these appointments at their next meeting) based on the vacancies created by the end of the term of the professional Council member leaving the seat. This means that limited consideration can be given to matching the competencies of newly elected professional member to the needs of all committees.

Staff would also note that Darrel Pink concluded in his governance review that the lack of a meeting immediately following general elections and the typical delay in appointments effectively leads to a 'summer hiatus' that paused work plans. His recommendation was that this be addressed through the addition of an earlier meeting, an acceptance that committee appointments are a Council function (and so not dependent on recommendations from incoming the Executive Committee) and a standing meeting follow committee appointments to review and re-affirm terms of reference and workplans.

Recommendations:

Council should consider:

- adopting the DRAFT Committee Appointments policy (attached as Appendix A). The purpose of the policy is to establish a transparent process regarding the appointment of individuals to serve on committees, working groups, and task groups of Council.
- adopting the DRAFT Succession Planning policy (attached as Appendix B). The policy is meant to ensure that Council and committee members in leadership roles possess the competencies, knowledge, and experience necessary to provide continuity and direction for the College to achieve its strategic objectives.

- how to establish mechanisms through policy and / or by-law changes, within the existing election requirements of the Health Professions Procedural Code, to identify and develop Council members to assume leadership roles
- consider a by-law change to delay the commencement of Executive Committee terms to sometime after election (e.g., elect Executive Committees in June immediately following the general election with a term that commences in September, allowing the previous Executive to remain in office for those three months)

Executive Committee recommends that Council make a by-law amendment so that Executive Committee terms office start after the next regular Council meeting, versus immediately after their election.

The effect of this amendment would be to delay the start of the newly elected Executive until the day of the next regular Council meeting. The incumbent Executive is still constituted and could conduct business until that next regular Council meeting.

The proposed by-law amendment should be accompanied by a policy or calendar practice of holding the general Council election in May and scheduling the next Council meeting in June (during which committee appointments and officer elections take place), followed by the next Council meeting in September (during which the new officers start their terms, including the new President – if different – who chairs the September Council meeting).

Note: The proposed by-law amendment is included in agenda item 8 By-law changes as part of a broader review of amendments that is being presented for Council's consideration.

Proposed Action:

1. that Council reach consensus to adopt the Committee Appointments policy as presented (or amended)
2. that Council reach consensus to adopt the Succession Planning policy as presented (or amended)

Type of policy: governance	Approved by: Council
Date approved:	Next Review date:
Amendment dates:	

Appendix A: DRAFT Committee Appointments

Purpose

The purpose of this policy is to establish a transparent process regarding the appointment of individuals to serve on committees, working groups, and task groups of Council.

Relevant Legislation

[CRPO By-laws](#)
[Committee Terms of Reference](#)
[Non-Council Member Appointments Policy](#)

Context

This policy applies to the annual appointment and reappointment of elected professional members and government-appointed public members of CRPO Council. It may also be used in conjunction with the Non-Council Member Appointments Policy.

Selection Criteria

As stated in the CRPO by-laws (13.10, 13.14), when making committee appointments, Council will consider:

- Location of practice
- Experience
- Expertise
- Availability
- Qualifications and characteristics to complement the attributes of other committee members

Committee Appointment Procedure

Annually, after the CRPO Council elections have closed, the Executive Committee will meet to recommend appointment of individuals to serve on statutory and non-statutory committees. These recommendations will be presented to Council for approval.

In addition to the eligibility criteria and the considerations noted in the by-laws, the Executive Committee may take the following into consideration when making committee appointment recommendations to Council:

- Professional competencies & committee-specific competencies (e.g., modality of practice, adjudicatory experience, mediation, etc.)
- Practice setting (e.g., hospital, rehab hospital/centre, community, private practice, etc.)
- Practice demographics (e.g., geographic location in the province, clients served, rural or urban, French-speaking, etc.)
- Previous years on Council as an elected professional member & previous performance

- Interest
- Recommendations from committee chairs
- The College's strategic plan and regulatory objectives

Term of Office

The term of office of a committee member is approximately one year (13.12), with the possibility of reappointment.

Committee Diversity

When appointing individuals to committees, diversity is actively considered. Individuals appointed to committees should represent the diversity of the public that the CRPO serves to protect, and will strive to include diversity of race, gender, ethnicity, sexual orientation, gender identity, disability, perspective, and experience.

DRAFT

Type of policy: Governance	Approved by: Council
Date approved:	Next Review date:
Amendment dates:	

Appendix B: DRAFT Succession Planning

Purpose

The purpose of this policy is to ensure that Council and committee members in leadership roles possess the competencies, knowledge, and experience necessary to provide continuity and direction for the College to achieve its strategic objectives.

Relevant Legislation

[CRPO by-laws](#)

Definitions

Leadership roles are defined as:

- Committee Chair
- Executive Committee member-at-large
- Panel Chair
- President
- Vice-President

Scope

This policy applies to elected and appointed members of Council and committees.

Policy

Leadership positions require experience, advanced competencies, and focused learning. Each year via the Council evaluation process, Council members are invited to assess their current knowledge and skills and may express their interest in preparing for or taking on leadership positions. The [Council Competency Matrix](#) establishes the minimum competencies and attributes required for members to excel in leadership positions. Diversity, in accordance with the [Committee Composition Matrix](#), is also considered in appointing members to leadership positions.

When Council members identify their interest in leadership positions, along with any areas for further development in knowledge, staff will facilitate the training and education needed to develop advanced skills and competencies. The College provides a mix of in-house and external training based on Council and committee members' needs, as well as opportunities for 'guest chairing'.

Non-Council members, including former Council members, play an important role in leadership continuity. By appointing non-Council members to committee leadership positions where appropriate, CRPO has a larger pool of capable leaders to draw from. Appointing non-Council members as committee and panel chairs is also in line with the modern governance practice of separating governance and regulatory functions.

Eligibility

Elected professional members and appointed public members of Council should have experience and advanced competence as a Council or committee member prior to pursuing leadership roles. Non-Council committee appointments should likewise have experience and advanced competence on a committee before being considered for committee or panel chair positions.

DRAFT

Briefing Note for Council

Meeting Date:	September 16, 2021
Agenda Item #	9
Issue:	By-law Amendments
Attachment(s):	Appendix A: Public Consultation Feedback
References:	College Performance Measurement Framework
Action:	Information <input checked="" type="checkbox"/> Discussion <input checked="" type="checkbox"/> Decision <input checked="" type="checkbox"/>
Staff Contact:	M. Piro
Submitted by:	Executive Committee

Purpose & Public Interest Rationale:

Public interest requires that Council members have the competencies to govern the College effectively. While to some extent these competencies will develop while a Council member is serving in their role, some level needs to be held prior to taking on the position. The public interest also requires Council candidates not to be in a conflict of interest that would prevent them from effectively serving as a Council member.

Background:

The College Performance Management Framework (CPMF) has established standards expected of College councils related to competency and conflict of interest (as it relates to serving on a professional association). The Executive Committee reviewed these requirements and proposals made by staff to consider by-law changes that would be required to align with the key performance indicators set through the CPMF.

On May 13, 2021, Council approved the by-law amendments noted below for 60-day public consultation.

Eligibility for Election:

The College Performance Measurement Framework (CPMF) expects that:

Professional members are eligible to stand for election to Council only after:

1. Meeting pre-defined competency / suitability criteria, and
2. attending an orientation training about the College's mandate and expectations pertaining to the member's role and responsibilities

To date, CRPO elected Council members have been required to complete orientation and training after they are elected. Council proposed that this practice be adjusted so that Council candidates must complete some training modules before running for election.

CRPO has developed Council competency criteria and plans to implement annual evaluation. It is proposed that some aspect of Council competency criteria be applied before a candidate runs for election.

Minimum waiting period:

The CPMF also requires that: “The College enforces cooling off periods”. A footnote in the CPMF explains, “Cooling off period refers to the time required before an individual can be elected to Council where an individual holds a position that could create an actual or perceived conflict of interest with respect to his or her role and responsibility at the college.”

Currently, CRPO’s by-law article 10.04(viii), requires an elected Council member to resign any responsible position with a professional association before taking office as a Council member. This means an individual could immediately transition from, for example, President or board member of a psychotherapy professional association, into the role of a CRPO Council member, with no pause in between. This could lead to an actual or perceived conflict of interest. Specifically, it could be actual or perceived that the individual would approach their Council role with advocacy on behalf of the profession in mind.

Council proposed a minimum waiting period of one year. A one-year minimum waiting period after serving with a professional association is a compromise between risking a conflict of interest if the period is too short and reducing the pool of Council candidates if the period is too long.

Term of Office:

In addition to the eligibility and waiting period by-law changes, the Executive Committee reviewed the term of office (as noted in agenda item 7: Succession Planning) as it relates to the ability to support Council members in participating effectively as executive officers. The proposed delay in assuming office (which will likely be a delay from June until September) will assist professional and public members in preparing for the time commitment involved with Executive Committee work.

An amendment to by-law section 5.02 did not require public consultation as it is highly internal in nature.

Key Considerations:

The public consultation closed on July 15, 2021. Four responses were received (see attached).

When reviewing the public consultation responses and the proposed by-law amendments, Council should consider:

- Respecting the election framework. There is a risk that an overly extensive screening process or lengthy waiting period could cause confusion among registrants or raise allegations of unfairness.
- The CRPO Council Orientation modules are a low-stakes education activity with an accompanying work sheet/quiz. Presently, these modules are completed by candidates after they are elected. The by-law amendment, if approved, will require all candidates to complete a portion of the orientation modules to qualify for nomination. Much like the jurisprudence module, the by-law would use language allowing Council to set or approve the training. This would allow Council to make substantive changes to the training without having to amend the by-laws. Minor edits or additions could be made to the

training without seeking Council approval. Additionally, the content and delivery platform of the orientation could evolve over time.

- Staff will discuss the length of the module of over 100 slides (see here¹). Consider, as some stakeholders raised, whether these requirements would discourage diverse candidates from serving on Council, and whether the important benefit of pre-election orientation outweighs this risk.
- Regarding the work sheet/quiz, a process like the jurisprudence module is proposed. Namely, feedback is provided on correct and incorrect answers. If a candidate's score is low (<50% correct), the candidate will be requested to reflect on and modify the specific answers they answered incorrectly.
- a Council competency self-assessment form that a candidate is required to complete and submit to the College as part of their nomination package. The self-assessment would allow potential candidates to decide for themselves whether they feel prepared to run for Council. It would also communicate to them CRPO's expectations. It would allow CRPO to have a sense of incoming Council members' qualities. As an incremental measure, the self-assessment would not be used substantively to refuse a candidate, though this could be implemented with due care in the future.
- a one-year waiting period after serving with a professional association is a compromise between risking a conflict of interest if the period is too short and reducing the pool of Council candidates if the period is too long.

Next Steps:

In the long-term, Council may consider building upon the current Council Orientation modules and accompanying work sheet/quiz. Consider how to have a nomination committee evaluate candidates' competencies.

Recommendations:

Executive Committee recommends that Council approve of the following proposed amendments to the College by-laws, as indicated below by track changes.

Proposed Motions:

[Be it moved]

"5.02 – Term of Office

The term of office for each officer of the College shall commence immediately at the next regular Council meeting following their election as an officer and shall continue until the next election for officers, approximately one year later.

"10.04 – Eligibility for Election

¹ <https://www.crpo.ca/wp-content/uploads/2021/05/2021-05-13-Council-Meeting-package.pdf#page=17>

A Member is eligible for election to Council if the Member has been nominated in accordance with the by-laws, has completed and returned the conflict of interest and Council competency questionnaires and if...,”

“10.11 – Conflict of Interest and Council Competency Questionnaires

The Registrar shall request every nominee to complete and return a conflict of interest questionnaire and a Council competency questionnaire, and any nominee who fails to complete and return the questionnaires in the form and by the deadline set by the Registrar shall not be eligible for election.”

“10.14 – Acclamation

If, following the deadline for the return of the conflict of interest and Council competency questionnaires and the written confirmation of eligibility, the Registrar determines that the number of eligible candidates nominated for a position or positions for an electoral district is less than or equal to the number of members of Council to be elected for a position or positions in that district, the Registrar shall declare those candidates who are eligible for election to the position or positions to be elected by acclamation and shall notify the candidates and the membership of this result in the manner the Registrar deems most expedient and practical.”

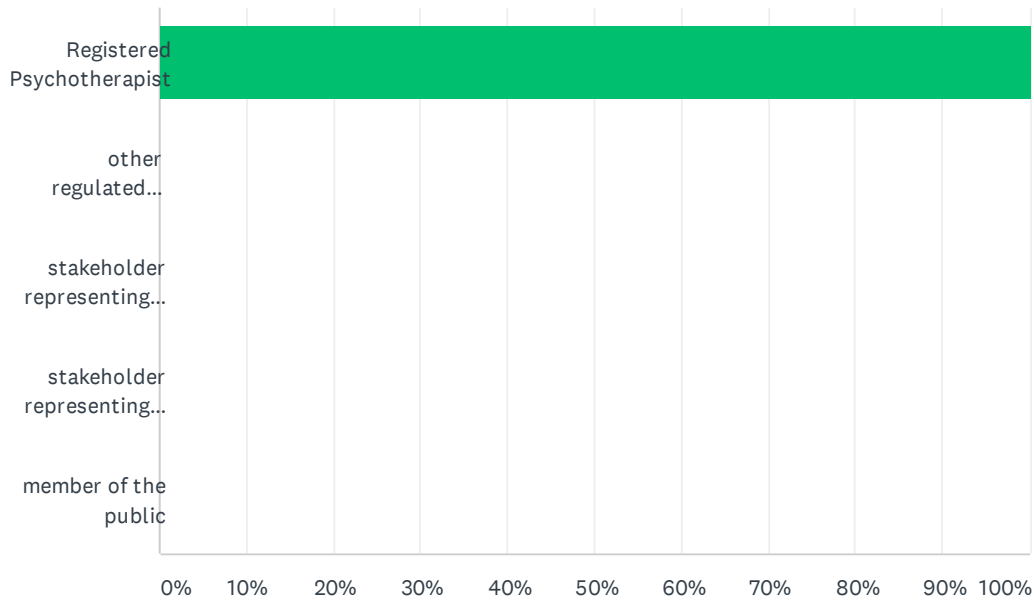
“10.095 Council Role Orientation

No Member is eligible for election as a member of Council unless they have completed the candidate orientation course that was set or approved by Council.”

“(viii) the Member has agreed to resign, no less than one year before the date of the election, any responsible position such as director, board member, officer or employee that the Member holds with a Professional Association relating to psychotherapy, by completing and returning the conflict of interest questionnaire, and if elected, to resign any such position before taking office as a Council member;”

Q1 Are you a:

Answered: 4 Skipped: 0

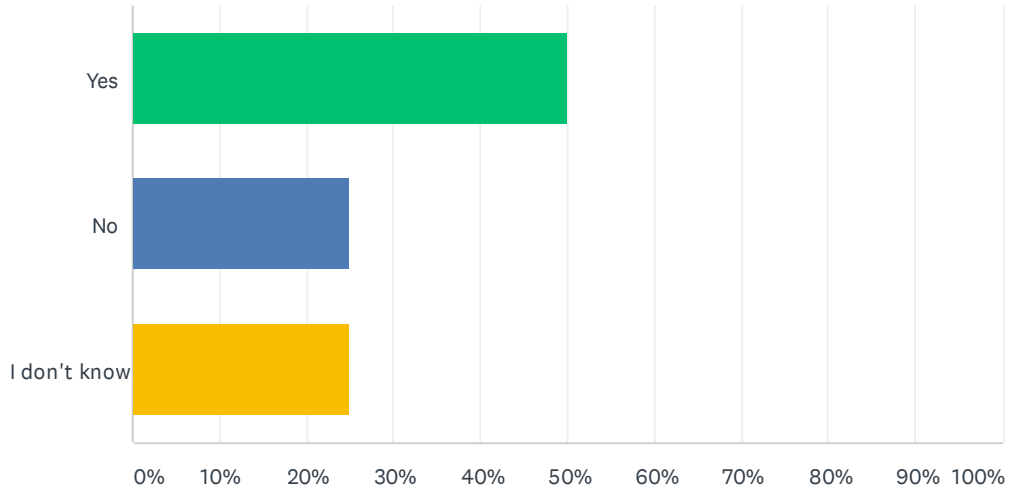


ANSWER CHOICES	RESPONSES	
Registered Psychotherapist	100.00%	4
other regulated professional	0.00%	0
stakeholder representing a professional organization	0.00%	0
stakeholder representing a service-providing organization	0.00%	0
member of the public	0.00%	0
Total Respondents: 4		

#	OTHER (PLEASE SPECIFY):	DATE
	There are no responses.	

Q2 Do you support the proposed by-law changes?

Answered: 4 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	50.00%	2
No	25.00%	1
I don't know	25.00%	1
TOTAL		4

Q3 Please provide your comments here (optional):

Answered: 2 Skipped: 2

#	RESPONSES	DATE
1	I understand what is being proposed and I can understand why it might be a good idea, I am wondering how much of a deterrent these new measures will be and whether CRPO will then have difficulty filling the spots on council. I do a lot of volunteer work and I don't think I would go through what's being proposed here. But maybe it's just me.	6/14/2021 2:41 PM
2	The proposed by-law is discriminatory and allows those in leadership to continue to exert control and power over the marginalized. A council competency is not necessary prior to standing for election because elected council members can participate in the orientation after the election. If you allow the council competency to take place, you are creating more barriers for visible minorities in the profession who already have many barriers in their profession such as racism in the psychotherapy profession. If CRPO supports an inclusive environment, then remove barriers that hinder marginalized groups from participating. .	6/8/2021 4:14 PM

Briefing Note for Council

Meeting Date:	September 16, 2021
Agenda Item #	10
Issue:	Non-Council Member Reappointments
Reference(s):	Non-Council Member Appointments Policy CRPO by-laws
Action:	Information <input checked="" type="checkbox"/> Discussion <input checked="" type="checkbox"/> Decision <input checked="" type="checkbox"/>
Staff Contact:	D. Adams

Purpose & Public Interest Rationale:

Having a substantive pool of non-Council committee appointments can support effective and efficient completion of committee business, particularly in ensuring required panel composition. Having a selection of well-oriented, skilled registrants means that there is less likelihood of conflict of interest and panel issues can be resolved in a timelier manner.

Non-council appointments are mindfully selected registrants who contribute to panel and committee discussions and decisions. Using the competency framework as part of the selection of appointees supports Council in ensuring an adequate mix of skills, knowledge and attributes as well as geographic and modality diversity.

Source of Authority:

[Section 13.11](#) of CRPO's by-laws allows for the appointment of members (registrants) to any Committee.

Background

In July 2020, the Executive and Nominations & Elections Committee underwent a rigorous recruitment process to fill eight non-council member committee appointments on various statutory committees. Using a rigorous interview process, based on the Competency Matrices and considering a commitment to increasing the diversity of perspective on Council, appointments were made. The professionals appointed have participate in training and education and have served on all committees, contributing to CRPO's public protection mandate.

Key Considerations:

The by-laws provide for the appointment of non-Council members as follows:

13.11 – Appointment of Non-Council Members

Subject to any specific composition requirements in these by-laws, Council may, at its discretion, appoint Members who are not members of Council to any Committee.

13.12 – Term of Office of Committee Members

The term of office of a Committee member shall commence immediately after the appointment and shall continue for approximately one (1) year, unless the appointment was to fill a vacancy in which case the Committee member shall complete the original term of office.

Management and committee chairs discussed the performance of non-council appointments over the course of the last 12 months. Staff then asked non-council appointments if they were interested in continuing to serve another term. Those who confirmed their interest in continuing their work as non-council committee members for another year are noted under recommendations.

Next Steps:

In terms of next steps, staff is asking for direction from Council to recruit at least one additional registrant to serve as a non-Council member on the Inquiries, Complaints and Reports Committee (ICRC).

Recommendations:

It is recommended that Council direct staff to recruit at least one additional registrant for an appointment to ICRC.

Proposed Motion:

That Council reappoint the following non-Council members for one-year terms, beginning October 1, 2021.

1. Elda Almario, RP (Registration)
2. David Bruce, RP (ICRC)
3. Felipe Cepeda, RP (Examination)
4. Carol Cowan-Levine, RP (Discipline/FTP)
5. Kayleen Edwards, RP (QAC)
6. Sue Lymburner, RP (Client Relations)
7. Muriel McMahon, RP (Registration)
8. Ahil Nageswaran, RP (Registration)
9. Kafui Sawyer, RP (ICRC)

Briefing Note for Council

Meeting Date:	September 16, 2021
Agenda Item #	11
Issue:	Governance Reform Initiative: Policy Review
Attachments:	Appendix A: Policy Proposal & Draft Policy Reimbursement for College Travel Expenses Appendix B: Policy Proposal & Draft Council Observer Guideline Appendix C: Policy Proposal (to rescind) Recording Council Meetings Appendix D: Policy Proposal & Draft Policy Reimbursing CRPO Guests
References:	College Performance Measurement Framework CRPO policies CRPO Work Plan
Action:	Information <input checked="" type="checkbox"/> Discussion <input checked="" type="checkbox"/> Decision <input checked="" type="checkbox"/>
Staff Contact:	A. Fournier
Submitted by:	Executive Committee

Purpose & Public Interest Rationale:

Policies provide a framework for consistent decision-making and implementation and serve as a primary tool for Council and committees to regulate and protect the public. Having a consistent and transparent policy review process in place helps to ensure policies are relevant and align with the College's values while maintaining relevance in the ever-changing regulatory environment.

Additionally, the College Performance Measurement Framework (CPMF) Domain 5: Regulatory Policies, requires that the College "has processes in place for evaluating its policies, standards of practice, and practice guidelines to determine whether they are appropriate, or require revisions, or if new direction or guidance is required based on the current practice environment."

Background:

At the March 25, 2021, CRPO Council meeting, the [Policy Review Cycle](#) was approved.

Council's work plan prioritizes strengthening the CRPO's operational and governance infrastructure through the development of comprehensive policies to foster growth, adaptability, and responsiveness to the public, registrants and stakeholders.

The CPMF also expects "all policies, standards of practice, and practice guidelines are up to date and relevant to the current practice environment."

