

# ANNUAL REPORT

20  
**16/17**

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**CRPO regulates Registered  
Psychotherapists in the public  
interest by governing its  
Members in accordance with  
the *Psychotherapy Act, 2007*.**

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## 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

## STAFF LIST

CRPO staff as of March 31, 2017 includes the following:

**Deborah Adams**

Registrar

**Nadia Afrin**

Executive Assistant

**Shanzeh Ameen**

Registration Assistant

**Owen Cattigan**

Registration Assistant

**Cindy Elkerton**

Practice Advisor

**Jo Anne Falkenburger**

Director, Operations  
& Human Resources

**Sarah Fraser**

Coordinator, Registration

**Shauna Grey**

Manager, Communications

**Tav Kanwar**

Registration Assistant

**Sean Knight**

Policy & Communications Analyst

**Lene Marttinen**

Manager, Quality Assurance

**Monica McPherson**

Manager, Registration

**Sarah Moore**

Registration Assistant

**Alison Muliyl**

Registration Assistant

**Mark Piore**

Director, Professional Conduct  
& Deputy Registrar

**Kelly Roberts**

Coordinator, Operations  
& Human Resources

**Jessica Shrum**

Quality Assurance/Registration  
Assistant

**Jenna Smith**

Case Coordinator & Investigator

**Naela Syed**

Registration Assistant

**Sacha Williams**

Registration Assistant

# TABLE OF CONTENTS

<b>MESSAGE FROM THE PRESIDENT</b>	<b>6</b>
-----------------------------------	----------

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<b>MESSAGE FROM THE REGISTRAR</b>	<b>8</b>
-----------------------------------	----------

---

<b>2016-17 COUNCIL YEAR IN REVIEW</b>	<b>9</b>
---------------------------------------	----------

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<b>CRPO DASHBOARD 2016-17</b>	<b>10</b>
-------------------------------	-----------

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## **COMMITTEE REPORTS**

Executive Committee	13
---------------------	----

Client Relations Committee	14
----------------------------	----

Discipline Committee	16
----------------------	----

Fitness to Practise Committee	17
-------------------------------	----

Inquiries, Complaints and Reports Committee	18
---	----

Quality Assurance Committee	20
-----------------------------	----

Registration Committee	22
------------------------	----

Indigenous Registration Task Group	23
------------------------------------	----

Examination Committee	23
-----------------------	----

Nominations and Elections Committee	23
-------------------------------------	----

---

<b>FINANCIAL STATEMENTS</b>	<b>24</b>
-----------------------------	-----------

## MESSAGE FROM THE PRESIDENT



In its second year following proclamation of the *Psychotherapy Act, 2007*, CRPO was well into serving its mandate of public protection. The public can be assured that the foundation, which was built on statutory regulation, provides accountability for safe, ethical and competent practice among CRPO Members.

Over more than 10 years, the path to the regulation of psychotherapy in Ontario caused much reflection, consideration and debate. It was a process that was enriched by the diversity of modalities within the field.

From among such seemingly great variation among practitioners, the foundational competencies were discerned in support of calling this collective a profession.

While acknowledging the mandatory nature of the regulatory framework, yet recalling the intention of those practitioners that had asked government for self-regulation, the call was made to those who identified that their work fell within the scope of practice of psychotherapy to apply for registration.

At this fiscal year-end, CRPO has over 4,000 Members with still more applicants to be considered under the grandparenting route to registration.

Great attention was given this year to ensuring the operational effectiveness of processes supporting Members, including the first registration renewal and, in the area of Quality Assurance, the transfer of Professional Development tools to a user-friendly, online environment as well as finalizing the Peer and Practice Review tools.

The Quality Assurance Program is intended to be a learning opportunity

for Registered Psychotherapists (RPs) in recognizing the benefit of on-going professional development and ensuring continued competency characterized by knowledge, skill and judgement in their clinical practice with psychotherapy clients.

The work of CRPO's first elected Council continued in our second year as many members—those elected as well as appointed in late 2015—increased their familiarity with CRPO's regulations and policies. Council held four meetings and sought input through three stakeholder consultations.

