



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

Questions and Answers Regarding the Controlled Act Related to Psychotherapy

(Revised May 13, 2019)

Introduction

The College has received many questions from members of the College and the public regarding the Controlled Act related to Psychotherapy since it was proclaimed on December 30, 2017.

Members of the College of Psychologists are permitted to perform the Controlled Act related to Psychotherapy, so members need not be concerned whether psychotherapy they provide falls within the definition of the Controlled Act. As always, members are responsible to ensure they are competent to provide any psychological service they offer. When psychotherapy services fall within the Controlled Act becomes much more important when considering supervising someone in the performance of the Controlled Act.

The Practical Applications to the *Standards of Professional Conduct, 2017* may address some member inquiries. (www.cpo.on.ca/Standards_of_Professional_Conduct.aspx).

Further information, including this document, is available in the *Questions and Answers* accompanying the *Standards*: (www.cpo.on.ca/Standards_of_Professional_Conduct_2017.aspx).

The following information is intended to address the most frequently asked questions the College has received. If there are other questions, you please email them to practiceadvice@cpo.on.ca.

Definitions

The **Controlled Act** related to Psychotherapy is defined in section 27(2) of the [Regulated Health Professions Act, 1991 \(RHPA\)](#) as:

14. Treating, by means of psychotherapy technique, delivered through a therapeutic relationship, an individual's serious disorder of thought, cognition, mood, emotional regulation, perception or memory that may seriously impair the individual's judgement, insight, behaviour, communication or social functioning.

The legislation does not define the terms used in this definition particularly “**psychotherapy**” or what is meant by “**serious**” or “**seriously**”. Within the [Psychotherapy Act, 2007](#) however, the ‘practice of psychotherapy’ is defined as:

Scope of Practice

3. 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.

It is left to the treatment provider to apply his/her own education, skill and training to determine what is meant by “**serious**” or “**seriously**” with respect to what is a “serious disorder . . . that may seriously

impair". As noted above, this need not be of concern to members personally offering psychotherapeutic services as members of the College are authorized to perform this Controlled Act. It is important however, when one is considering providing supervision. In the absence of any available jurisprudence defining these terms, especially as related to a "serious disorder . . . that may seriously impair", members of the College should exercise their professional judgment in deciding whether the services which they contemplate supervising constitute the Controlled Act.

The definition of whether an activity constitutes the Controlled Act requires consideration of the level of difficulty and potential impairment experienced by the client and is not dependent on a specific diagnosis or therapeutic modality.

Members who are not comfortable exercising their own professional judgment in deciding whether a service falls within the "serious disorder . . . that may seriously impair" definition of the Controlled Act should consult with another member; another regulated colleague authorized to perform this Controlled Act and/or seek legal advice.

Questions and Answers

1. Is the provision of all "psychotherapy" now controlled by the new legislation?

No. Only psychotherapy that meets the five components of the definition falls within the Controlled Act. That is,

- 1. Treating,*
- 2. by means of psychotherapy technique,*
- 3. delivered through a therapeutic relationship,*
- 4. an individual's serious disorder of thought, cognition, mood, emotional regulation, perception or memory*
- 5. that may seriously impair the individual's judgement, insight, behaviour, communication or social functioning.*

In particular, members should consider if the psychotherapy is being delivered to a client with a "serious disorder . . . that may seriously impair" their functioning

2. In general, under what circumstances may I supervise the performance of the Controlled Act?

*Most questions raised are related to supervision by College members of others who perform, or wish to perform, the Controlled Act. As with any of the Controlled Acts, the RHPA specifically permits a person who is not yet authorized to perform the Controlled Act independently to do so under supervision but only if she/he is fulfilling the requirements to become a member of a health profession. It further requires that the Controlled Act be within the scope of practice of the profession, and that it is done under the supervision or direction of a member of **the** profession [emphasis added].*

It is important to note that College members may continue to supervise individuals they believe have the competence to provide psychotherapeutic services when those services fall outside of the Controlled Act.

3. With regards to performing the Controlled Act of psychotherapy, may I supervise:

- a) Graduate psychology students in practica or internship placements or individuals in the process of obtaining their four years of supervised experience necessary to apply to become a psychological associate?**

Yes. As noted in 2. Above, the legislation permits one to supervise individuals who are fulfilling the requirements of our College. This includes supervised practice members, students in practica or internships as well as those gaining their required post-masters experience.

b) Autonomous practice members of the College who may require supervision to expand their authorized areas of practice or their authorized population groups or who require supervision pursuant to a decision of the Inquiries, Complaints and Reports Committee (ICRC) or Discipline Committee?