Key Considerations:

Staff have begun reviewing existing policies that have not been reviewed or revised for several years. Four policies were presented to the Executive Committee at their August 19, 2021, meeting. The Committee provided feedback on the draft policies noted below:

- Reimbursement for College Travel Expenses (minor revisions)
- Council Observer Guidelines (revised)
- Recording Council Meetings (rescind)

- Reimbursing CRPO Guests (minor revisions)

Next steps:

The Executive Committee recommends that Council approve the *Reimbursement for College Travel Expenses*, *Council Observer Guidelines* and *Reimbursing CRPO Guests* policies as presented.

The Executive Committee recommends rescinding the *Recording Council Meetings* policy.

Appendix A: CRPO Policy Proposal

Staff contact:	A. Fournier
Group responsible for maintaining and approving the policy:	Executive
Submission Date:	August 19, 2021
Policy proposal type:	<input type="checkbox"/> new <input checked="" type="checkbox"/> revision <input type="checkbox"/> rescind
Policy title:	Accepting Reimbursement for College Travel Expenses (links to original September 2013 policy)

Rationale

1. Is the proposed policy consistent with [mission, vision, values, strategic plan, and regulatory objectives of CRPO](#)?
Yes – the policy is intended to promote transparency and accountability.
2. Why is the policy needed (or not)? What is the problem or risk of harm the policy intends to address?
The policy explicitly refers to travel reimbursement if CRPO staff, Council or committee members are requested to attend an event (e.g., conference) where the event organizers offer to pay for travel expenses. This policy is operational in nature.
3. Analyze the risk:
 - a. What is the severity and occurrence of the risk? n/a
 - b. What are the causes of the risk? n/a
 - c. Are the risks currently managed? n/a
 - d. Where and why is the problem occurring? n/a
 - e. Can the problem be solved locally, by communication, or by education? n/a
 - f. Is there a regulatory solution in line with the principles of good regulation (see CRPO Regulatory Objective #3)? n/a
4. Who would be affected by the policy? For example: clients, registrants, stakeholders, Council members, etc.

Staff and Council members, most often in senior leadership roles.

5. Are there risks or unintended consequences to the proposed policy, and if so, are these outweighed by the benefits? n/a

6. What are alternatives to the proposed policy and their implications? n/a

7. Indicate relevant evidence and data that supports developing or changing the policy:

Minor revisions include formatting in new policy template and sentence structure.

8. Is the policy consistent with the current practice environment? For example, the policy reflects changing population's health needs, public/societal expectations, models of care, clinical evidence, advances in technology.

n/a

9. Does the policy align with other regulatory colleges where appropriate? For example, where practice matters overlap.

n/a

10. Have appropriate experts and/or stakeholders provided input into the policy?

n/a

11. Is the policy consistent with legislation, and is legal review required?

n/a

12. What kind of public consultation is required, if any?

n/a

13. What is the communication and implementation plan, if the proposed policy is approved?

n/a

Type of policy: Operations	Approved by: Executive
Date approved: September 16, 2013	Next Review date:
Amendment dates:	

Reimbursement for College Travel Expenses

Purpose

The purpose of this policy is to establish appropriate reimbursement of College-related travel expenses incurred by staff and/or Council members when traveling to workshops or conferences.

Relevant Legislation

[CRPO by-laws](#)

Context

This policy applies whether the meeting or conference sponsor, or other individual, has requested CRPO's attendance and has offered to cover the travel expenses.

Scope

This policy applies to CRPO staff and elected or appointed members of Council.

Policy

Except in rare circumstances, and with Executive Committee approval, CRPO will fund its own travel to meetings and conferences.

Appendix B: CRPO Policy Proposal

Staff contact:	A. Fournier
Group responsible for maintaining and approving the policy:	Executive Committee / Council
Submission Date:	August 19, 2021
Policy proposal type:	<input type="checkbox"/> new <input checked="" type="checkbox"/> revision <input type="checkbox"/> rescind
Policy title:	Council Observer Guidelines (links to original September 2017 policy)

Rationale

1. Is the proposed policy consistent with [mission, vision, values, strategic plan, and regulatory objectives of CRPO](#)? *Yes (openness, fairness, accountability, inclusion, promoting confidence in the profession).*
2. Why is the policy needed (or not)? What is the problem or risk of harm the policy intends to address? *The policy is needed to establish observer conduct and the procedure for booking an in-person seat for Council meetings. This revised policy also includes a section on livestreaming meetings.*
3. Analyze the risk:
 - a. What is the severity and occurrence of the risk? *Not severe – Council meetings are open to the public and Council members conduct themselves in accordance with the Code of Conduct.*
 - b. What are the causes of the risk? *There is a risk that virtual and in-person observers may record all or part of a Council meeting.*
 - c. Are the risks currently managed? *n/a*
 - d. Where and why is the problem occurring? *n/a*
 - e. Can the problem be solved locally, by communication, or by education? *n/a*
 - f. Is there a regulatory solution in line with the principles of good regulation (see CRPO Regulatory Objective #3)? *n/a*
4. Who would be affected by the policy? For example: clients, registrants, stakeholders, Council members, etc.
Council observers
5. Are there risks or unintended consequences to the proposed policy, and if so, are these outweighed by the benefits? *There is a risk that observers record Council meetings regardless of the College asking them not to – Council meetings are open to the public to observe in real-time (in-person and via live-stream); if observers are unable to attend, Council highlights are posted soon after the meeting.*

6. What are alternatives to the proposed policy and their implications?

n/a

7. Indicate relevant evidence and data that supports developing or changing the policy:

n/a

8. Is the policy consistent with the current practice environment? For example, the policy reflects changing population's health needs, public/societal expectations, models of care, clinical evidence, advances in technology.

n/a

9. Does the policy align with other regulatory colleges where appropriate? For example, where practice matters overlap.

Several other regulators include the recording of Council meetings in their observer guidelines, and it is not embedded in policy.

10. Have appropriate experts and/or stakeholders provided input into the policy?

n/a

11. Is the policy consistent with legislation, and is legal review required?

n/a

12. What kind of public consultation is required, if any?

None.

13. What is the communication and implementation plan, if the proposed policy is approved?

n/a

Type of document: guideline	Approved by: Executive
Date approved: September 16, 2013	Next Review date:
Amendment dates:	

Council Observer Guideline

Purpose

The purpose of this guideline is to provide rules of conduct for individuals observing College Council meetings.

Relevant Legislation

[Regulated Health Professions Act](#)

[Health Professions Procedural Code](#)

Scope

This guideline applies to members of the public observing Council meetings.

Procedure for Observing In-Person Council Meetings

Due to limited space in the board room, anyone wishing to observe must reserve a spot and receive confirmation that they have a seat before attending any Council meeting. Staff will be able to accept reservations once the agenda is posted, approximately two weeks prior to the meeting. Due to space consideration, we ask that each organization or association only send one representative. Council meetings are held at 375 University Avenue, Suite 803, unless otherwise noted.

Observer Guidelines for In-Person Council Meetings

1. Observers do not participate in the meeting or engage in Council discussions when the meeting is in session. Observers must also refrain from passing notes or other information to Council members during the meeting.
2. Observers are asked to turn off or silence cell phones and other devices and keep side conversations to a minimum.
3. Observers are asked to limit comings and goings during the meeting. There are scheduled morning and afternoon breaks and an approximately one-hour break for lunch. Observers are asked to make their own arrangements for these breaks.
4. Observers may not audio- or video-record Council meetings. This includes taking photographs, video, and voice recordings. Note-taking is acceptable.
5. Council meetings are open to the public, except for any in camera portion in accordance with the *Health Professions Procedural Code* of the *Regulated Health Professions Act, 1991*, section, 7(2). If known in advance, in camera items are noted on the agenda. The agenda is posted approximately two weeks prior to the meeting. Meeting materials are posted approximately one week prior to the meeting.
6. The College is a fragrance-free environment. This applies to all staff, Council members and visitors.

Procedure for Observing Council Meetings via Livestream

Livestreaming Council meetings increases transparency and accessibility to those who reside outside of the Greater Toronto Area and enhances public protection by making attending Council meetings available to all Ontarians with internet access. Observers can join the livestream at any time during the real-time broadcast of the meeting. Links to observe Council meetings via livestream are posted to the CRPO website at least one week prior to the scheduled meeting date.

Appendix C: CRPO Policy Proposal

Staff contact:	A. Fournier
Group responsible for maintaining and approving the policy:	Executive Committee / Council
Submission Date:	August 19, 2021
Policy proposal type:	<input type="checkbox"/> new <input type="checkbox"/> revision <input checked="" type="checkbox"/> rescind
Policy title:	Recording Council Meetings (links to original April 2016 policy)

Rationale

1. Is the proposed policy consistent with [mission, vision, values, strategic plan, and regulatory objectives of CRPO](#)? *Yes (openness and accountability).*
2. Why is the policy needed (or not)? What is the problem or risk of harm the policy intends to address? *Policy is addressed in another policy (council observer guideline).*
3. Analyze the risk:
 - a. What is the severity and occurrence of the risk? *Not severe – Council meetings are open to the public and Council members are expected to conduct themselves in accordance with the Code of Conduct.*
 - b. What are the causes of the risk? *There is a risk that virtual and in-person observers may record all or part of a Council meeting.*
 - c. Are the risks currently managed? *n/a*
 - d. Where and why is the problem occurring? *n/a*
 - e. Can the problem be solved locally, by communication, or by education? *n/a*
 - f. Is there a regulatory solution in line with the principles of good regulation (see CRPO Regulatory Objective #3)? *n/a*
4. Who would be affected by the policy? For example: clients, registrants, stakeholders, Council members, etc.
Council observers
5. Are there risks or unintended consequences to the proposed policy, and if so, are these outweighed by the benefits? *There is a risk that observers record Council meetings regardless of the College asking them not to – Council meetings are open to the public to observe in real-time (in-person and via live-stream); if observers are unable to attend, Council highlights are posted soon after the meeting.*

6. What are alternatives to the proposed policy and their implications?

n/a

7. Indicate relevant evidence and data that supports developing or changing the policy:

n/a

8. Is the policy consistent with the current practice environment? For example, the policy reflects changing population's health needs, public/societal expectations, models of care, clinical evidence, advances in technology.

n/a

9. Does the policy align with other regulatory colleges where appropriate? For example, where practice matters overlap.

Several other regulators include the recording of Council meetings in their observer guidelines, and it is not embedded in policy.

10. Have appropriate experts and/or stakeholders provided input into the policy?

n/a

11. Is the policy consistent with legislation, and is legal review required?

n/a

12. What kind of public consultation is required, if any?

None.

13. What is the communication and implementation plan, if the proposed policy is approved?

n/a

Appendix D: CRPO Policy Proposal

Staff contact:	A. Fournier
Group responsible for maintaining and approving the policy:	Executive
Submission Date:	August 19, 2021
Policy proposal type:	<input type="checkbox"/> new <input checked="" type="checkbox"/> revision <input type="checkbox"/> rescind
Policy title:	Reimbursing CRPO Guests (links to original September 2013 policy)

Rationale

1. Is the proposed policy consistent with [mission, vision, values, strategic plan, and regulatory objectives of CRPO](#)?

Yes – the policy is intended to promote transparency and accountability.

2. Why is the policy needed (or not)? What is the problem or risk of harm the policy intends to address?

The policy explicitly refers to reimbursing CRPO guests for reasonable travel expenses.

3. Analyze the risk:

- a. What is the severity and occurrence of the risk?
- b. What are the causes of the risk?
- c. Are the risks currently managed?
- d. Where and why is the problem occurring?
- e. Can the problem be solved locally, by communication, or by education?
- f. Is there a regulatory solution in line with the principles of good regulation (see CRPO Regulatory Objective #3)?

4. Who would be affected by the policy? For example: clients, registrants, stakeholders, Council members, etc.

CRPO guests.

5. Are there risks or unintended consequences to the proposed policy, and if so, are these outweighed by the benefits?

6. What are alternatives to the proposed policy and their implications?
7. Indicate relevant evidence and data that supports developing or changing the policy:
Minor revisions include formatting in new policy template and sentence structure.
8. Is the policy consistent with the current practice environment? For example, the policy reflects changing population's health needs, public/societal expectations, models of care, clinical evidence, advances in technology.
n/a
9. Does the policy align with other regulatory colleges where appropriate? For example, where practice matters overlap.
n/a
10. Have appropriate experts and/or stakeholders provided input into the policy?
n/a
11. Is the policy consistent with legislation, and is legal review required?
n/a
12. What kind of public consultation is required, if any?
n/a
13. What is the communication and implementation plan, if the proposed policy is approved?
n/a



Type of policy: operations	Approved by: Executive
Date approved: Sept. 16, 2013	Next Review date:
Review dates:	

Reimbursing CRPO Guests

Purpose

The purpose of this policy is to establish reasonable travel reimbursement for CRPO guests.

Relevant Legislation

[Travel, Meal and Hospitality Expenses Directive \(Ontario\)](#)

Scope

This policy applies to CRPO guests, meaning individuals invited to attend a meeting or give a presentation, excluding Council members, committee members, investigators, assessors, consultants, legal counsel, staff and others with specifically defined CRPO roles.

Policy

When Council and/or CRPO staff requests the attendance of an individual at a meeting, CRPO will offer to reimburse the requested attendee's reasonable travel expenses. "Reasonable" is defined in accordance with the Health Board Secretariat's guidelines on eligible expenses for publicly appointed Council members.

Briefing Note for Council

Meeting Date:	September 16, 2021
Agenda Item #	12
Issue:	Board evaluation update
Appendices:	Appendix A: Evaluation Framework Components Appendix B: Meeting Evaluation Report Q1 Appendix C: Meeting Evaluation Report Q2
Action:	Information <input checked="" type="checkbox"/> Discussion <input checked="" type="checkbox"/> Decision <input type="checkbox"/>
Staff Contact:	M. Piro / D. Adams
Submitted by:	Staff

Purpose & Public Interest Rationale:

Council and statutory committee members must have the knowledge, skills, and commitment needed to effectively execute their fiduciary role and responsibilities pertaining to the mandate of the College. Rigorous and regular evaluation assists in identifying and addressing any areas for improvement.

Background:

As part of the College Performance Measurement Framework, CRPO will be required to demonstrate that “Council regularly assesses its effectiveness and addresses identified opportunities for improvement through ongoing education.” The evidence required for this is that:

- a. Council has developed and implemented a framework to regularly evaluate the effectiveness of:
 - i. Council meetings;
 - ii. Council
- b. The framework includes a third-party assessment of Council effectiveness at a minimum every three years.

Following approval of the evaluation plan presented at the January 2021 meeting, the Executive Committee worked with [Pollinate](#) to develop and launch an evaluation framework (see Appendix A: Evaluation Framework Components). Council completed the Council Efficacy Evaluation in May and committees have been using the Meeting Evaluation tool at each panel and plenary meeting.

Next steps:

The Executive Committee has reviewed the results of the Council Efficacy Evaluation and the cumulative results of the meeting evaluations and directed staff to present them to Council for their information.

Council will be asked to discuss the results and appropriate responses to any of the areas for improvement that were identified. This discussion will inform ongoing quality improvement and professional development planning for both committees and Council.



Board Effectiveness Measures

College of Registered Psychotherapists
of Ontario (CRPO)



*Get Clarity.
Grow Know-How.
Transform Performance.*

Pollinate Networks Inc.
pollinate.net

Work to date – where we started



- How is the College measured now?
- What are the new “effectiveness” requirements for Boards?
- How can we get the information required in a way that:
 - Is efficient?
 - Is meaningful?
 - Meets the requirements?



How is the College currently measured?



College Performance Measurement Framework

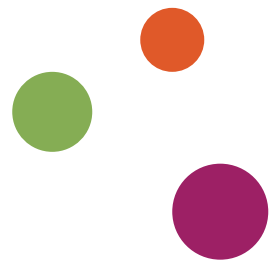
- *Ministry of Health mandated as of March 31, 2021*

Fair Access to Regulated Professions

- *Annual assessment of registration practices*

Health Professions Appeal and Review Board

- *Appeals-based assessment of procedural fairness of registration and complaints decisions*



Board Effectiveness as a Measure



What is the intent of the new ministry guidelines on board effectiveness assessment?

Looking to answer two questions:

- Is the environment supporting board effectiveness? (i.e. information availability, meeting structure)
- What are the areas board members can individually work on to grow in efficacy and effectiveness?

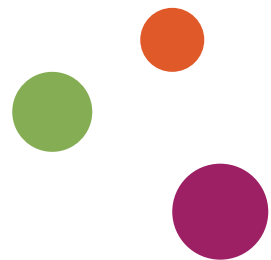


Board Effectiveness System



Based on the idea that:

“good governance=
good decisions =
public protection”



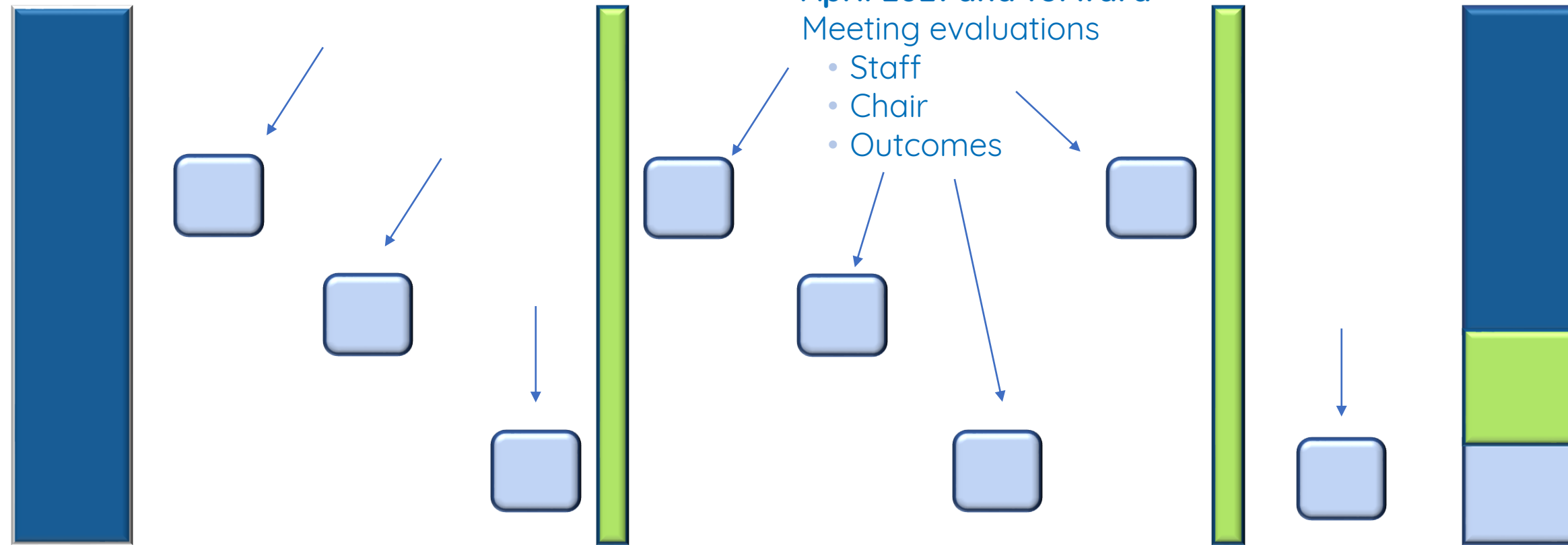
Proposed Elements



1. Baseline/Annual Survey on overall effectiveness
 - Board members will fill out this assessment and it will poll on meeting effectiveness, structure, information etc.
2. Meeting evaluation- quick ratings to create a picture over time for each meeting
3. Individual competency assessment
 - Individual development planning based on Competency framework - review with Chair and Sr. Staff



Process Flow



April 2021 and forward
Meeting evaluations

- Staff
- Chair
- Outcomes

March-April 2021
Baseline

2021 TBD
Board Individual
Development
Plans

Early 2022 TBD
Annual Follow Up
+ Data Summary



Learnings from 2021



- Slight changes to wording on Annual Effectiveness Survey
 - i.e. changed the question wording about “fun” to “enjoyable”
- Good but not perfect participation – what do we need to do to get everyone to participate?
- Some adjustments made to reporting to ensure appropriate for accessibility (colours)



Appendix A: Council Evaluation Components

Evaluation Component	Evaluation tool details	Who completes the evaluation?	Frequency
1. Meeting evaluation	<ul style="list-style-type: none"> • Ratings on a 5-star scale regarding meeting, Chair and materials • Small comment box if needed 	<ul style="list-style-type: none"> • Every Council and committee member 	<ul style="list-style-type: none"> • Used for every Council, committee and panel meeting • 5 minutes at the end of each meeting
2a. Annual member evaluation	<ul style="list-style-type: none"> • Rate using the competence matrices adopted by Council for both Council and committee-level work. • Indicates entry level, intermediate or advanced competence in the noted areas. • Fed back to each individual to allow self-monitoring of progress 	<ul style="list-style-type: none"> • Three people complete this evaluation for each member: • Statutory committee panel chair (Registration, Quality Assurance, ICRC) • Key support staff • Member self-assessment 	<ul style="list-style-type: none"> • Annually in June • About 30 minutes per committee member (max 5 per chair, ~ 2.5 hours)
2b. Individual education plan	<ul style="list-style-type: none"> • Review of report generated by competence evaluation (as above) and discussion of learning goals for coming year. 	<ul style="list-style-type: none"> • Every Council member • Vice-President 	<ul style="list-style-type: none"> • About 30 minutes per Council member to review individual education plan report • About 6.5 hours for Vice-President • Completed between June and August
3. Council efficacy evaluation tool	<ul style="list-style-type: none"> • Evaluated using the College Performance Measurement Framework (CPMF) standards: <ul style="list-style-type: none"> ○ Council and statutory committee members have the knowledge, skills, and commitment needed to 	<ul style="list-style-type: none"> • Every Council member 	<ul style="list-style-type: none"> • About 45 minutes • Annually in January or February for reporting in March

	<p>effectively execute their fiduciary role and responsibilities pertaining to the mandate of the College.</p> <ul style="list-style-type: none"> ○ Council decisions are made in the public interest. ○ The College acts to foster public trust through transparency about decisions made and actions taken. 		
4. Committee Renewal	<ul style="list-style-type: none"> ● Each committee to review and affirm its terms of reference, evaluate progress on work plan items, and evaluate effectiveness over the previous year. 	<ul style="list-style-type: none"> ● Every committee 	<ul style="list-style-type: none"> ● About 60 minutes ● Annually per committee during first plenary after November after appointments are made.



College of Registered Psychotherapists of Ontario

Quarterly Meeting Evaluation Report

Version for Council



May 1st, 2021



Q1 Responses

Meeting Type	# of Responses
Council	14
Executive Committee	4
Registration Committee – panel	10
Registration Committee – plenary	6
ICRC – plenary	10
ICRC – panel B	2
Total Responses	46

All meetings – this Quarter

Environment - I felt supported, valued and encouraged to discuss opinions openly; disagreements were handled well.



Information - Adequate background context/material was provided, with enough time to absorb it.



Objective and Outcomes - I had a clear understanding of objectives for the meeting, believe we met the objectives and know next steps.



Time - Today's meeting started and ended on time, the agenda was appropriately focused, timed and followed.



Work and Decisions - I feel confident the work and decisions of this meeting were the best possible for the public interest.



Comments

Council

Great meeting as always. Would have been great to have the QAP program update info in advance, as well as the budget rationale info in advance (i.e. the reasons for budget lines in addition to the numbers).

Council

Great meeting. Especially important topic at the end re: supervision. -- needs to be flagged for continued discussion.

Council

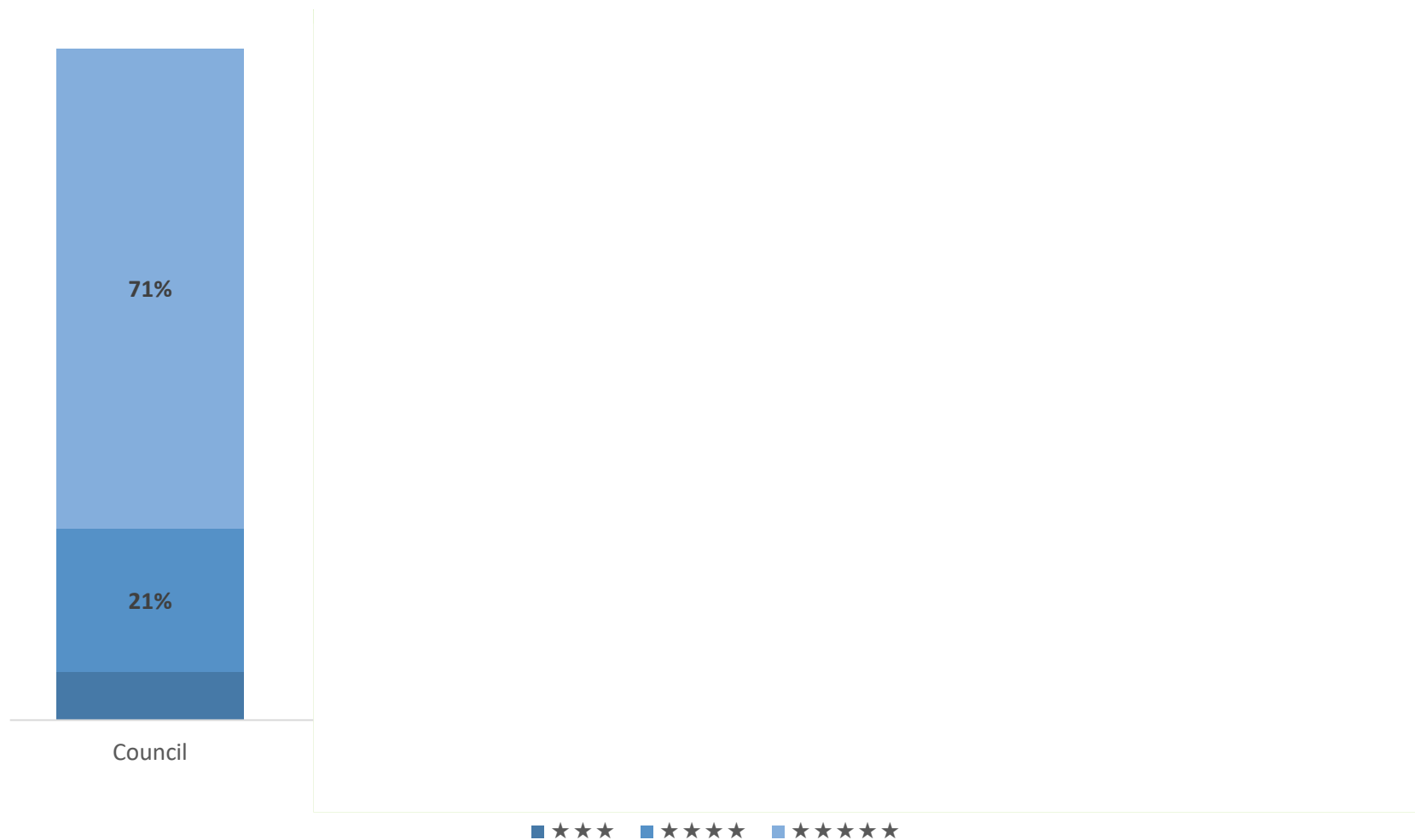
Meetings being on schedule is appreciated. The discussion time for council question maybe allocate a bit more time or opportunity to email the questions/topic prior to allow for time to process and reply to the topic.

Council

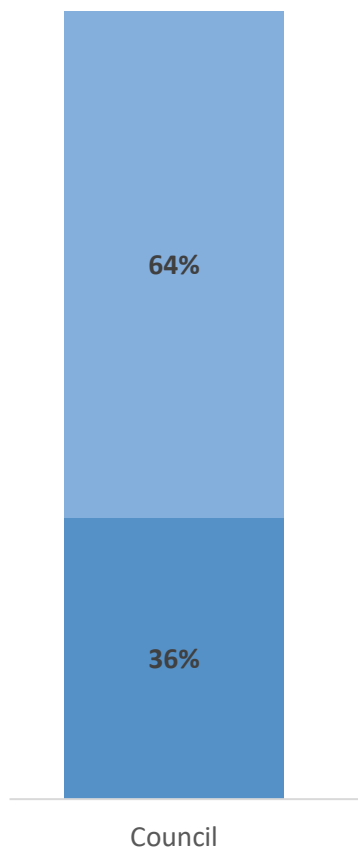
Would have liked a "heads-up" re the clinical supervision discussion.

APPENDIX

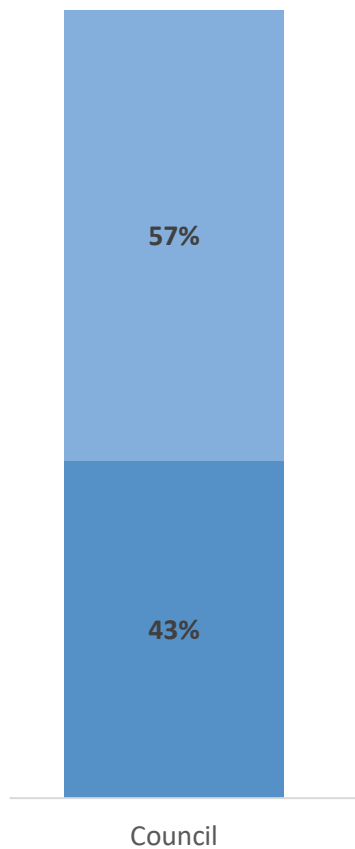
Environment - I felt supported, valued and encouraged to discuss opinions openly; disagreements were handled well.



Information - Adequate background context/material was provided, with enough time to absorb it.



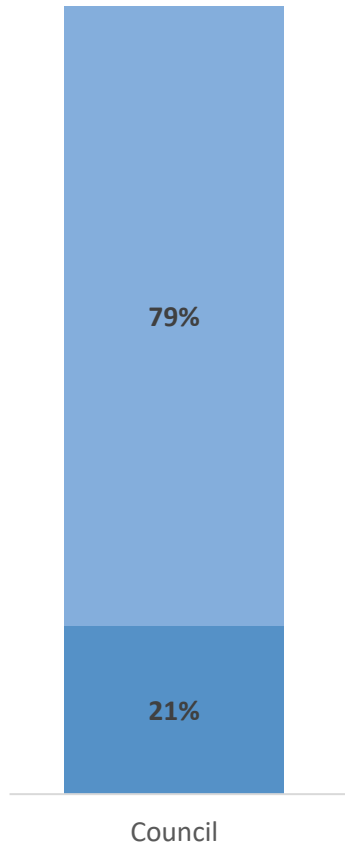
Objective and Outcomes - I had a clear understanding of objectives for the meeting, believe we met the objectives and know next steps.



Time - Today's meeting started and ended on time, the agenda was appropriately focused, timed and followed.



Work and Decisions - I feel confident the work and decisions of this meeting were the best possible for the public interest.





College of Registered Psychotherapists of Ontario

Quarterly Meeting Evaluation Report

Version for Council



Q2 - July 1st, 2021



Q1 Responses

Meeting Type	Q1	Q2	Total
Council	14	13	27
Examination Committee – plenary		3	3
Executive Committee	4	4	8
ICRC – panel A		7	7
ICRC – panel B	2	4	6
ICRC – panel C		3	3
ICRC – plenary	10		10
QAC – panel		1	1
Registration Committee – panel	10	9	19
Registration Committee – plenary	6		6
Total Responses	46	44	90

All meetings – this Quarter

Environment - I felt supported, valued and encouraged to discuss opinions openly; disagreements were handled well.



Information - Adequate background context/material was provided, with enough time to absorb it.



Objective and Outcomes - I had a clear understanding of objectives for the meeting, believe we met the objectives and know next steps.



Time - Today's meeting started and ended on time, the agenda was appropriately focused, timed and followed.



Work and Decisions - I feel confident the work and decisions of this meeting were the best possible for the public interest.



Q2
(Q1)

Q2 Comments

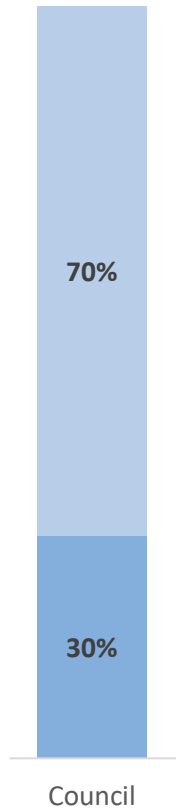
Council	Interesting discussion about pricing, and I really enjoyed the impromptu question session on topics related to ethics on report writing for the court around custody issues.
Council	Well planned, good time available for discussion, very open to dissenting and modifying opinions. Sought appropriate feedback from council on some ongoing work. well done
Council	great meeting. Shelley's facilitation was excellent. discussion around fee/scheduling and ethics was rich.
Council	I felt there needs to be someone assisting the Chair in recognizing members who wanted to participate in discussions.
Council	Lots of fruitful discussion and information provided.

APPENDIX

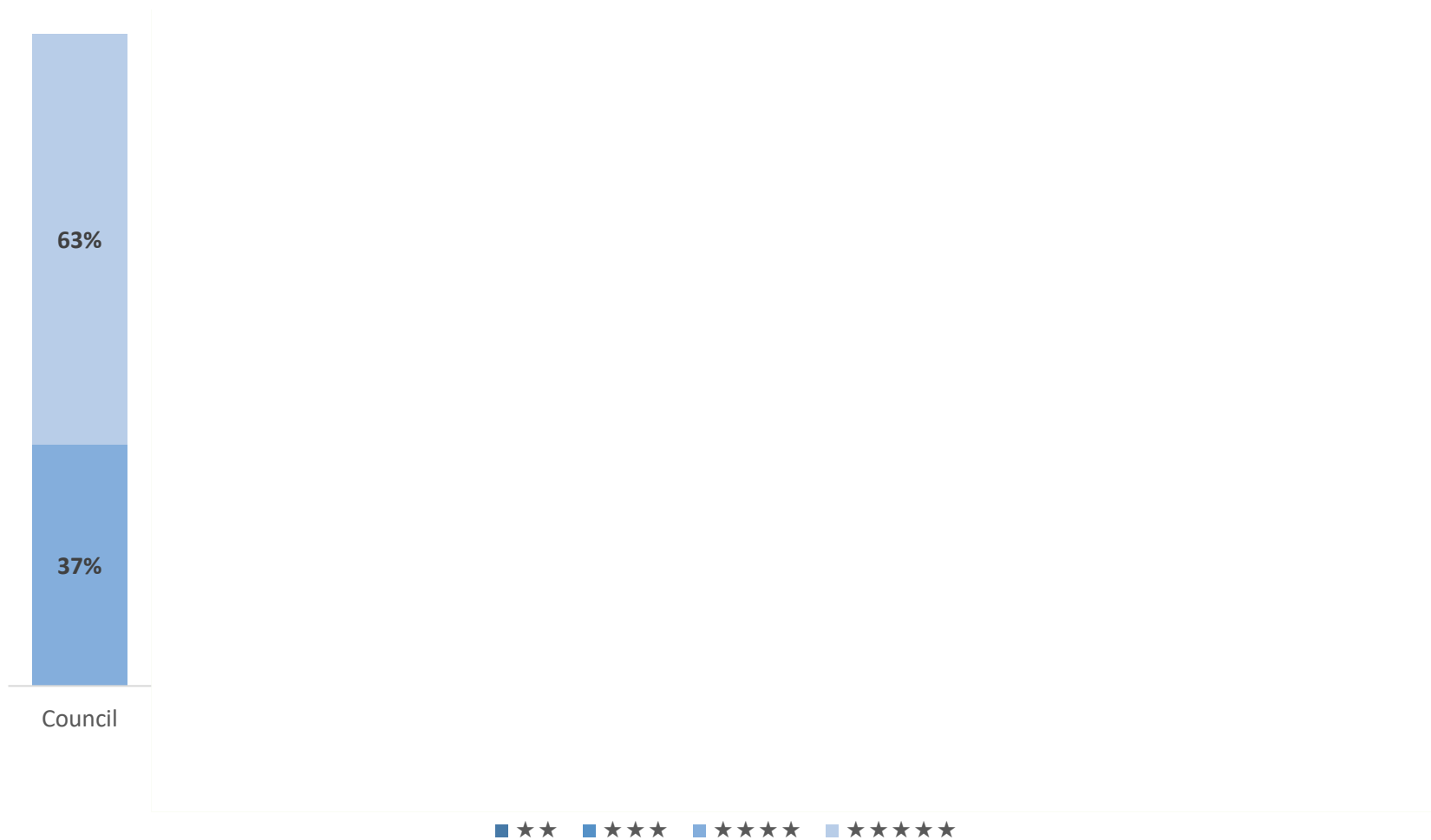
Environment - I felt supported, valued and encouraged to discuss opinions openly; disagreements were handled well.



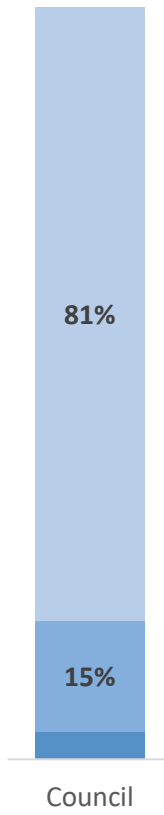
Information - Adequate background context/material was provided, with enough time to absorb it.



Objective and Outcomes - I had a clear understanding of objectives for the meeting, believe we met the objectives and know next steps.



Time - Today's meeting started and ended on time, the agenda was appropriately focused, timed and followed.



Work and Decisions - I feel confident the work and decisions of this meeting were the best possible for the public interest.



Briefing Note for Council

Meeting Date:	September 16, 2021
Agenda Item #	13
Issue:	2020-2021 Annual Report & Audited Financial Statements
Attachment(s):	Annual Report & Audited Financial Statements
References:	Health Professions Procedural Code
For:	Information <input checked="" type="checkbox"/> Discussion <input type="checkbox"/> Decision <input type="checkbox"/>
Staff Contact:	J. Falkenburger
Submitted by:	Executive Committee

Purpose & Public Interest Rationale:

The College must demonstrate responsible stewardship of its financial and human resources in achieving its statutory objectives and regulatory mandate. The *Regulated Health Professions Act* (RHPA) states that each College must report annually to the Minister of Health on its activities and financial affairs (6 (1)). This is achieved via the CRPO's Annual Report.

Source of Authority:

The [Health Professions Procedural Code](#) (Schedule 2, 12.1, of the *Regulated Health Professions Act*) states that, "between the meetings of the Council, the Executive Committee has all the powers of the Council with respect to any matter that, in the Committee's opinion, requires immediate attention, other than the power to make, amend or revoke a regulation or by-law." As such, the Executive Committee approved the audited financial statements as presented.

Background:

Welch LLP representatives presented the CRPOs audited financial statements for the fiscal year April 1, 2020, to March 31, 2021, to the Executive Committee at their June 17, 2021, meeting. They noted that it was a clean audit and commended staff for the proactive support they provided throughout the process. Executive was invited to ask questions regarding the statements and no questions or concerns were raised.

Next steps:

The audited financial statements will be included in the CRPO's 2020-2021 Annual Report. Once finalized, the report will be provided to the Minister of Health and posted to the CRPO website.



2020/2021 ANNUAL REPORT

www.crpo.ca

1-844-712-1364

The College of Registered Psychotherapists of Ontario (CRPO) regulates its registrants in the public interest. CRPO is established under the *Psychotherapy Act, 2007* and the *Regulated Health Professions Act, 1991*.



**The College of Registered
Psychotherapists of
Ontario (CRPO) regulates its
registrants in the interests
of protecting the public,
in accordance with the
*Psychotherapy Act, 2007.***

MISSION

To develop standards and procedures to regulate psychotherapists in the public interest, striving to ensure competent and ethical practice within a professional accountability framework.

VISION

Leadership in professional self-regulation, dedicated to the principles of excellence, fairness, openness, responsiveness and respect for diversity.

VALUES

Leadership, Excellence, Accountability, Equity, Integrity, Teamwork, Respect, Openness



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PRESIDENT'S MESSAGE

This year represented a continuation of CRPO's ongoing work to review and modernize its governance practices. Council approved documents describing the competencies of Council and committee members, and the composition of committees. These documents help ensure that people overseeing CRPO's work have the necessary abilities to do their job effectively. Council also began meeting with a consultant to evaluate Council and its meetings. By gathering information and reflecting on the results, Council can continually improve on how it does its work.

Other governance-related initiatives underway include reviewing work plans for Council and committees to keep CRPO's work in line with our Strategic Plan 2020 – 2023, early discussions on succession planning (ensuring Council and committee members can grow and serve in leadership positions), and approving executive limitation policies that codify good practices by setting the limits on what Council, the Registrar and staff do.

As part of early steps to foster equity, diversity and inclusion in the profession, Council appointed committee members following a call to the community of RPs inviting BIPOC (Black, Indigenous, People of Colour) candidates. CRPO also [shared plans](#) to review policies, practice standards and guidelines with an equity lens, and to develop a public and stakeholder engagement plan to receive diverse perspectives on regulatory issues.

Finally, RPs have seen firsthand in their practices the increase in demand for psychotherapy, and the increased challenges our clients face as a result of the pandemic this year. I would like to acknowledge the work done by registrants to continue to provide safe and ethical care during this extraordinary time.

Shelley Briscoe-Dimock, RP

President



“CRPO adjusted several processes in response to the pandemic”.

REGISTRAR'S MESSAGE

As the mental health needs of Ontarians increased over the past year, CRPO also saw the number of applicants and registrants grow significantly. At the same time, registrants shifted rapidly into electronic practice. CRPO hosted a well-attended webinar on e-practice offering practical guidance on the many considerations of providing therapy remotely. Registrants also exercised discretion regarding which services needed to be in person, while observing necessary infection prevention and control measures.

As registrants adapted, CRPO also adjusted several processes in response to the pandemic. Various deadlines were applied flexibly, electronic submissions of academic transcripts were accepted, and CRPO worked with its exam provider to offer the registration examination via remote proctoring, with the first sitting taking place in April 2021. Further, CRPO Council, committees, and staff carried out all meetings online.

CRPO was also able to connect remotely with stakeholders throughout the year, which in some ways increased our reach and accessibility. Events included

meetings with professional associations, education programs, and psychotherapy or counselling regulators in other provinces. Approximately 231 RPs attended a virtual town hall in September.

CRPO also worked hard this year to transition to a new registrant database, offering a streamlined, user-friendly experience. The Quality Assurance Program is beginning an overhaul to increase the number of registrants it can engage, while tailoring feedback to each registrant's level of need. A new online, peer-validated assessment is expected to be launched in late 2022. All Ontario health regulatory colleges also completed their first College Performance Measurement Framework (CPMF) [report](#), as required by the Ministry of Health and Long-Term Care. The CPMF collects statistics over the calendar year to help the public understand how well colleges are doing their job and to help continually improve accountability, transparency, and oversight.