Yes. These individuals, as members of the College of Psychologists are authorized to perform the Controlled Act, as such, they can do so independently or under supervision of another member to meet College requirements to practice in specific areas or with specific populations or fulfill a condition required by the ICRC or Discipline Committee.

c) Autonomous practice members of the College who may wish to increase their psychotherapy skills within their authorized areas of practice or their authorized population groups?

As with other situations when members wish to increase their skills within their authorized areas or with their authorized populations, members generally become involved in a mentorship, consultation or training relationship, rather than a formal supervisory one. Since they are already authorized in the area or with the population, the College does not require supervision when a member is learning new techniques or increasing the scope of their activities within their authorized areas. If there is a reason that non-supervisory supports would be insufficient, and supervision is necessary however, a member of the College may enter into a supervisory relationship as outlined Principle 4 of the Standards.

d) Individuals who are in the process of becoming a member of the College of Registered Psychotherapists of Ontario (CRPO) or another College whose members are authorized to perform the Controlled Act?

On December 21, 2017, the Minister of Health and Long-Term Care announced that, "Individuals who provide these services [the controlled act] will have a two-year transition period, beginning December 31, 2017, to register with a regulatory college." Therefore, supervision of individuals in the process of becoming a member of the CRPO or another College whose members are authorized to perform the Controlled Act is permitted as follows:

Transition Period to December 31, 2019

The transition period appears to permit individuals to perform the controlled act whether or not they are under supervision. In keeping with the apparent intention of the transition period, that is to provide an opportunity for individuals to register with a relevant regulatory College; the College is of the view that, because unregulated individuals are permitted to perform the Controlled Act until the end of the transition period it would be appropriate to permit members to supervise individuals who are preparing to become a member of the CRPO or another College whose members are authorized to perform the Controlled Act, during the transition period.

Post Transition Period

The legislation only permits one to supervise individuals who are fulfilling the requirements of their own College, in our case, the College of Psychologists. After December 31, 2019 therefore, one cannot provide supervision, as defined by the College, to individuals who are fulfilling the requirements to become members of another College.

There is no restriction however, regarding College members offering training, support, consultation and mentorship to other practitioners. While the CRPO and other Colleges may use the term “supervision” in their requirements for candidates, their use of the term may connote a less formal arrangement than that outlined in Principle 4 of the Standards. Individuals seeking registration with the CRPO or another College should inquire of their College if a mentorship, training or consultation relationship, rather than a formal supervisory one as defined by our College, may satisfy the requirement.

e) Members of another regulated health profession who themselves are authorized to perform the controlled act autonomously?

Yes. If these individuals are authorized by their own College to perform the controlled act, they can do so independently or under the supervision of a member of the College of Psychologists. As with members of the College of Psychologists who are authorized to perform the Controlled Act [as per 3.c) above], in most circumstances it may be appropriate to establish a non-supervisory relationship that would afford them training, support, consultation and mentorship. If, however, there is a reason that non-supervisory supports would be insufficient, and supervision is necessary, a member of the College may enter into a supervisory relationship as outlined Principle 4 of the Standards.

4. Are there any circumstances when a member may supervise others in providing services, including performance of the Controlled Act, solely to access third-party payment that is only available if the services are supervised by a Psychologist or Psychological Associate?

Supervision of the controlled act of psychotherapy or any other psychological service may not be undertaken solely to facilitate third-party payment [Standards of Professional Conduct 4.1.1 (6)]. Supervision may only be undertaken when there is a need for a member of our College to provide the direction and accountability necessary to ensure quality, effectiveness and safety.

5. May I supervise a Registered Psychotherapist or Social Worker in services which fall outside of the definition of the Controlled Act?

Yes. You are permitted to supervise activities that fall outside of the definition of the Controlled Act by a Registered Psychotherapist or Social Worker or anyone else that you believe has the education, training and experience to provide those services under your supervision.

6. Can exceptions to the restrictions on performance or supervision of the Controlled Act be made for clients who require services in remote communities or who would be affected because a therapist is no longer eligible for supervision?

The legislation does not provide for any exceptions; therefore, it would be inappropriate for the College to recommend or condone any activity that is not permitted by legislation. In assuming responsibility for the supervision of a psychological service, the supervisor has taken on responsibility for the client’s care. Where a supervisee is no longer able to provide the supervised service, the supervisor may provide client care himself or herself, or help the individual to find another competent practitioner from whom they can receive services.