Mark Piore
Acting Registrar (February-August 2021)

REGISTRATION & RECOGNITION*



8180

CRPO Registrants



24%

Increase in applications submitted



3

New recognized programs



88%

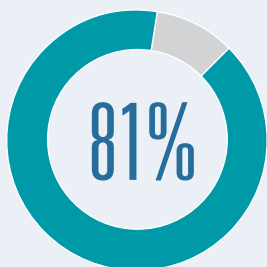
Exam pass rate for Qualifying registrants

* Regulatory data for calendar year, January 1 – December 31, 2020

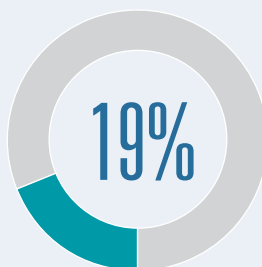
REGISTRATION & RECOGNITION*



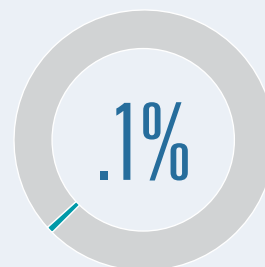
Increase from
7387 to **8180**



Identify as Female

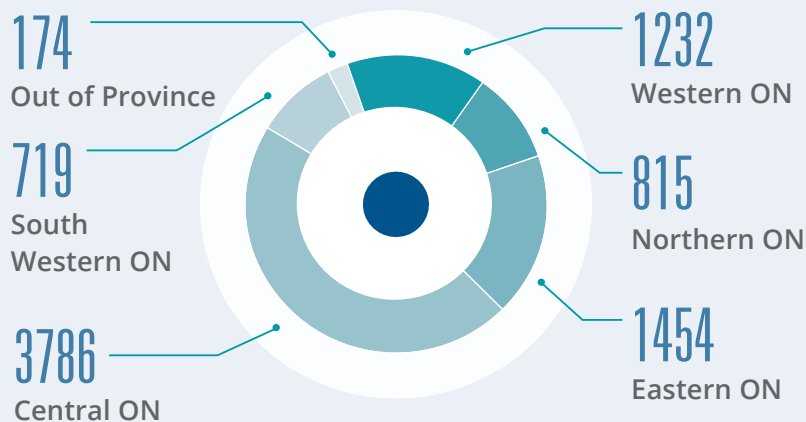


Identify as Male



Identify as Other

RPs by Region



2253

Registrants reporting languages in addition to ENG and/or FR

* Regulatory data for calendar year, January 1- December 31, 2020


STAKEHOLDER ENGAGEMENT BY THE NUMBERS


231 

Virtual town hall participants 


11 

Associations represented at the Association Meeting

442 

Participants, 1.1K YouTube views 

Webinar: How to Expect the Unexpected in Online Practice hosted by Talia Singer

21 

Education programs represented at the Education Program Meeting

10 

Provinces represented at the Pan-Canadian psychotherapy regulator meeting

TOP 10

Website page visits

Home page	261,741
Applying to CRPO	64,750
Find a RP	63,063
Educational Programs	58,992
Supervision	19,523
Registered Psychotherapist (Qualifying)	19,191
Self-Assessment Tool	18,952
COVID FAQs	17,062
9 Steps to CRPO	
Registration	16,227
What is Psychotherapy	14,809

7 

Presentations held for students and program supervisors reaching 138+ audience members

18 

Virtual peer circle sessions with 144 participants



PRACTICE ADVISORY INQUIRIES

The Practice Advisory Service responds to questions from registrants and the public. Topics cover many aspects of what is expected in the practice of psychotherapy.

> 2000



Inquiries answered over the course of the year*

TOP FIVE TOPICS:

- 1 Cross-border psychotherapy practice (client or therapist outside Ontario)
- 2 Record-keeping
- 3 Clinical supervision
- 4 COVID-19 (restrictions, infection prevention protocols, re-opening of in-person services, etc.)
- 5 Electronic practice

* Regulatory data for calendar year, January 1 – December 31, 2020

ADDRESSING UNSAFE PRACTICE



88

Complaints and Reports Received



78

Decisions Issued

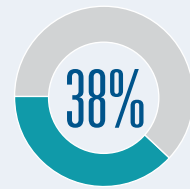


230

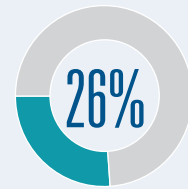
Number of Allegations Contained in 78 Decisions Issued*

* Regulatory data for calendar year, January 1 – December 31, 2020

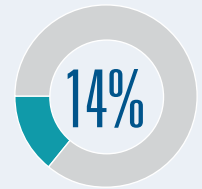
ISSUES IN EACH OF THESE DECISIONS HAVE BEEN CATEGORIZED:



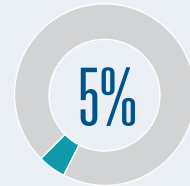
Professional Conduct & Behaviour¹



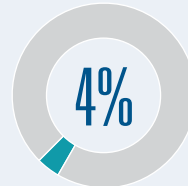
Competence / Patient Care²



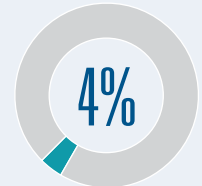
Sexual Abuse / Harassment / Boundary Violations



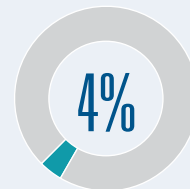
Unauthorized Practice



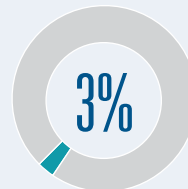
Communication



Fraud



Advertising



Record-keeping



Billing and Fees

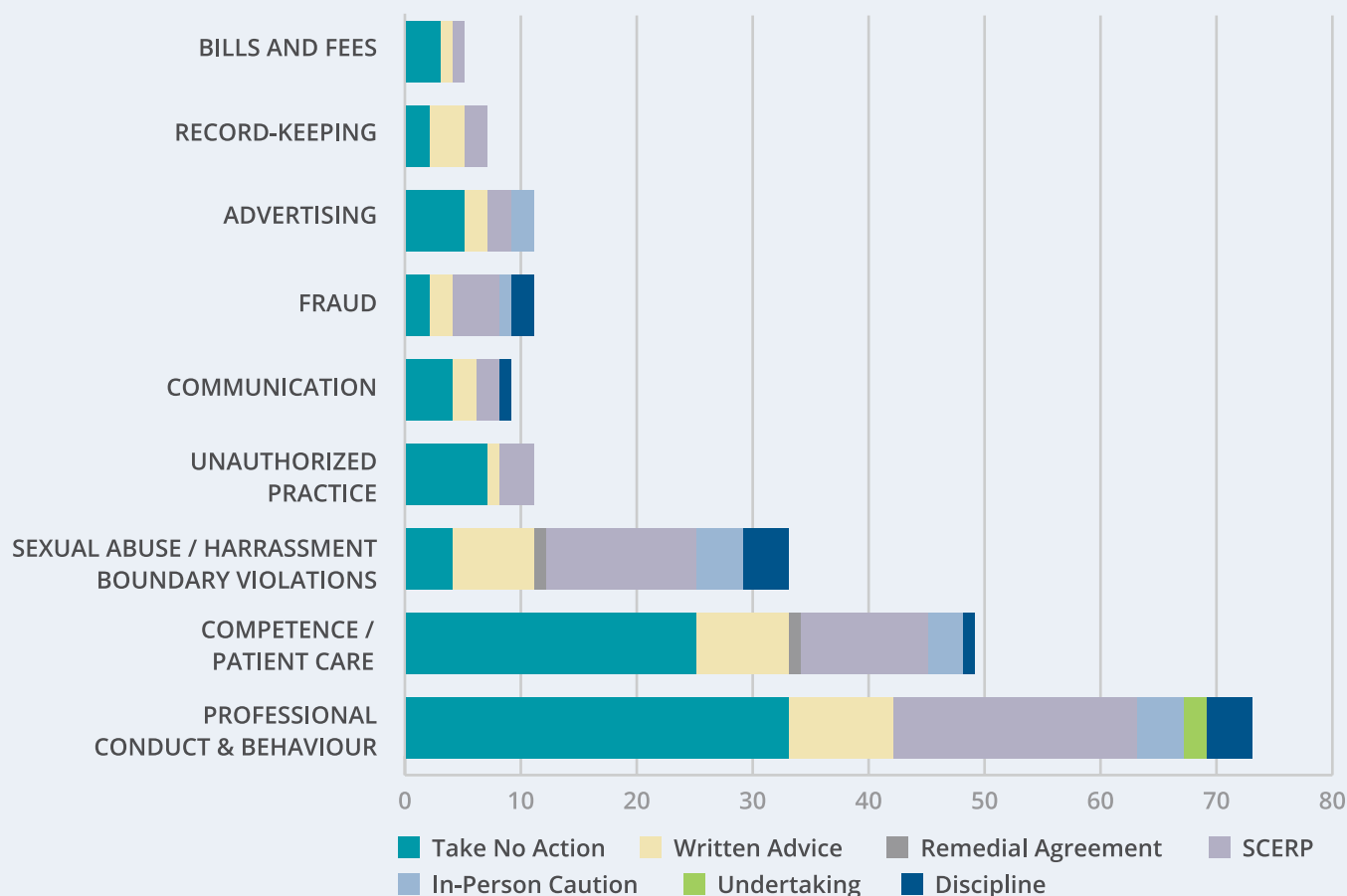
¹ Includes conflict of interest; conduct unbecoming; confidentiality; clinical records; objectivity/bias; and unprofessional conduct with colleagues.

² Includes failure to report; appropriateness of services; issues with establishing contract/role; consent; unnecessary treatment; supervision; and termination of services.

COMPLAINT AND REPORT OUTCOMES

The outcomes for all 78 decisions issued in the 2020 calendar year are displayed below. Please note, some investigations received two or more outcomes, e.g., specified continuing education or remediation program (SCERP) and in-person caution.

ISSUES AND OUTCOMES: DECISIONS ISSUED 2020



The [Discipline Committee](#) held five hearings this year.

The Health Professions Appeal and Review Board (HPARB) released four decisions. Three decisions were confirmed. In one complaint, the College was ordered to change its decision.

HIGHLIGHT: COVID-19 RESPONSE



- 12 COVID bulletins sent
- Vaccination news for RPs published to website
- Flexibility with minimum education substantial completion requirement to apply to CRPO
- Transcripts accepted electronically
- Mass exam extensions granted for RP (Qualifying) deadlines to make first and third exam attempt
- October 2020 exam offered over three days
- Announcement of Registration Exam being offered via remote proctoring for 2021
- Supervision expectations clarified for RP (Qualifying) registrants who were unable to secure an exam seat
- Fee increases delayed to June 2022
- Live-streamed Council meetings

HIGHLIGHT: COUNCIL COMPETENCIES

As the body charged with ensuring Registered Psychotherapists provide safe, ethical and competent care to Ontarians, it is imperative that individuals who serve on Council and committees possess the appropriate balance of knowledge, skills and experience to perform their duties effectively.

In November 2019, Council approved the adoption of a [Council Competency Matrix](#) with the expectation that all members of Council and non-Council committee appointments demonstrate the attributes and competencies required of all Council members. These attributes and competencies range from governance knowledge and financial literacy to diversity and inclusion and health systems knowledge. This matrix established the framework to begin electing, appointing and recruiting registrants with considerable knowledge

and expertise from a diverse population.

Building on these competencies, Council approved the adoption of three additional competency matrices to establish committee-specific attributes, competencies and composition. The [Committee Competency Matrix](#), [Committee Composition Matrix](#) and the [Discipline and Fitness to Practise Hearing Competency Matrix](#) allow the College to ensure that appropriate training and professional development are provided across all regulatory and governance functions.

Through the adoption of competency frameworks, the College can continue to cultivate excellence, accountability and responsiveness among its Council and committee members.



COMMITTEE MEMBERSHIP

CLIENT RELATIONS

Steven Boychyn
 Shelley Briscoe-Dimock, RP
 Sue Lymburner, RP
 (Chair & Non-Council member)
 Judy Mord, RP
 Keri Selkirk
 Jane Snyder
 Radhika Sundar, RP

DISCIPLINE AND FITNESS TO PRACTISE COMMITTEES*

Gary Cockman
 (Chair, April 2020-January 2021)
 Andrew Benedetto, RP
 (interim Chair, January-March 2021)
 Carol Cowan-Levine, RP
 (Non-Council member, appointed as member October 2020, appointed as Chair March 2021)

*all members of Council sit on these committees

EXAMINATION

Heidi Ahonen, RP (Chair)
 Andrew Benedetto, RP
 Steven Boychyn
 Felipe Cepeda, RP (Qualifying)
 (Non-Council member appointed October 2020)
 Kali Hewitt-Blackie, RP
 Michael Machan, RP
 Miranda Monastero, RP
 Keri Selkirk

EXECUTIVE COMMITTEE

Andrew Benedetto, RP
 Steven Boychyn
 Shelley Briscoe-Dimock, RP
 (Chair & President)
 Gary Cockman
 Kenneth Lomp, RP (Vice-President)

INQUIRIES, COMPLAINTS AND REPORTS

Steven Boychyn
 Shelley Briscoe-Dimock, RP (Chair)
 David Bruce, RP
 (Non-Council member appointed October 2020)
 Kimberly Cato, RP
 (Non-Council member appointed October 2020)
 Kali Hewitt-Blackie, RP
 Kenneth Lomp, RP
 Miranda Monastero, RP
 Judy Mord, RP
 Carla Ribeiro, RP
 (Non-Council member appointed October 2020)
 Kafui Sawyer, RP
 (Non-Council member appointed October 2020)
 Keri Selkirk
 Jane Snyder
 Kathy-Ying Zhao

NOMINATIONS AND ELECTIONS

David Keast
 Michael Machan, RP (Chair)
 Judy Mord, RP

Jane Snyder
 Radhika Sundar, RP
 Kathy-Ying Zhao

QUALITY ASSURANCE

Heidi Ahonen, RP
 Andrew Benedetto, RP
 Sherine Fahmy
 Kayleen Edwards, RP
 (Non-Council member)
 Kali Hewitt-Blackie, RP
 David Keast
 Kenneth Lomp, RP (Chair)
 Miranda Monastero, RP
 Brenda Sedgwick, RP
 (Non-Council member appointed October 2020)
 Kathy-Ying Zhao

REGISTRATION

Heidi Ahonen, RP
 Elda Almario, RP
 (Non-Council member appointed October 2020)
 Andrew Benedetto, RP (Chair)
 David Keast
 Michael Machan, RP
 Muriel McMahon, RP
 (Non-Council member)
 Ahilaruban Nageswaran, RP
 (Non-Council member appointed October 2020)
 Jane Snyder
 Radhika Sundar, RP

FINANCIAL STATEMENTS

FOR

**COLLEGE OF REGISTERED PSYCHOTHERAPISTS AND
REGISTERED MENTAL HEALTH THERAPISTS OF ONTARIO**

**FOR YEAR ENDED
MARCH 31, 2021**

STATEMENT OF FINANCIAL POSITION
MARCH 31, 2021

	2021	2020
ASSETS		
CURRENT ASSETS		
Cash	\$ 9,740,946	\$ 7,848,251
Prepaid expenses	91,015	86,527
	<u>9,831,961</u>	<u>7,934,778</u>
TANGIBLE CAPITAL ASSETS	<u>358,596</u>	<u>451,766</u>
	<u>\$10,190,557</u>	<u>\$ 8,386,544</u>
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Accounts payable and accrued liabilities	\$ 874,087	\$ 630,715
Government remittances payable	516,547	454,044
Deferred revenue	4,182,939	3,610,000
	<u>5,573,573</u>	<u>4,694,759</u>
DEFERRED RENT PAYABLE	<u>210,416</u>	<u>227,369</u>
	<u>5,783,989</u>	<u>4,922,128</u>
NET ASSETS		
Unrestricted	3,943,339	2,990,802
Invested in tangible capital assets	358,596	451,766
Internally restricted - sexual abuse therapy fund	104,633	21,848
	<u>4,406,568</u>	<u>3,464,416</u>
	<u>\$10,190,557</u>	<u>\$ 8,386,544</u>

On behalf of the Board:

Shelley Briscoe-Dimock
 Director

K.G.E. Lomp
 Director

STATEMENT OF OPERATIONS
YEAR ENDED MARCH 31, 2021

	2021	2020
Revenue		
Membership	\$ 4,268,000	\$ 3,952,582
Jurisprudence	217,792	177,109
Application	231,100	208,298
Administration	59,793	140,047
Interest income	27,034	92,421
	<u>4,803,719</u>	<u>4,570,457</u>
Expenses		
Salaries and benefits	2,066,353	1,865,079
Complaints and discipline	522,143	503,512
Occupancy	255,737	257,424
Database and e-learning	313,926	231,746
Council and committees	123,294	120,053
Office	213,148	102,767
Registration	48,187	62,996
Professional services	65,490	44,990
Quality assurance	131,102	66,887
Communications	12,268	6,926
Insurance	7,631	7,848
Sexual abuse therapy fund	7,715	5,287
Amortization of tangible capital assets	94,573	95,580
	<u>3,861,567</u>	<u>3,371,095</u>
Excess of revenue over expenses	<u>\$ 942,152</u>	<u>\$ 1,199,362</u>

STATEMENT OF CASH FLOWS
YEAR ENDED MARCH 31, 2021

	2021	2020
CASH PROVIDED FROM (USED IN)		
OPERATING ACTIVITIES		
Excess of revenues over expenses	\$ 942,152	\$ 1,199,362
Items not involving cash:		
Amortization of tangible capital assets	94,573	95,580
Amortization of deferred rent payable	<u>(16,953)</u>	<u>(11,589)</u>
	1,019,772	1,283,353
Changes in non-cash working capital items:		
Prepaid expenses	(4,488)	(9,966)
Accounts payable and accrued liabilities	243,372	321,035
Government remittances payable	62,503	(23)
Deferred revenue	<u>572,939</u>	<u>8,186</u>
	<u>1,894,098</u>	<u>1,602,585</u>
INVESTING ACTIVITIES		
Purchase of tangible capital assets	<u>(1,403)</u>	<u>(46,792)</u>
INCREASE IN CASH	1,892,695	1,555,793
CASH, BEGINNING OF YEAR	<u>7,848,251</u>	<u>6,292,458</u>
CASH, END OF YEAR	<u>\$ 9,740,946</u>	<u>\$ 7,848,251</u>



CRPO is committed to providing accessible services, information and communication to individuals with disabilities. Accommodation will be customized to each person according to their needs. If you require an accessible service, format and/or communication support, please contact us at info@crpo.ca or 1-844-712-1364.

375 University Avenue, Suite 803
Toronto, ON M5G 2J5
T: 416-479-4330 / 1-844-712-1364
F: 416-639-2168
e: info@crpo.ca

Registrar's Report to Council

September 16, 2021

Respectfully submitted by Mark Piore (Acting Registrar to August 16) and Deborah Adams

Public Interest Rationale

The Registrar is responsible for reviewing CRPO's effectiveness in achieving its public interest mandate and the implementation of the Council's strategic plan and directional policies. This report provides Council with a summary update on work that was done in between meetings.

Pandemic and Emergency Preparedness

There is little change to current arrangements related to the pandemic. Staff continues to monitor and relay information being provided by government, public health and other trusted sources.

College operations will remain remote (both staff work and committee and Council meetings) for the immediate future.

UPDATES

Quality Assurance Enhancement Project

From April to July, a group of RPs completed four workshops writing cases for CRPO's future online assessment. In late 2022, the online assessment will become part of the QA program. The assessment will help determine what level of QA involvement a registrant would benefit from.

Office sub-lease

CRPO has entered into an agreement sub-leasing most of its current office space and retaining access to limited office space and periodic boardroom access.

Practice Advisory Service

		2018-2019	2019-2020	2020-2021
Q1	Apr-Jun	98	325	669
Q2	Jul-Sep	216	352	332 (to date)
Q3	Oct-Dec	243	432	
Q4	Jan-Mar	357	541	626

We continue to receive inquiries related to COVID-19, including:

- Providing in-person therapy
- Vaccination

Other common topics include:

- Confidentiality
 - Release of client records
- Referral
 - Non-solicitation clauses

- How to refer to prevent real or perceived conflict of interest
- Health Information Custodian/Successor
- Duty to report
- Cross-jurisdictional practice
 - RPs working remotely with clients outside Ontario
 - Practitioners outside of Ontario working remotely with clients in Ontario

Registration

	April	May	June	July	August
Applications started	191	164	121	94	120
Total applications submitted	174	167	113	98	110
Applications from recognized programs submitted	149	140	92	80	95
Applications from non-recognized programs submitted	24	24	21	18	15
Labour mobility applications	1	3	0	0	0

Total registrants:

- RP 6,466
- Qualifying 2,001
- Inactive 158

Renewal:

- 55 registrants were suspended for not completing registration renewal by April 30
- 21 individuals had their registration revoked for not completing registration renewal and remaining in the suspended category for two years

Compliance Monitoring

Files currently being monitored are as follows:

Registration Committee:	
Clinical supervision/monitoring	23
Personal/Group Therapy/Drug Screening	1
Cease using the term "Dr" / claim to hold a degree	5
Currency upgrading	9
Education	5
Practice Assessment	5
Not Completed: result of resignation/revocation	1
On Hold: other reasons (e.g. on leave or Interim Order suspension)	3
Terms, Conditions and Limitations	26
Undertaking	2
Learning Plan (Educational Upgrade)	3
ICRC:	
Clinical supervision/monitoring:	15
Personal/Group Therapy/Drug Screening	3

Ethics or education courses	15
Practice Restrictions	4
Reflective Paper	5
Review Standards	1
Practice Assessment	2
Resignation	1
In-Person Caution	2
Internet Search for evidence of practicing psychotherapy/restrictions on practice while Interim Order is in place	6
On Hold: currently under appeal at HPARB	6
Not Completed: result of resignation/revocation	14
On Hold: other reasons (e.g., on leave)	4
Undertaking	5
In-Person Caution (only)	1
Remedial agreement	4
SCERP	17
Terms, Conditions and Limitations	1
Interim Order	5
Interim Suspension	3
QA:	
Clinical supervision/monitoring	1
Reflective Paper/Report	1
Review Standards	1
Submit revised advertising material	0
Discipline:	
Education	5
Clinical Supervision	2
Costs	6
Suspension	1

STAKEHOLDER ENGAGEMENT

Stakeholder Meetings

- *May 19, 2021:* Peer Circle Debrief meeting with association sponsors and peer circle facilitators.
- *May 20, 2021:* Discussion with Canadian Association of Marriage and Family Therapists regarding clinical supervision requirements.
- *June 1, 2021:* meeting with Ontario Society of Registered Psychotherapists (OSRP) representatives.
- *June 24, 2021:* CRPO Association Stakeholder meeting. Thirteen associations were represented.
- *June 29, 2021:* Citizen Advisory Group (CAG) partner meeting. CRPO joined the CAG, a group of health regulatory colleges that coordinates a pool of Ontario laypeople who

have experience with the healthcare system. Health regulatory colleges can consult the CAG and obtain public perspective on policy and communication initiatives.

- *July 7, 2021*: meeting with Ontario Association of Mental Health Professionals (OAMHP) representatives.

Staff Presentations

Since the last Council meeting, staff have led the following presentations:

- *May 7, 2021*: a presentation was provided on the CRPO registration process via Zoom to Toronto Art Therapy Institute.
- *May 19, 2021*: a presentation was provided on cross-border therapy to Sheridan College Counselling team members.
- *May 27, 2021*: a presentation was provided on review and recognition and general registration updates to education programs.
- *June 10, 2021*: a presentation was provided on the registration process to the Toronto Institute for Relational Psychotherapy.

Education Day

- On July 15, 2021, Council, committee and staff members participated in learning on:
 - *Regulation in the Public Interest*, by Deanna Williams
 - *Land Acknowledgements: A Primer*, by Darcy Belisle
 - *Elevating Meeting Management: Chair Training*, by Shenda Tanchak

COUNCIL MINUTES

Thursday, May 13, 2021
9:30 a.m. to 12:30 p.m.
ZOOM videoconference

Council Members:

Heidi Ahonen, RP
Andrew Benedetto, RP

Steven Boychyn, Public Member

Shelley Briscoe-Dimock, RP (President)
Sherine Fahmy, Public Member
Kali Hewitt-Blackie, RP
David Keast, Public Member
Kenneth Lomp, RP (Vice-President)
Michael Machan, RP
Miranda Monastero, RP
Judy Mord, RP
Keri Selkirk, Public Member
Jane Snyder, Public Member
Radhika Sundar, RP

Staff Members:

Mark Pioro, Acting Registrar
Jo Anne Falkenburger, Director of Operations
& Human Resources
Amy Fournier, Executive Coordinator
(Recorder)

1. Welcome and Opening Remarks

S. Briscoe-Dimock, President & Chair, called the meeting to order at 9:30 a.m. and welcomed all present.

2. Approval of Draft Agenda

The Chair introduced the draft agenda.

MOTION C-13MAY2021 – M01

That the agenda of the May 13, 2021, meeting of Council be approved as presented.

Moved: M. Monastero

Seconded: K. Selkirk

CARRIED

3. Conflict of Interest Declarations

None declared.

4. College Performance Measurement Framework: By-law Changes

M. Pioro, Acting Registrar, introduced the proposed by-law changes and provided information regarding the CRPO's current Council orientation process. The proposed by-law changes would

require that candidates complete the orientation modules as part of the nomination process. The format of the modules will be enhanced and improved over time, but the current modules and Council competencies serve as a good starting place to implement this proposed change. The defined Council competencies will serve as a useful tool for candidates to self-screen whether they feel they possess the necessary skills and knowledge to be a Council member.

The other proposed amendment addresses the minimum waiting period for registrants who wish to run for election to CRPO Council and have resigned from a responsible position that they may have held with a psychotherapy professional association. Council agreed that a one-year minimum waiting period was comparable to other Health Profession Regulators of Ontario (HPRO) Colleges.

MOTION C-13MAY2021 – M02

That Council agrees to circulate, for public consultation, the following proposed amendments to the College by-laws, as indicated below by track changes:

“10.04 – Eligibility for Election

A Member is eligible for election to Council if the Member has been nominated in accordance with the by-laws, has completed and returned the conflict of interest [and Council competency](#) questionnaires and if...”

“10.11 – Conflict of Interest [and Council Competency](#) Questionnaires

The Registrar shall request every nominee to complete and return a conflict of interest [questionnaire and a Council competency](#) questionnaire, and any nominee who fails to complete and return the questionnaires in the form and by the deadline set by the Registrar shall not be eligible for election.”

“10.14 – Acclamation

If, following the deadline for the return of the conflict of interest [and Council competency](#) questionnaires and the written confirmation of eligibility, the Registrar determines that the number of eligible candidates nominated for a position or positions for an electoral district is less than or equal to the number of members of Council to be elected for a position or positions in that district, the Registrar shall declare those candidates who are eligible for election to the position or positions to be elected by acclamation and shall notify the candidates and the membership of this result in the manner the Registrar deems most expedient and practical.”

“[10.095 Council Role Orientation](#)

[No Member is eligible for election as a member of Council unless they have completed the candidate orientation course that was set or approved by Council.](#)”

“(viii) the Member has ~~agreed to resign~~, [no less than one year before the date of the election](#), any responsible position such as director, board member, officer or employee that the Member holds with a Professional Association relating to psychotherapy, ~~by completing and returning the conflict of interest questionnaire, and if elected, to resign any such position before taking office as a Council member;~~”

Moved: A. Benedetto

Seconded: D. Keast

CARRIED

5. **Regulatory Risk Framework**

S. Briscoe-Dimock introduced the topic and provided background information. M. Pioro outlined the College's ability to analyze and respond to perceived risks, noting that the College's strategic plan, regulatory objectives and work plan deliverables make mention of a framework for assessing regulatory risk. Council reviewed the draft regulatory risk framework documents, including the right touch decision tree, policy proposal template, regulatory risk framework and risk flow diagram. M. Pioro also highlighted the inter-committee aspects of regulatory risk, particularly regarding clinical supervision. Council was presented with draft Professional Practice Working Group (PPWG) Terms of Reference and discussed the possibility of reconstituting the working group to advise College staff on the regulatory risk framework, among other policy-related initiatives.

6. **Succession Planning**

S. Briscoe-Dimock introduced the topic and noted that the Executive Committee, in their role as the stewards of the Governance Reform Initiative, have been reviewing and discussing succession planning at a committee level since September 2020.

Council was provided with draft copies of role descriptions and focused the discussion on leadership roles, particularly, how to educate and support Council members interested in pursuing leadership positions. Topics included mentoring and co-chair positions. Council also discussed using a diversity lens to ensure that leadership positions reflect the population at large.

Staff will continue to research and revise the role descriptions so they align with time commitment expectations and will further develop the role of Vice President to share or be assigned certain responsibilities along with the President. In addition, staff will research possible timelines or a governance calendar to ensure that any additional training for leadership roles aligns with committee appointments and Council slate approval. Any revisions to the role descriptions or governance calendar will be presented to the Executive Committee prior to being presented to Council for approval.

7. **Committee Appointments**

S. Briscoe-Dimock introduced the item and proposed the following motion:

MOTION C-13MAY2021 – M03

That Council appoint Sherine Fahmy, public member, to the Inquiries, Complaints and Reports, Nominations & Elections and Quality Assurance Committees.

Moved: K. Lomp

Seconded: M. Monastero

CARRIED

8. **Executive Limitations Policies: Council Registrar Relationship**

S. Briscoe-Dimock and M. Pioro introduced the topic, stating that consensus is being sought to approve the Council Registrar Relationship policy. This is an operational policy that has been codified in order to hold ourselves accountable. Consensus was reached.

9. Board Evaluation Update

S. Briscoe-Dimock provided background information regarding the board evaluation project that CRPO has been undertaking with Pollinate Networks and reminded Council members to complete the annual Council Effectiveness Survey.

10. July Council Meeting

S. Briscoe-Dimock introduced the topic. The July 15, 2021, Council meeting will be a half-day education day and will be closed to the public. The education session will run from 11:00 a.m. until about 3:00 p.m. The agenda will be finalized at the end of June.

11. Registrar's Report

M. Piore presented his report to Council and provided additional updates regarding the supervision survey, a plan to start a clinical experience recognition program and new legislation to regulate Applied Behaviour Analysis (ABA) providers under the College of Psychologists.

12. Consent Agenda

Consent agenda items are non-controversial or routine items that are discussed at every meeting. Council members seeking clarification or asking questions regarding consent agenda items must be directed to the President prior to the meeting. Consent agenda items can be moved from the consent agenda to regular discussion items if required. The consent agenda is approved under one motion.

- Draft minutes of March 25, 2021
- Committee Reports
- Terms of Reference

MOTION C-13MAY2021 – M04

That Council approve the consent agenda as presented.

Moved: M. Machan
Seconded: J. Mord
CARRIED

13. Council Question Period

Questions raised included:

- fees charged by RPs
- RPs writing letters for divorce and custody hearings

14. IN CAMERA: Approval of In Camera Minutes (March 25, 2021)

MOTION C-13MAY2021 – M05

That the public be excluded from the meeting pursuant to clause 7.2 (b) of the Health Professions Procedural Code of the Regulated Health Professions Act, in that financial or personal or other matters

may be disclosed of such a nature that the harm created by the disclosure would outweigh the desirability of adhering to the principle that meetings be open to the public at 12:17 p.m.

Moved: M. Machan
Seconded: S. Boychyn
CARRIED

15. ADJOURNMENT

MOTION C-13MAY2021 – 06

That the meeting be adjourned at 12:22 p.m.

Moved: S. Boychyn
Seconded: K. Lomp
CARRIED

DRAFT

Discipline Committee Report to Council

September 16, 2021

Committee Members

- Heidi Ahonen, RP
- Andrew Benedetto, RP
- Steven Boychyn
- Shelley Briscoe-Dimock, RP
- Carol Cowan-Levine, RP, Chair (Non-Council Committee Member)
- Kathleen (Kali) Hewitt-Blackie, RP
- David Keast
- Kenneth Lomp, RP
- Michael Machan, RP
- Miranda Monastero, RP
- Judy Mord, RP
- Jane Snyder (resigned August 2021)
- Keri Selkirk
- Radhika Sundar, RP

Committee meetings: n/a

Panel meetings: n/a

Referrals, Hearings Pre-hearing Conferences & Motions

Referrals:

Since the last Council meeting, we have received one new referral to Discipline (CRPO v FINLEY).

Hearings:

An uncontested hearing (CRPO v HUNTER) occurred on July 13, 2021, resulting in a finding of professional misconduct and Order on Penalty and Costs.

The following hearings are scheduled as noted below:

CRPO v DALY: September 30, 2021

CRPO v GHOSHAL: October 6, 2021

The following matters are awaiting scheduling:

CRPO v HARAMIC

CRPO v FINLEY

Pre-hearing Conference:

One pre-hearing conference (CRPO v GHOSHAL) occurred on July 21, 2021.

Motions:

We received one written motion requesting an adjournment of scheduled dates for a contested hearing (CRPO v HARAMIC) which was granted

Training

No training has occurred since the last Council meeting.

The Committee Recommends:

That the Discipline Committee's Report to Council be accepted as presented.

Respectfully submitted,

Carol Cowan-Levine
Chair, Discipline Committee

Examination Committee Report to Council

September 16, 2021

Committee Members

- Heidi Ahonen, RP (Chair)
- Andrew Benedetto, RP
- Steven Boychyn
- Felipe Cepeda, RP (Non-Council Committee Member)
- Kali Hewitt-Blackie, RP
- Michael Machan, RP
- Miranda Monastero, RP
- Keri Selkirk

Committee meetings:

- May 20, 2021

Panel meetings:

- n/a

At the May 20, 2021, two-hour plenary meeting, the Examination Committee considered the following matters:

Reviewing Appeals: Detecting Public Safety Concerns

The Committee discussed concerns related to public safety when an RP (Qualifying) registrant files an appeal and has potential competency gaps (globally low exams score resulting in the failure). The Committee discussed options for addressing these concerns in a way that promotes public protection and is within the authority of the Committee.

Modified Peer and Practice Reviews

The Committee discussed the use of the Modified PPR for the purposes of educational upgrading following a second exam failure.

Library of Resources

The Committee reviewed a library of resources which includes a list of activities (e.g., courses, workshops, training, webinars) as options for remediation for educational upgrading, following a second exam failure.

Panel Packages and Meetings

The Committee discussed the format of panel packages and meetings.

Formal Motions to Council:

n/a

The Committee Recommends:



That the Examination Committee's Report to Council be accepted as presented.

Attachments:

n/a

Respectfully submitted,

Heidi Ahonen, RP
Chair, Examination Committee

Executive Committee Report to Council

September 16, 2021

Committee Members
<ul style="list-style-type: none">• Andrew Benedetto, RP• Steven Boychyn• Shelley Briscoe-Dimock, RP (Chair)• Kenneth Lomp, RP

Committee meetings:

- June 17, 2021
- August 9, 2021
- August 19, 2021

The Executive Committee considered the following matters at the June 17 and August 19, 2021, meetings:

Professional Practice Working Group (PPWG) Composition

The Executive Committee discussed the composition of the PPWG and reviewed the terms of reference. See agenda item 4.

Access to Care Statement Review

The Executive Committee reviewed proposed changes to the CRPO's Access to Care Statement. See agenda item 5.

Supervision Review

Executive reviewed the results and project plan for the ongoing supervision review.

Succession Planning

Executive Committee reviewed a proposed by-law change that would affect the term of office for Executive Committee members. The Committee also reviewed two draft policies related to succession planning. See Agenda item 8.

Policy Review

As part of the College's ongoing policy review, the Executive Committee recommended approving the following revised policies: *Accepting Reimbursement for College Travel Expenses, Council Observer Guidelines, Recording Council Meetings and Reimbursing CRPO Guests*. See agenda item 11.

Board Evaluation Update

The Executive Committee reviewed the quarterly 5-minute meeting evaluations and the annual Council Efficacy Survey. See agenda item 12.

Public Consultation: By-law Amendments

The Executive Committee reviewed the stakeholder feedback regarding the proposed by-law amendments related to election eligibility and minimum waiting period. See agenda item 9.

Audited Financial Statements

Samantha Slater of Welch LLP presented the audited financial statements and answered questions posed by the Executive Committee. The audited financial statements will be presented for information with the Annual Report. See agenda item 13.

Cybersecurity Risk Management

Executive Committee received an update on the cybersecurity measures that the College currently has in place and explored more ways to ensure that all Council and staff members are working remotely in a safe way, including tablets and Chromebooks for Council and/or committee members. Staff will conduct further research before presenting a more concrete plan to the Executive Committee.

Governance Reform Letter from the Ministry of Health

The Executive Committee reviewed the memo from the Ministry of Health regarding opportunities for governance reforms under the Regulated Health Professions Act, 1991, and the 26 profession-specific acts. The letter from the Assistant Deputy Minister and the CRPO's response is attached to this report.

Diversity and Inclusion Initiative

The Executive Committee discussed the College's ongoing diversity inclusion initiatives. Educational opportunities will be researched and provided to Council throughout the year beginning with two workshops from the [Canadian Centre for Diversity and Inclusion](#) (CCDI).

Q1 Financial Statements

J. Falkenburger, Director of Operations & Human Resources, presented the Q1 financial statements to the Executive Committee for information. Executive was satisfied with the report and the financial stability represented.

CRPO Office Space Agreement

Given that College operations continue efficiently on a remote basis and that virtual work allows CRPO to draw from a wider pool of skilled staff and provide access to Council members from across the province, senior staff recommended that a sublease for the physical office space be explored.

The College has received an offer from Rosen and Kirshen Professional Corporation. The sublease would commence February 2022 and conclude September 2027. As part of the sublease the operations staff have negotiated the full use of one large office, access to the kitchen, server room and 24 days per year of the boardroom. This will cost the College a fixed monthly fee over the course of the first year with the option to renew yearly. The Executive Committee provided direction to staff to complete the lease agreement with Rosen and Kirshen.

ACTION TAKEN IN BETWEEN COUNCIL MEETINGS

In accordance with the Regulated Health Professions Act (12(1)), "[b]etween the meetings of the Council, the Executive Committee has all the powers of the Council with respect to any matter that, in the Committee's opinion, requires immediate attention, other than the power to make, amend or revoke a regulation or by-law."

Appointment of Interim Backup Signing Officer

At the June 17, 2021, meeting, the Executive Committee appointed Jenna Smith, Manager, Professional Conduct, as backup signing officer, effective July 1, 2021. Council appointed S. Fraser, Director of Registration, as backup signing officer at the January 14 Council meeting. S. Fraser will begin parental leave in July 2021. As such, the Executive Committee passed a motion to appoint J. Smith as signing officer for the College with the same authority and financial limits as the Registrar effective July 1, 2021, until a new Registrar is appointed.

Formal Motions to Council

Noted in briefing notes.

The Committee Recommends:

That the Executive Committee's Report to Council be accepted as presented.

Respectfully submitted,

Shelley Briscoe-Dimock
Chair, Executive Committee

June 8, 2021

158-2021-46

Dear College Presidents and Registrars/ Executive Directors

Over the past several months, we have seen the ongoing diligent and tireless contributions of all our health system partners in response to the COVID-19 pandemic.

As we prepare for a potential burden reduction Bill this Fall, the ministry is exploring opportunities for governance reforms under the *Regulated Health Professions Act, 1991* and your respective 26 health profession Acts that would increase your efficiency and your ability to respond swiftly to emerging needs.

I am aware that many colleges have expressed interest in governance changes since 2017. Since that time, there have been developments, namely, the ongoing pandemic and the introduction of Bill 283, which have added to the discussion on governance reform.

As I have noted in previous conversations, I would like to seek your input on whether previous advice to the ministry on governance reform has changed in light of the progress of time and recent experience with the COVID-19 pandemic, as well as, the government's introduction of legislation establishing a new framework for oversight.

I am requesting your feedback on possible governance reforms by June 30th.

I look forward to our continued partnership as we explore opportunities to improve and strengthen the oversight system for health professions in Ontario.

Sincerely,



Sean Court
Assistant Deputy Minister

Encl.

c. Allison Henry, Director

June 29, 2021

Sean Court
Assistant Deputy Minister
Sent via email

Re: Governance and Related Legislative Reform Opportunities

Dear Sean Court:

Thank you for requesting feedback on possible college governance reforms. The Executive Committee of CRPO has met in order to inform a response. Some of the following items relate specifically to Council and committee oversight. Others relate more broadly to legislative changes that would enhance CRPO's ability to fulfill its public protection mandate. In general, CRPO supports governance modernization efforts, such as CNO's Vision 2020.

1. Allow for appointment of professional Council members instead of election.

As the Ministry is aware, elections to Council are no longer regarded as best practice. We request section 6(1)(a) and section 6(2) of the *Psychotherapy Act, 2007* to allow for appointment of professional Council members instead of election. CRPO has adopted [competencies](#) for Council members and would implement a rigorous appointment process for Council candidates. CRPO has experience appointing committee members based on competencies and [composition](#) criteria, for example appointing candidates bringing the perspective of northern communities or of BIPOC individuals. Council has also appointed a Council member to fill a vacancy as permitted by our by-laws, instead of holding a by-election.

2. Allow CRPO to appoint and remunerate members of the public on Council.

Similar to the previous proposal, allowing CRPO to appoint members of the public to Council would ensure they are screened for the specific competencies set by CRPO, and would promote continuity. If the Lieutenant Governor in Council were no longer responsible for appointing public members of Council, there are still accountability measures in place to ensure CRPO is fulfilling its mandate (e.g. section 5 of the RHPA, appointing a College supervisor, Office of the Fairness Commissioner, CPMF reporting, HPARB, common law fiduciary duty, etc.).

3. Amend CRPO's legal name.

CRPO's legal name, under section 5 of the *Psychotherapy Act, 2007*, is "College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario" in English, and "Ordre des psychothérapeutes autorisés et des thérapeutes autorisés en santé mentale de l'Ontario" in French. CRPO has never used the registration category or title of Registered Mental Health Therapist (RMHT). Since 2013, CRPO has been using a shorter trade name. We request the College to be continued legally under the name "College of Registered Psychotherapists of Ontario" in English and "Ordre des psychothérapeutes autorisés de l'Ontario" in French.

Since 2013, there have not been stakeholder proposals to use the RMHT category or title. Individuals who might have been registered as RMHTs (for example child & youth workers and addiction counsellors) have either registered as RPs¹ or ensured based on CRPO's

¹ Assuming they have enough education and experience in psychotherapy to meet the registration requirements.

[interpretations](#) that they do not practise the controlled act of psychotherapy. The proposed legal name change would clarify that CRPO regulates registered psychotherapists. The RMHT title could still remain as a restricted title under section 8 of the *Psychotherapy Act, 2007*, if there is ever a future proposal to use it.

4. Build risk-based regulation into the complaints process.

Part of modern regulatory governance and practice is an efficient, effective complaint process. CRPO takes public protection through the complaint process seriously. Currently, all complaints² require a full investigation and deliberation by a panel of at least three committee members. This fulsome process does not allow for the timely and efficient disposition of minor complaints. We request the Health Professions Procedural Code be amended to allow for earlier and simplified disposition of minor complaints. Such a change can still allow for appropriate checks and oversight to ensure the public interest is being upheld.

5. Review RHPA language about supervision of individuals performing a controlled act while fulfilling requirements to join an RHPA college.

The current health system is inter-professional and collaborative by nature. Regulation should parallel this care model. Currently section 29(1)(b) allows individuals fulfilling requirements to join an RHPA college (generally students), to perform a controlled act under the supervision of a member of “the profession”. The reference to “the profession” could hinder inter-professional collaboration by preventing a member of one profession from supervising performance of a controlled act by a student fulfilling the requirements to join a different profession (e.g. a student seeking to register with CRPO performing the controlled act of psychotherapy under the supervision of a psychologist or social worker).

CRPO is currently conducting a supervision policy review and is not yet in a position to formally state a position on which professionals should supervise students intending to register with CRPO. However, we recommend that the Ministry consider supporting an amendment to the language of section 29(1)(b) to allow for greater inter-professional collaboration in general.

6. Approve a regulation under section 11 of the *Psychotherapy Act, 2007*, prescribing therapies involving the practice of psychotherapy.

In 2017, the Minister of Health and Long-Term Care required CRPO to “Use its regulation-making authority under section 11 of the *Psychotherapy Act, 2007* to make a regulation ‘prescribing therapies involving the practice of psychotherapy, governing the use of prescribed therapies and prohibiting the use of therapies other than the prescribed therapies in the course of the practice of psychotherapy’”.

CRPO convened a Task Group, consulted stakeholders, and submitted a proposed regulation (see Appendix A) for approval by Government. Approving the proposed regulation would bring finality to CRPO’s work of clarifying the practice of psychotherapy in Ontario.

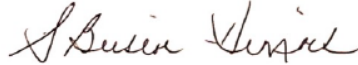
² Subject to the rare exception of complaints that meet the threshold of “frivolous, vexatious, made in bad faith, moot or otherwise an abuse of process”.

We appreciate the work of the Ministry in promoting a strong and modern regulatory system. We look forward to working together to further regulatory modernization initiatives. Please let us know if you require any further information.

Sincerely,



Mark Piro
Acting Registrar



Shelley Briscoe-Dimock
President

Copy: Allison Henry, Director

Appendix A

Draft Regulation under section 11 of the *Psychotherapy Act, 2007*

1. The following are the categories of prescribed therapies involving the practise of psychotherapy:

- Cognitive and Behavioural therapies
- Experiential and Humanistic therapies
- Psychodynamic therapies
- Somatic therapies
- Systemic and Collaborative therapies

Full suite of controlled act consultation documents: <https://www.crpo.ca/wp-content/uploads/2018/08/Controlled-Act-of-Psychotherapy-Final-Documents.pdf>

Fitness to Practise Committee Report to Council

September 16, 2021

Committee Members
<ul style="list-style-type: none"> • Heidi Ahonen, RP • Andrew Benedetto, RP • Steven Boychyn • Shelley Briscoe-Dimock, RP • Carol Cowan-Levine, RP, Chair (Non-Council Committee Member) • Kathleen (Kali) Hewitt-Blackie, RP • David Keast • Kenneth Lomp, RP • Michael Machan, RP • Miranda Monastero, RP • Judy Mord, RP • Jane Snyder (resigned August 2021) • Keri Selkirk • Radhika Sundar, RP

Committee meetings:

- n/a

Panel meetings:

n/a

Referrals, Hearings Pre-hearing Conferences & Motions

Referrals:

Since the last Council meeting, we have received no new referrals to Fitness to Practise. Currently, we have a total of 3 referrals.

Hearings:

An uncontested hearing occurred on August 5, 2021, resulting in a finding of incapacity and Order.

A contested hearing is scheduled on September 27-29.

Pre-hearing Conference:

Two pre-hearing conferences occurred since the last Council meeting.

Motions:

We have received one motion to withdraw the allegations of incapacity. This matter was reviewed in writing on June 22, 2021, by a panel. The panel did not grant the College leave to withdraw the allegations of incapacity. Another motion hearing is scheduled to review new evidence on September 2, 2021.

Training

No training has occurred since the last Council meeting.

The Committee Recommends:

That the Fitness to Practise Committee's Report to Council be accepted as presented.

Respectfully submitted,

Carol Cowan-Levine
Chair, Fitness to Practise Committee

Inquiries, Complaints and Reports Committee Report to Council

September 16, 2021

Committee Members
<ul style="list-style-type: none"> • Steven Boychyn • Shelley Briscoe-Dimock, RP (Chair) • David Bruce, RP (Non-Council Committee Member) • Kimberly Cato, RP (Non-Council Committee Member) • Kathleen (Kali) Hewitt-Blackie, RP • Kenneth G. E. Lomp, RP • Miranda Goode Monastero, RP • Judy Mord, RP • Carla Ribeiro, RP (Non-Council Committee Member) • Kafui Sawyer, RP (Non-Council Committee Member) • Keri Selkirk • Jane Snyder (resigned August 2021)

Plenary meetings:

- N/A

Panel meetings:

- May 18, 2021
- May 25, 2021
- June 14, 2021
- June 18, 2021
- July 8, 2021
- July 29, 2021
- August 5, 2021
- August 24, 2021
- September 14, 2021

General Summary

Current fiscal (to date) April 1, 2021-Present		
	Received ¹	Decisions Released ²
Formal Complaints	30	21
Registrar's Investigations	8	9
Incapacity Investigations	0	3

Referrals for a hearing (to date) April 1, 2021-Present	
Discipline Referrals	3
Fitness Referrals	0

¹ Does not include files opened in previous fiscal years.

² Includes files opened in previous fiscal years.

Staff and Committee have been hard at work preparing for 9 panel meetings which have taken place since May 2021. The Committee continues meeting virtually and delivering in-person cautions via videoconference. The frequency of panel meetings has helped to clear a backlog of files ready for decision, and reduced timelines for investigations by reviewing appointments of investigator. The Committee has also been better positioned to attend to urgent matters, for example interim orders.

There are currently 5 registrants under interim order as a result of ongoing ICRC investigations. This includes 3 registrants who are subject to interim suspensions. These matters relate to allegations of sexual abuse of clients and capacity concerns.

The Committee's next plenary meeting is slated for October 21, 2021.

Respectfully submitted,

Shelley Briscoe-Dimock, RP
Chair, Inquiries, Complaints & Reports Committee

Registration Committee Report to Council

September 16, 2021

Committee Members
<ul style="list-style-type: none"> • Andrew Benedetto, RP (Chair) • Heidi Ahonen, RP • Elda Almario, RP (Non-Council Committee Member) • David Keast • Michael Machan, RP • Muriel McMahon, RP (Non-Council Committee Member; IRTG Appointment) • Ahil Nageswaran, RP (Non-Council Committee Member) • Radhika Sundar, RP • Jane Snyder

Committee meetings:

- July 20, 2021

Panel meetings:

- May 28, 2021
- June 18, 2021
- July 20, 2021
- July 23, 2021
- August 20, 2021
- September 10, 2021

New Recognized Program

At the July 20, 2021, plenary meeting, the Registration Committee approved a recommendation to recognize the University of Hearst Graduate Diploma in Psychotherapy program.

Panel Meetings

All meetings took place via video conference and were a half day in length with the exception of the July 20 meeting which was one hour long. Below are the statistics for the meetings from May through August. Results from the September 10 meeting will be included in the next report to Council.

Total applications reviewed	32
Approved	3
Refused	16
Terms, Conditions & Limitations	11
Requests for more information	2

Applications that meet the registration requirements can be approved at the staff level. The majority of applications are approved by staff without requiring review by the panel. Applications that do not appear to meet the requirements are referred to panel for further review. Only the panel has the ability to refuse applications (staff do not). Because of this, the number of applications refused by the panel is typically higher than the number of applications approved by the panel.

Health Professions Appeal and Review Board Update

Since the May 13, 2021 Council meeting update, the Health Professions Appeal and Review Board (HPARB) has returned six decisions. HPARB confirmed the Committee's refusals in all cases.

HPARB orders and reasons are posted on CanLii. The decisions can be found here:

- [K.F. v College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario](#)
- [A.M. v College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario](#)
- [C.R. v College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario](#)
- [A.G.N. v College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario](#)
- G.D. v College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario (decision not yet published online; included in package below)
- E.A. v College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario (decision not yet published online; included in package below)

When an applicant appeals to HPARB, they have the opportunity to make additional submissions in response to the panel's decision and reasons. This sometimes reveals new information not available to the panel that made the original decision. When HPARB returns an application to the College for reconsideration, it is often because new information has come to light. Returning the application for reconsideration allows the panel to review the new information and decide if it changes their original decision.

Formal Motions to Council

- n/a

The Committee Recommends:

- That the Registration Committee's Report to Council be accepted as presented.

Respectfully submitted,

Andrew Benedetto, RP
Chair, Registration Committee

Quality Assurance Committee Report to Council

September 16, 2021

Committee Members

- Kenneth Lomp, RP (Chair)
- Heidi Ahonen, RP
- Andrew Benedetto, RP
- Kayleen Edwards, RP (Non-Council Committee Member)
- Sherine Fahmy (Public Member)
- Kali Hewitt-Blackie, RP
- David Keast (Public Member)
- Miranda Monastero, RP
- Brenda Sedgwick, RP (Non-Council Committee Member)
- Jane Snyder (Public Member, resigned August 2021)

Committee meetings:

July 26, 2021

Since the May 13, 2021, Council meeting, QAC held one meeting on July 26, 2021. The following matters were assessed:

Standard Review Policy

See agenda item 6.

Dual or Multiple Relationships standard

Staff presented detailed background on Professional Practice Standard 1.7: Dual or Multiple Relationships. The background included a review of other regulators' and associations' policies and CRPO risk and trends from different departments (registration, practice advisory, quality assurance, professional conduct). QAC engaged in a preliminary review discussion and provided staff with principles for proposing a revised standard for future discussion.

Supervision Review

Staff presented an overview of the supervision review project. QAC discussed in particular the standard on how often a registrant should receive clinical supervision. QAC provided staff with principles for revising the standard, for future discussion.

Deadline change to the QA Program

Instead of calculating their 40 Professional Development hours every two years ending November 30, registrants will have until December 31 to complete their 40 PD hours. Using the calendar year simplifies calculating and tracking the PD hour requirement. It also gives registrants an extra month to complete their PD hours compared with the previous deadline. Registrants will have a reasonable amount of time, e.g., one or two weeks into the new year,

to submit their Self-Assessment, Learning Plan and Learning Record on CRPO's online platform, once available.¹

Formal Motions to Council:

Noted in briefing note.

The Committee Recommends:

That the Quality Assurance Committee's Report to Council be accepted as presented.

Respectfully submitted,

Kenneth Lomp RP
Chair, Quality Assurance Committee

¹ Currently the Self-Assessment is available on CRPO's registrant portal; however, the Learning Plan and Learning Record are currently only available in PDF format without the ability to submit.

Conflict of Interest Disclosure Form

Meeting Date: September 16, 2021
Council / Committee: Council
Meeting type: plenary

I acknowledge and agree that an actual or perceived conflict of interest can undermine confidence in the College and its ability to fulfil its public interest mandate. I have read and understood the [College's by-laws](#) on conflict of interest, the **Conflict of Interest Worksheet** (Appendix A), and the **Process for Considering & Declaring Conflicts of Interest** (Appendix B) document.

I agree to take all reasonable steps to avoid any actual or perceived conflict of interest from arising and, if one cannot be avoided, I undertake to declare any real, perceived, or potential conflict of interest and to recuse myself from any consideration of the matter at issue.

I have NO conflict of interest to report regarding any of the agenda items to be discussed at the above noted meeting.

I declare a conflict of interest with one or more of the agenda items to be discussed at the above noted meeting.

I certify that the information above is true and complete to the best of my knowledge.

WORKSHEET: Conflict of Interest

What is a conflict of interest?

A conflict of interest may be defined as any financial, personal, professional or emotional interest that could reasonably be perceived as interfering with the exercise of a person's public duties, for example as a CRPO Council, committee or panel member.

Self-screening Questions

Not sure if you are in a conflict of interest? In assessing for conflicts of interest, know that each situation will vary and have its own specific context. Consider the following questions & examples:



Financial interest

Do you stand to be affected financially by the outcome of this decision?

Example: The College is considering mandating all registrants to complete a course on the safe and effective use of self (SEUS). One Council member runs a business offering SEUS workshops. They declare a conflict of interest.

Example: The Council is discussing whether they would find College-provided iPads mounted in the meeting room for each Council member to be helpful. One Council member owns a small number of shares of Apple, Inc. Since the financial implication for the Council member is negligible or non-existent, they do not declare a conflict of interest.



Personal or professional relationship

Have you had a personal or professional relationship, e.g. friend, family, instructor, student, supervisor, supervisee, employer, employee, colleague, with any of the individuals involved in the matter?

Example: A Registration Committee panel member taught at the education program from which an applicant obtained some of their education. They declare a conflict of interest.

Example: An Inquiries, Complaints and Reports Committee panel member attended a two-day workshop seven years ago with the respondent's clinical supervisor. Since the contact was brief and occurred long ago, they do not declare a conflict of interest.



Professional bias. Do you have a private or publicly stated opinion that could reasonably be perceived as interfering with my ability to consider one or more of the issues with an open mind?

Example: There are two well-known camps regarding how best to conduct a particular model of psychotherapy. A Quality Assurance Committee member who falls firmly into Camp A is reviewing the peer and practice assessment report of a registrant who falls into Camp B. They declare a conflict of interest.

Example: An Inquiries, Complaints and Reports Committee panel member has published work about the harms of breaching therapist-client boundaries. They are reviewing a complaint involving an alleged breach of boundaries. Since there is no reasonable disagreement within the profession, and assuming they are not emotionally biased, they do not declare a conflict of interest.



Emotional bias

For whatever reason, do your ideas or emotions prevent you from considering one or more of the issues with an open mind?

Example: Based on personal experience, an Examination Committee member has an emotional reaction to a candidate's rationale for needing to extend the normal timeframe within which to write the exam. They declare a conflict of interest.

Example: A panel of the Inquiries, Complaints and Reports Committee is dealing with serious allegations of misconduct. After discussing and processing the emotional impact of reviewing the materials, they all reassure themselves that they can consider the situation with an open mind.



Interests of Related Persons

Are you aware that your parent, child, spouse or sibling has any of the above interests respecting Council, committee or panel business?

Example: A Registration Committee member's child is attending a program coming before the Committee to seek Recognition. They declare a conflict of interest.

Example: An Inquiries, Complaints and Reports Committee panel is considering a complaint by a firefighter. One panel member's spouse is

also a firefighter. Assuming there is no emotional bias, the profession of the panel member's spouse would not reasonably be seen as interfering with the panel member's duties. They do not declare a conflict of interest.



Threshold analysis

Would a reasonably well-informed person perceive that the above interest could interfere with the exercise of your public duties?

Example: A Discipline Committee panel member was employed at the same large agency at the time the alleged misconduct occurred. While the panel member had no prior knowledge of the alleged events, the panel member is close colleagues with a key witness in the case. There was a reasonable apprehension of bias on the part of the panel member.

Example: A complainant appeals a decision of the Inquiries, Complaints and Reports Committee taking no action against a registrant. Through Google, the complainant discovered that a panel member was a LinkedIn contact of the respondent. The panel member clarified they only met once briefly three years ago. Even though it may have been preferable for that panel member not to participate, this was not found to be a conflict of interest.

Process for Considering & Declaring Conflicts of Interest

The following are steps the College follows in addressing conflicts of interest.



Staff pre-screening

- Staff will pre-screen agenda items for obvious conflicts of interest on the part of Council, committee or panel members.
 - If a conflict is identified staff will alert the Chair and materials will not be sent to the conflicted member.
 - The matter will either be assigned to a different panel, or the conflicted member will be alerted in advance that they will not be present for the entire meeting.
-



Council, committee or panel member self-screening

- Go through the above self-screening.
 - If a concern is identified that does not rise to the threshold of a conflict of interest, consider making a courtesy declaration at the meeting to reassure the Council, committee or panel that you have considered the issue.
 - If unsure, consult with staff, legal counsel or the Chair. It is preferable to consult with staff or legal counsel before the Chair to avoid the risk of tainting the Chair.
 - In close cases, consider the potential benefit of declaring a conflict to avoid later disputes about whether or not there was a conflict of interest.
 - If you identify a conflict of interest, do not review the meeting materials further and securely delete them. Alert the Chair and support staff in advance of the meeting. Always declare in a general manner so as not to cause emotional bias on the listener's part.
 - Subsequently, declare the conflict at the meeting itself. Do not take part in or attempt to influence the deliberation and leave the room while deliberation is taking place. The general nature of conflict will be recorded in the minutes.
-



Council, committee or panel discussion of possible conflicts of interest

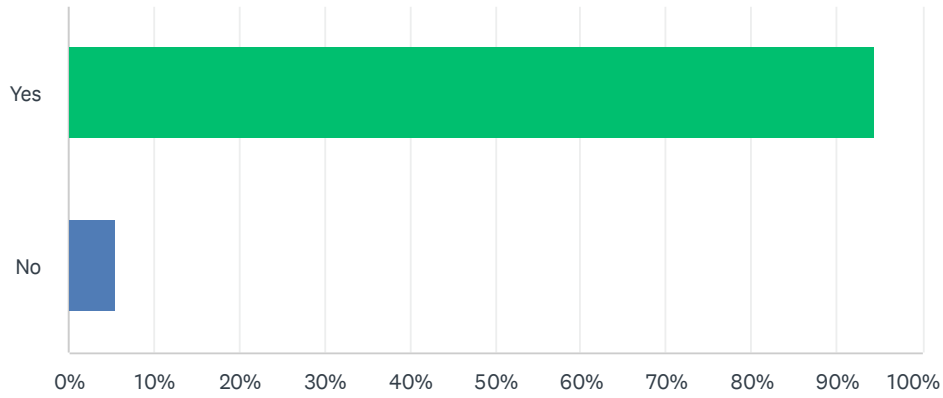
- Occasionally, you may become aware that another member may have a conflict. If that member does not declare a conflict, or if they are unsure, all members are responsible at the meeting for raising the concern and discussing whether it constitutes a conflict of interest.
- In rare cases of disagreement, a majority of those present can vote to find there is a conflict and exclude the conflicted member from considering the matter.

- Post Meeting Conduct: After recusing yourself on a matter, use professional discretion and avoid revisiting the issue with colleagues, even if the decision is on the public register or you have seen the meeting minutes.¹

¹ Council minutes are public documents (aside from in camera portions). Regarding committee and panel minutes, normally it will not be considered that viewing minutes by a panel member who has declared a conflict poses a risk of improperly affecting the College's decision. However, occasionally confidentiality and risk management may require that panel minutes not be viewed by a member who has declared a conflict of interest.

Q1 Did the session contribute to your competence as a Council or committee member?

Answered: 18 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	94.44%	17
No	5.56%	1
TOTAL		18

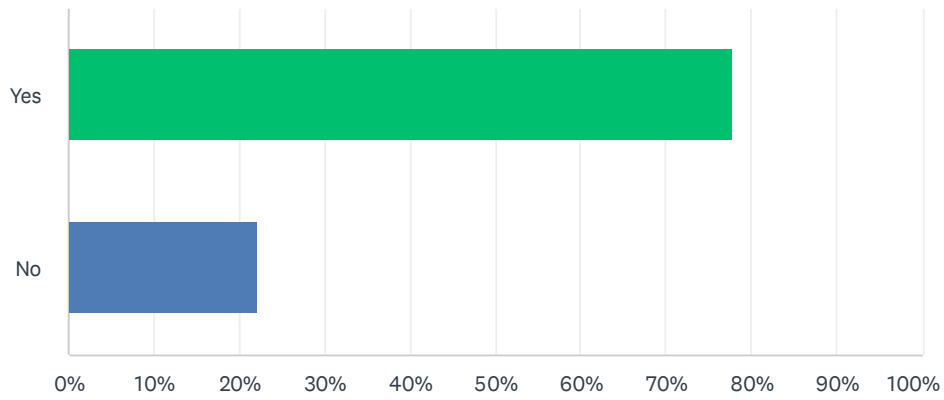
Q2 If yes, how?

Answered: 15 Skipped: 3

#	RESPONSES	DATE
1	Heightened awareness as to not pass judgement based on external factors, unconscious judgments	9/26/2021 4:57 PM
2	Increased awareness of the complexities of EDI	9/26/2021 8:57 AM
3	I became informed about the differences between equity and justice as well as learning that inclusion is a choice and diversity if a fact.	9/22/2021 10:08 PM
4	very informative	9/22/2021 3:51 PM
5	Helped me with cultural competence (stakeholder relations) and getting a more complete idea of "diversity" and what it means to be "racialized" (critical thinking).	9/22/2021 3:22 PM
6	More awareness of how we can be more inclusive in our practice, and mindful of diversity.	9/22/2021 8:24 AM
7	Increased knowledge of blindspots	9/22/2021 8:07 AM
8	Enhanced my understanding of how others view Inclusion and Diversity	9/21/2021 8:30 PM
9	The discussion by council members was most valuable in giving me perspectives to consider that I may not have considered previously.	9/21/2021 5:17 PM
10	made me think about my own conceptualization of diversity/inclusion that is more grounded in my lived experience and that of my colleagues.	9/21/2021 4:47 PM
11	Providing insight on the people that we are meant to protect as well as ensuring that we have a better appreciation of the registrants.	9/21/2021 3:33 PM
12	Generate more awareness and provide a safe space to dialogue about diversity and inclusion	9/21/2021 3:04 PM
13	understanding difference between equity equality	9/21/2021 2:27 PM
14	Golden Rule: Treat others as they would like to be treated.	9/21/2021 2:23 PM
15	Learning other's experiences, perspectives, and interests; and examining the approach to diversity as a unit with expert facilitation.	9/21/2021 2:12 PM

Q3 Did you learn anything new?

Answered: 18 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	77.78%	14
No	22.22%	4
TOTAL		18

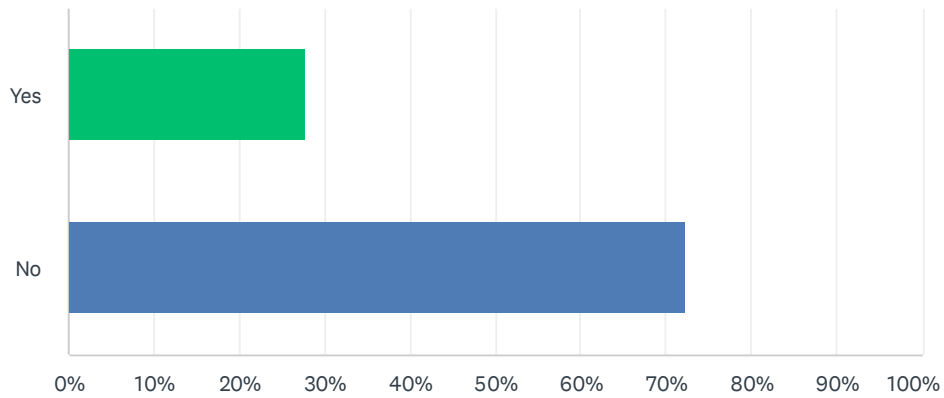
Q4 If yes, what?

Answered: 12 Skipped: 6

#	RESPONSES	DATE
1	The subtleties in judgement	9/26/2021 4:58 PM
2	Much more complex issues than anticipated or known.	9/26/2021 8:58 AM
3	Inclusion is a choice we have to make if we say we are anti-racist as an organization. We need to create more space intentionally because it is better for all of us and our communities.	9/22/2021 10:10 PM
4	The spectrum for diversity and perhaps some ideas about inclusion.	9/22/2021 3:23 PM
5	The learning of diversity being internal in addition to external, as well as learning about the different dimensions (ex. global, internal, external)	9/22/2021 8:25 AM
6	Internal versus external awareness	9/22/2021 8:07 AM
7	Again, discussion regarding race and religion being external vs. internal (vs. both) was valuable. Otherwise, I did not find that I learned anything new from the presentation itself.	9/21/2021 5:18 PM
8	not to "assume" I know the racial identity of the "other", but to ask how "they" define themselves. For eg. "colour of skin"	9/21/2021 4:48 PM
9	I learned a new way of looking at diversity and the classification of traits. Although there was significant discussion about whether or not some traits should be internal or external, it was a new way of considering them.	9/21/2021 3:37 PM
10	Inclusion is about creating a culture	9/21/2021 3:06 PM
11	Reinforced ways of seeing 'other'; don't take for granted that we really know someone else.	9/21/2021 2:24 PM
12	The way the facilitator conceptualizes external/visible and internal/invisible diversity attributes and the felt experience that participants encountered.	9/21/2021 2:14 PM

Q5 Was there anything missing or that didn't work in the session?

Answered: 18 Skipped: 0



ANSWER CHOICES	RESPONSES
Yes	27.78% 5
No	72.22% 13
TOTAL	18

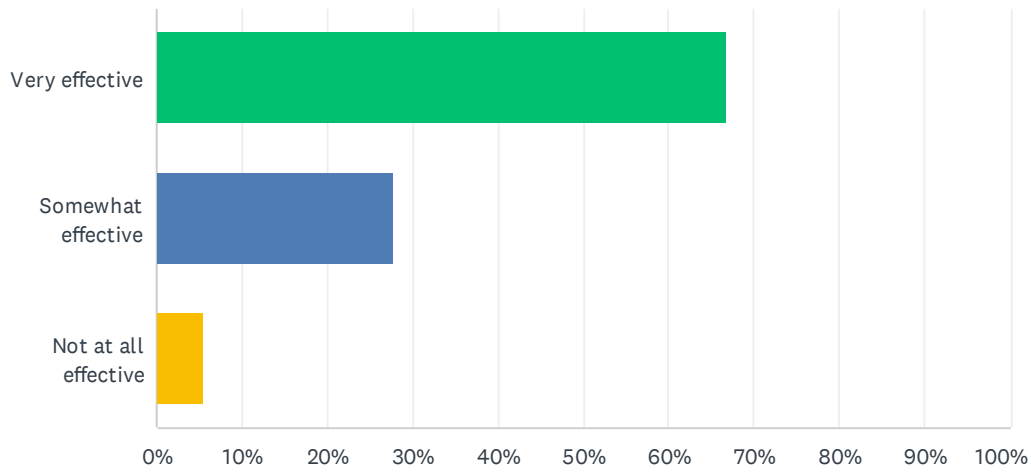
Q6 If yes, what?

Answered: 5 Skipped: 13

#	RESPONSES	DATE
1	The brak outroom time was too short to really discuss share formulate change and what doing it differently can look like or how the experience has translted in to one's work response.	9/26/2021 5:00 PM
2	I felt the session did not address how lack of inclusion and diversity disadvantages some groups more than others. Not all aspects of diversity are equal and the discussion didn't highlight that nuance.	9/21/2021 8:32 PM
3	Less content (or less introductory content) and more depth of content and discussion.	9/21/2021 5:19 PM
4	how to be more aware of this in our work at CRPO	9/21/2021 2:28 PM
5	The stats on "white males" was interesting but could have been presented on one slide. Two hour session would have benefitted from 15 minute break.	9/21/2021 2:26 PM

Q7 Overall, this education session was:

Answered: 18 Skipped: 0



ANSWER CHOICES	RESPONSES	
Very effective	66.67%	12
Somewhat effective	27.78%	5
Not at all effective	5.56%	1
TOTAL		18

Q8 Any other comments?

Answered: 9 Skipped: 9

#	RESPONSES	DATE
1	The facilitator spent a bit too much time at the front end and slides on the obvious and then had less time to spend where there was reduced awareness. Given the field we are in, perhaps our basic starting point is further advanced from others trained and therefore needed to be factored in to the conversation	9/26/2021 5:05 PM
2	Thank you for an introductory training session which I am grateful for. I think that there is often a sense that as professional psychotherapists we "should know" this stuff. This mindset typically results in ignorance and being reticent to admit to this and/or overstepping and offending resulting in patterns of micro aggressions at best and macro aggressions at worst! Very humbled to learn and looking forward to further training.	9/26/2021 9:05 AM
3	I look forward to gathering some resources to help me in my work as a Registered Psychotherapist so that I can help meet the needs of racialized people who have been oppressed through colonization and racism in Canada. I want to do better as a citizen of Canada and stop the racial trauma that is impacting so many families in Canada.	9/22/2021 10:13 PM
4	Well done - should lead well into next level.	9/22/2021 3:23 PM
5	Nothing	9/22/2021 8:08 AM
6	No	9/21/2021 6:35 PM
7	just an AMAZING presentation. Engaging, and interesting. thank you!	9/21/2021 4:48 PM
8	None.	9/21/2021 3:37 PM
9	N/A	9/21/2021 2:26 PM



College of Registered Psychotherapists of Ontario

Annual Council Effectiveness Evaluation Report



June 2021



Summary

In May 2021, 79% of the CRPO Council responded to the Council Effectiveness Survey.

Ratings show strong support for the CRPO Council with effectiveness at 95%, governance at 96% and performance at 99%.

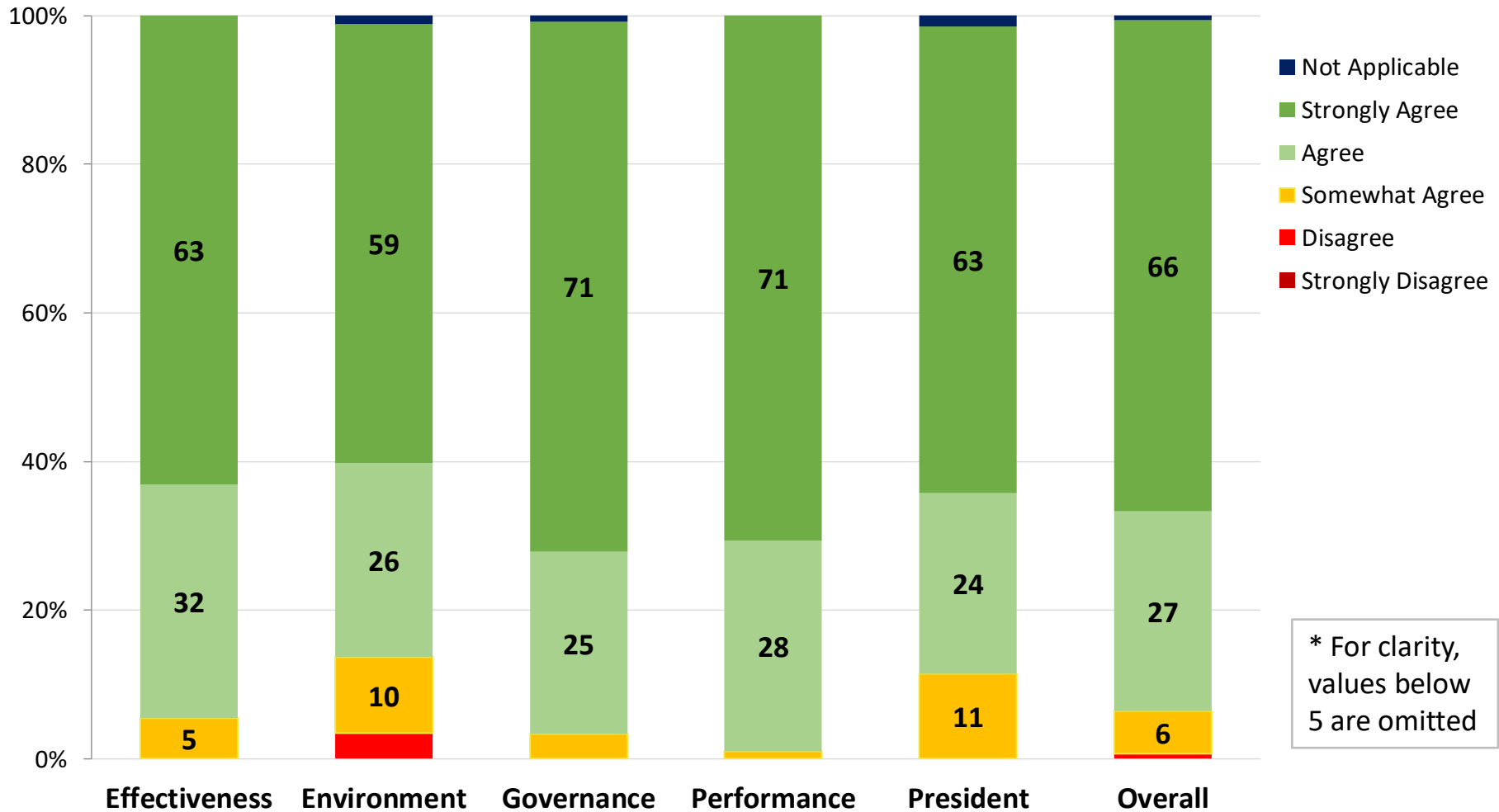
Council members indicated that improvement can be made to the council environment with 18% indicating that all council members should participate in council decisions and 36% indicating that effort should be made to ensure all council meetings are interesting and have an element of fun.

Comments made by council members show a strong internal reputation and positive atmosphere.

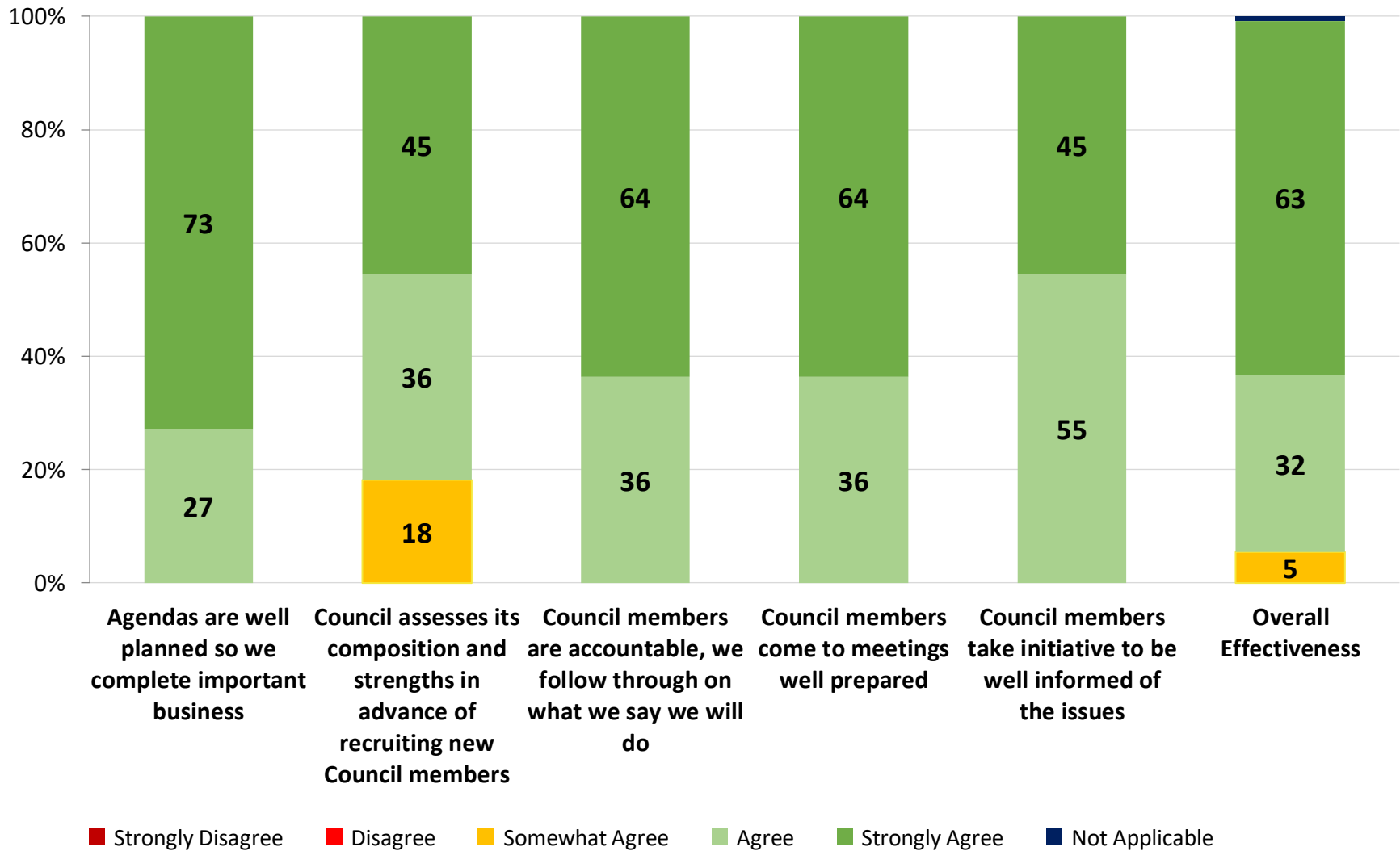
Invites sent	Responses Received
14	11



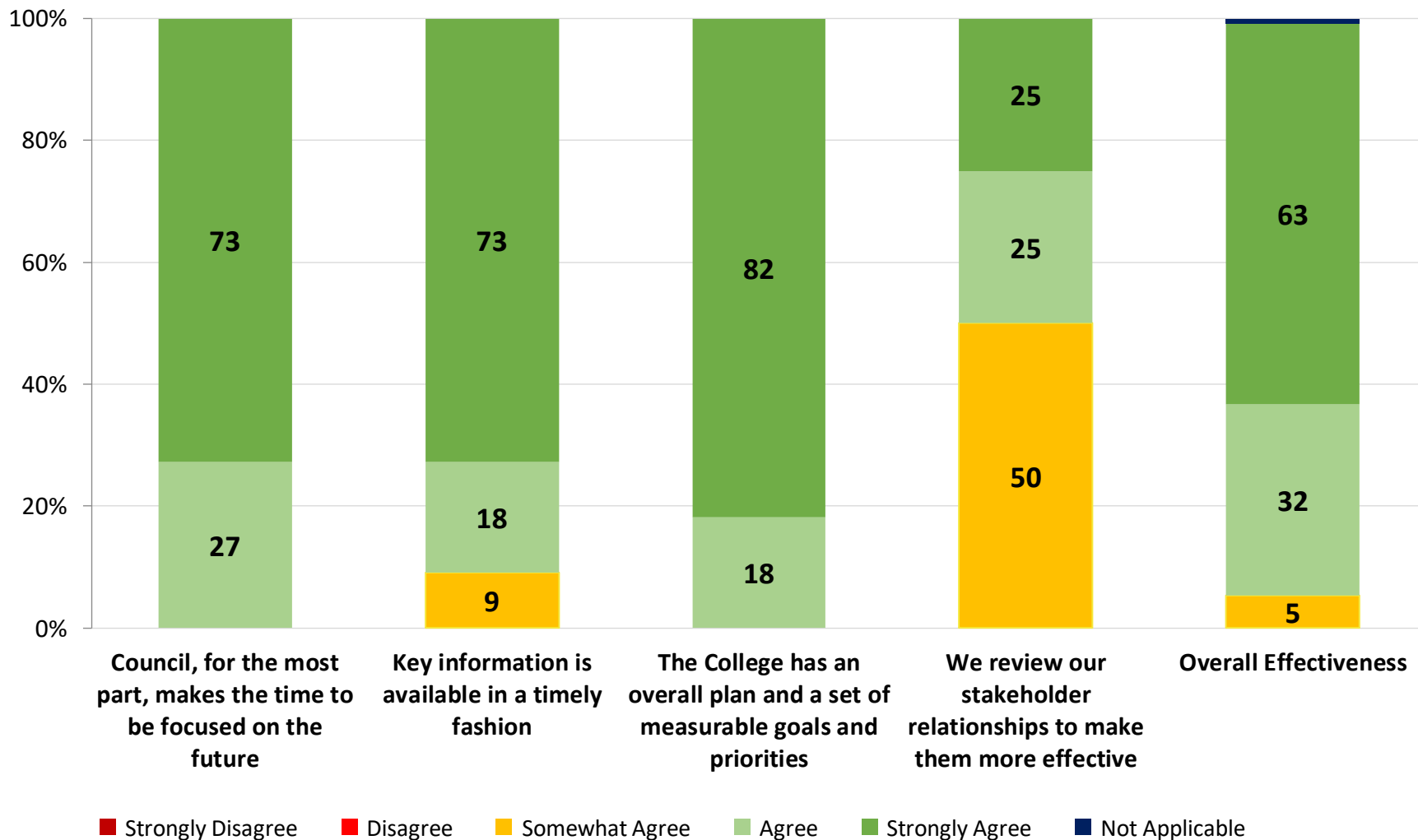
Overall Category Ratings



Effectiveness



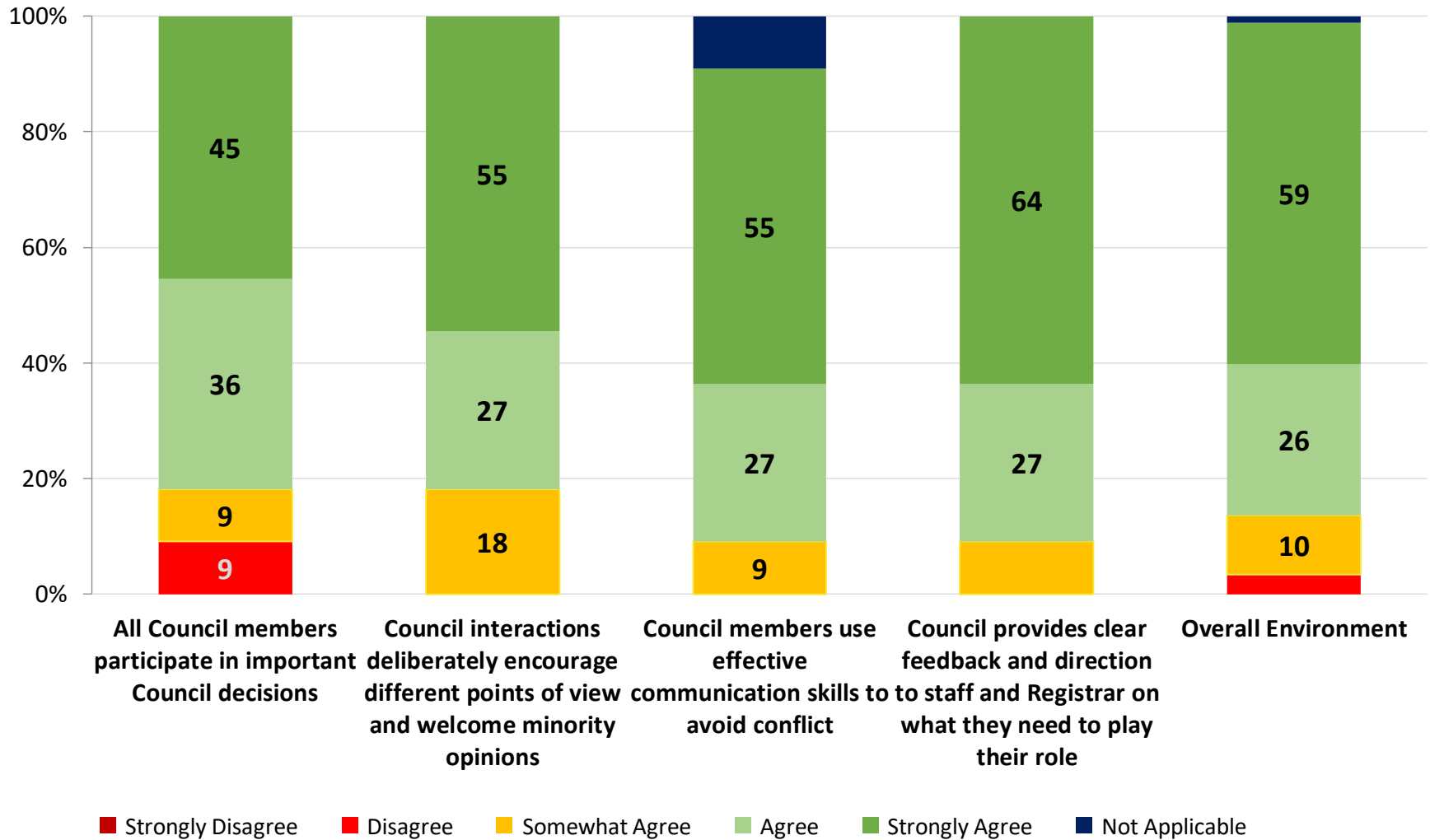
Effectiveness – continued



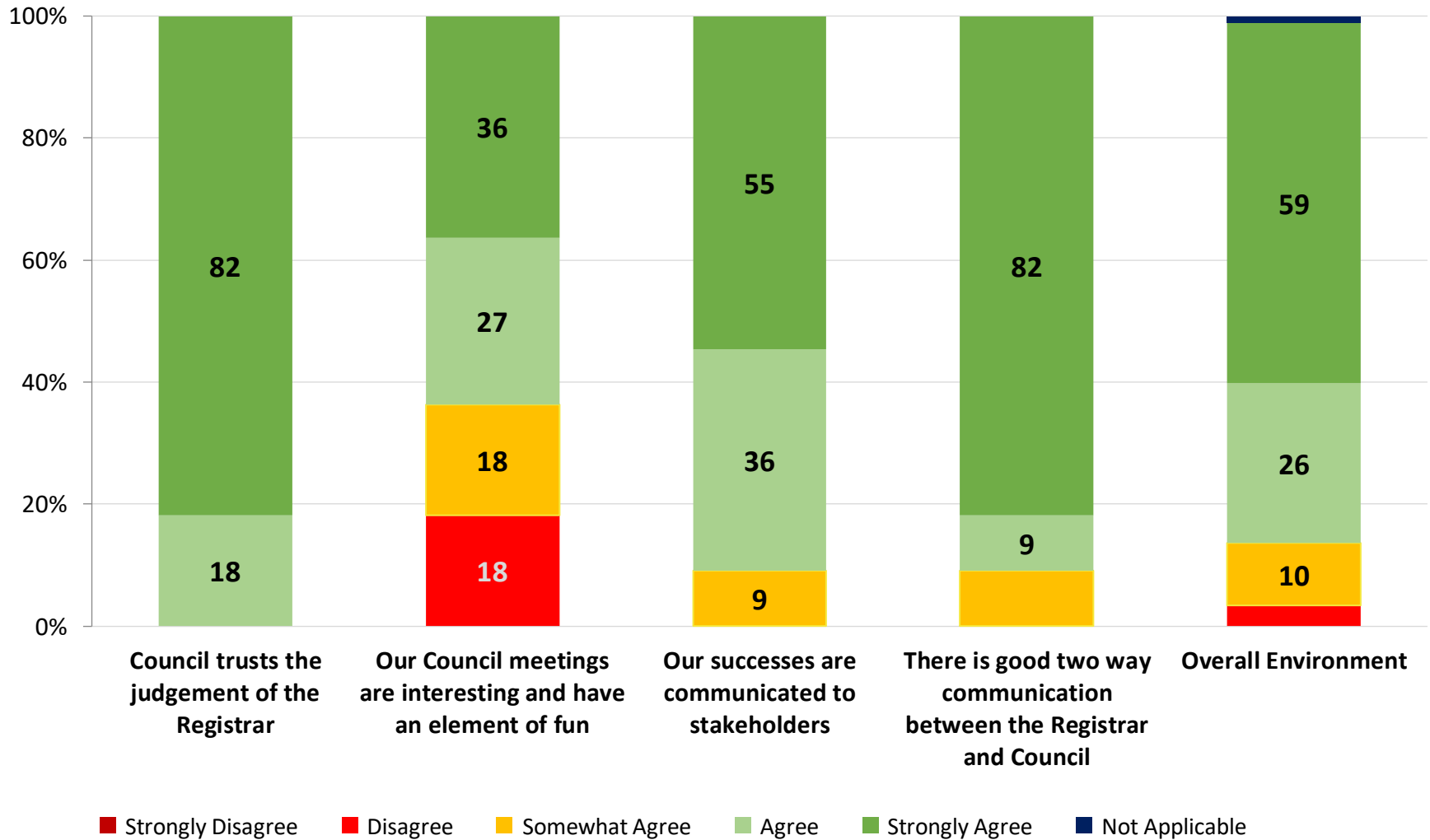
The current Council is made up of very committed, responsible and fairly knowledgeable members.

Council members are elected or appointed by the PAS. We don't solely "recruit"

I find that most council members consistently participate; while a few hold back. I had some concern about one member, as I also chair a panel that she is on and was concerned about her not being prepared. (have addressed this issue)



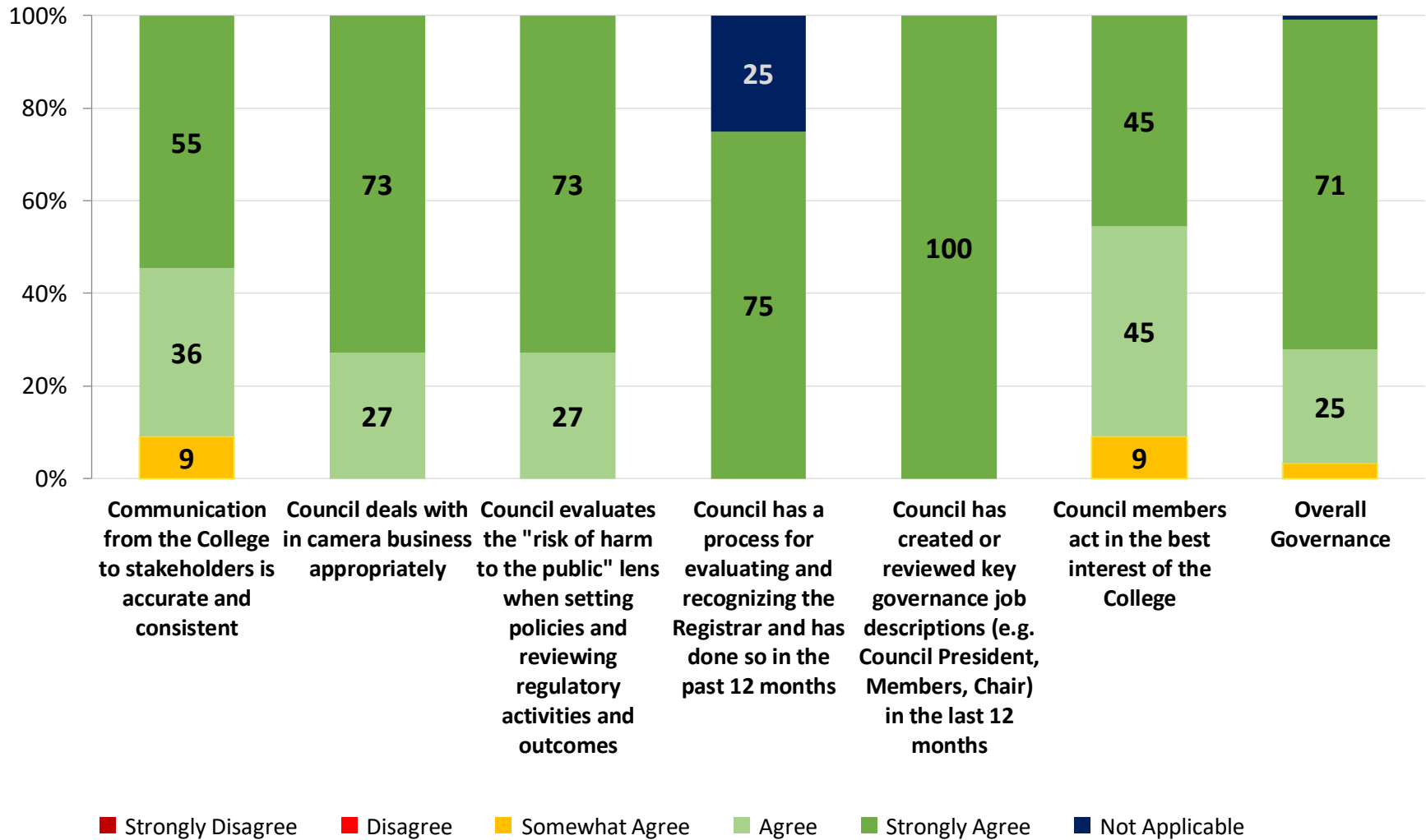
Environment – continued



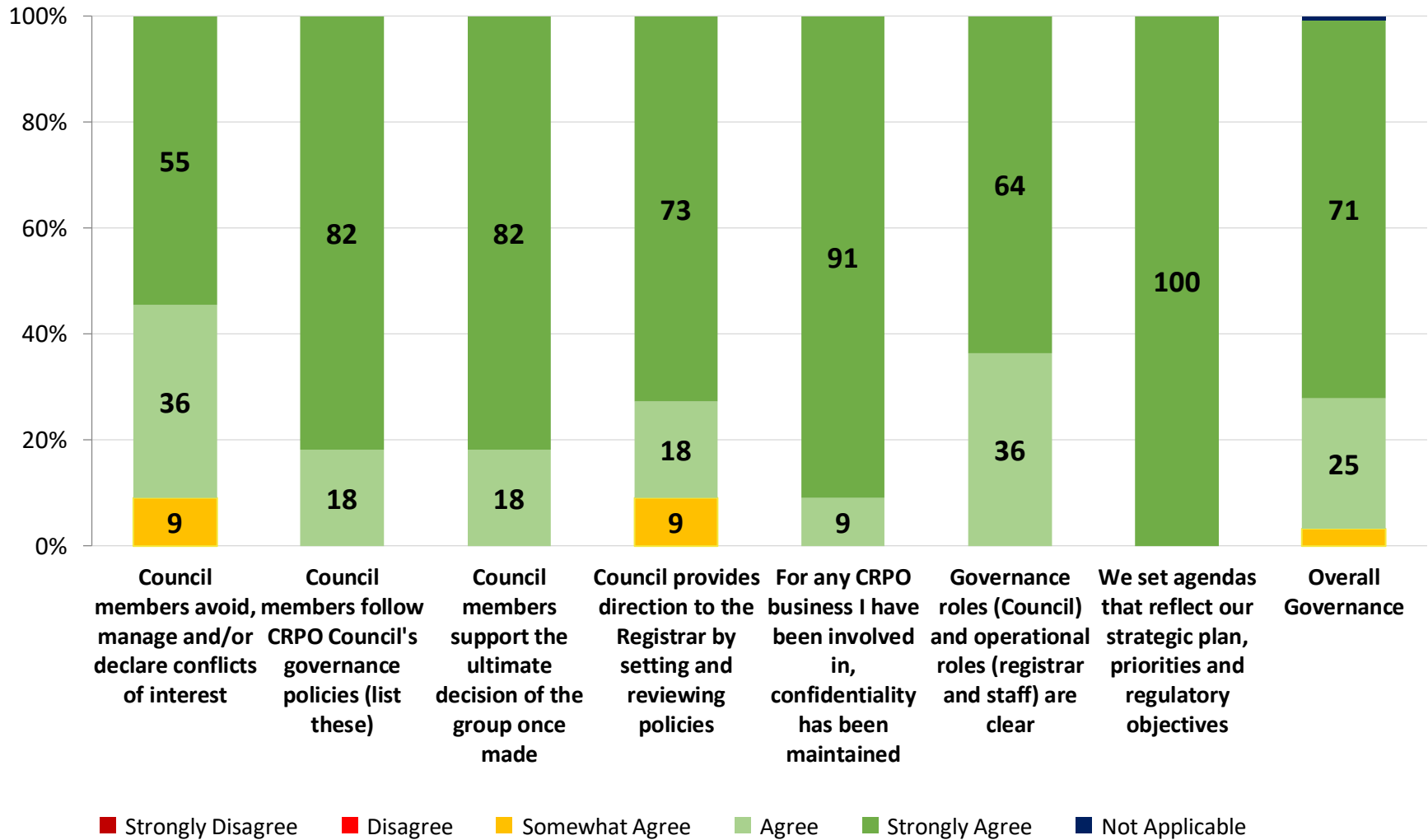
Council meetings tend to be formal compared to committee meetings as they are open to the public. Not so much fun!

The reason I said n/a for the 1st question is that conflict tends not to arise simply because there is a lot of respect for differences of opinion and there is lots of room for fulsome discussion and disagreement.

Governance



Governance – continued

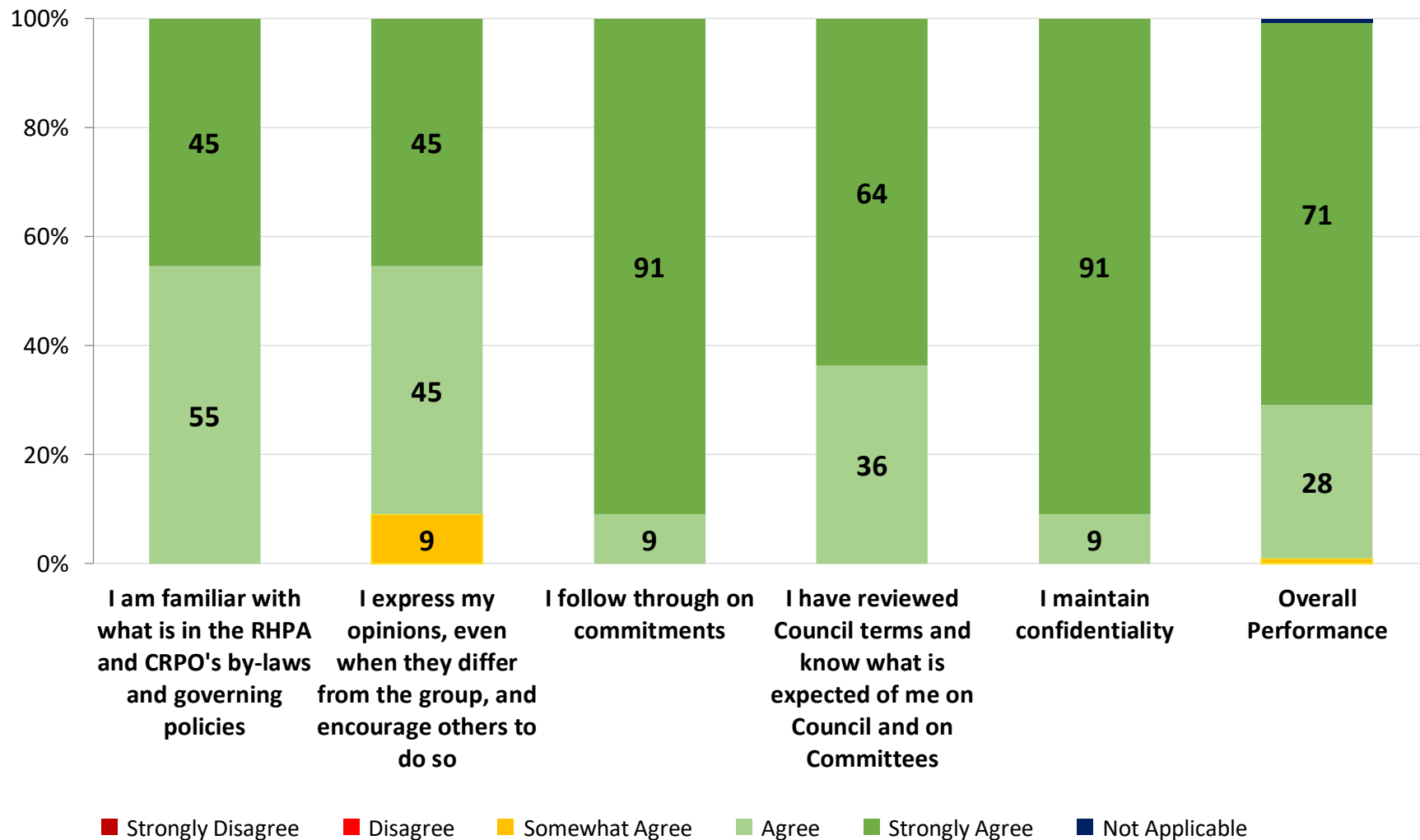


The Registrar resigned her position before this year's evaluation was due.

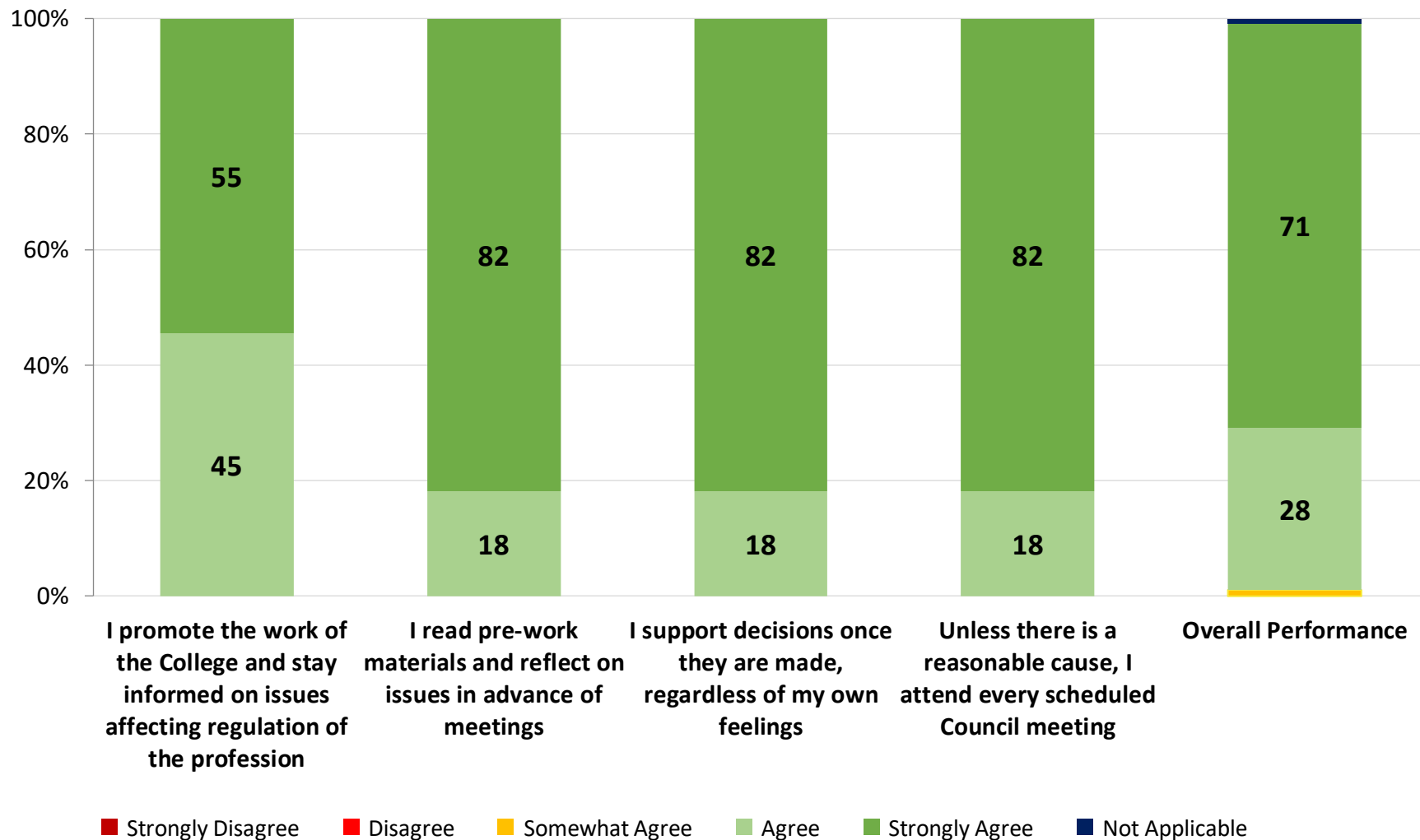
Staff have done an excellent job to educate Council members on Conflict of Interest, but it is remarkable that issues still arise where one or more Council members may not see when they have a perceived or actual conflict of interest. This is an area of on-going education, possibly using more vignettes.

The governance and operational roles are always getting clearer in my mind as a progress in the role of sitting on Council.

Performance



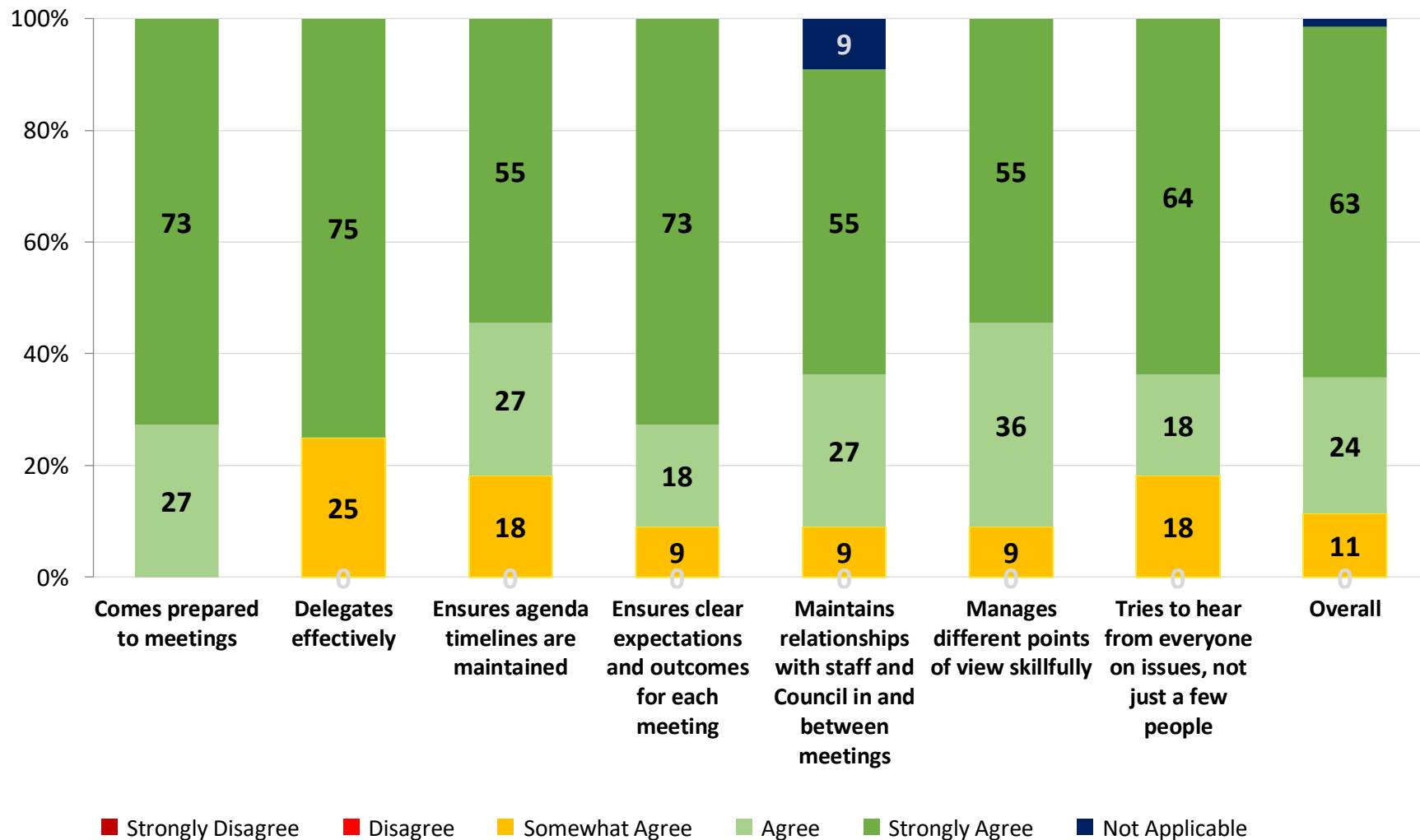
Performance – continued



I may be remiss in doing outside research vis-a-vis regulation of the profession outside of the information that is given us by CRPO in prep for Council meetings. I do read the background information offered; but don't tend to "google search" other issues that may affect the regulation of our profession.

I would like to express my appreciation for Mr. Pioro, for being open to explore a suggestion that I had provided about supervision and regulation.

President



Meetings should end at the scheduled time.

Shelley is great in the role.

I do not know if the President maintains relationships with staff and Council in between meetings. It is applicable but cannot really be answered if I do not know.