Council members serve important and valuable roles in their respective appointments to CRPO committees. Since policy development and review typically occurs at the committee level, the policy work of committees is increasingly informed by understanding the need for clarification in existing policy, in addition to addressing new policy issues as they arise.

Considerable effort was evident in the work of the panels of statutory committees. Referrals are made by the Registrar to panels of the respective committees when concerns are identified. Panels review, deliberate and provide clear and concise written decisions based on our regulatory framework. The commitment of time, attention and thoughtful consideration by members of panels has been truly

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***At this fiscal year-end, CRPO has over 4,000 Members with still more applicants to be considered under the grandparenting route to registration.***

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## MESSAGE FROM THE PRESIDENT (CONT'D)

noteworthy. The support of staff in this work has been appreciated and commendable.

The importance of CRPO's role in public protection is particularly evident in the policy and panel work of the Inquiries, Complaints and Reports Committee (ICRC) and hearings held by the Discipline Committee. As the public gains greater awareness of CRPO as a regulator, we anticipate that the processes established now will provide a solid foundation for the work ahead by these committees. The Discipline Committee held its first three hearings this year and, as would be expected of a new regulator, ICRC panels saw increased activity.

In addition to CRPO's accountability to the public through the regulation of its Members, CRPO both participates and is accountable in the broader regulatory context: CRPO is one of 26 health regulatory bodies in the province of Ontario subject to the *Regulated Health Professions Act, 1991* and accountable to the Minister of Health and Long-Term Care; CRPO is a member and participates in the work of the Federation of Health Regulatory Colleges of Ontario; and CRPO is accountable to the Fairness Commissioner of Ontario.

CRPO has had the benefit of being a relatively new regulatory body and its foundations are built on the principles of transparency and fairness, evident in its Mission and Values and certainly in policy and processes. Council abides by these principles by ensuring information is available to the public and our stakeholders. This

year saw the beginning of our regular Communiqué to Members and stakeholders and will be followed by additional communications initiatives in the coming year.

I would like to acknowledge the contribution of two individuals with long-standing commitment to CRPO's work: Carol Cowan-Levine, RP and Kevin VanDerZwet Stafford, RP.

Carol has served on the Executive Committee since the inception of the Transitional Council in 2009 and has also held the position of Council President for the past five years. The hallmark of Carol's contribution has been her skilled governance, having led with thought, feeling and wisdom, and always with public protection as the primary goal. Carol's dedication and commitment have been so very much appreciated, as is her continued service on the Executive Committee.

Kevin has also been a member of the Executive Committee since its inception and I wanted to recognize his dedicated seven years of service. Kevin continues his contribution to Council on a variety of committees, working tirelessly and providing key insights to keep us moving forward.

I would like to welcome our new Registrar, Deborah Adams, who started in January. Deborah came to CRPO with a breadth of experience in both the regulatory and health care administration fields and we have readily had the benefit of her knowledge, skills and leadership.

From a one-time recommendation over 10 years ago that psychotherapy

should be regulated, to our present, a professional identity has emerged through the Registered Psychotherapist (RP) designation. The newly regulated profession will continue to provide opportunities to educate the public and other health professionals about the competencies and standards of practice within the profession of psychotherapy that are shared by a diverse range of psychotherapy modalities.

**Andrew Benedetto, RP**  
President



CRPO is accountable for regulating psychotherapists in the public interest by making sure that our Members practise in a way that is safe, ethical and competent.

The College's Council is directed by this responsibility in all of the work it does, including:

- ensuring anyone being granted registration meets the educational standards before they can practise or use the RP title;
- setting and enforcing standards and guidelines for the practise and conduct of Members;
- upholding the quality of care by developing programs to help Members continually improve their skills and knowledge; and
- responding to complaints and reports about the care provided by Members.

One of the foundational elements of this regulatory mandate is accountability. CRPO is accountable to the public for excellence in the delivery of care by our Members. Through the *Regulated Health Professions Act, 1991* we are accountable to the Ministry of Health and Long-Term Care to act on our legal authority to protect the public, as well as for the quality of the administration and management, including the financial management, of the organization. We are accountable to the Office of the Fairness Commissioner to ensure that our practices related to registration are transparent, objective, impartial and fair. And, we are accountable to our Members to ensure that we are using registration and other fees in a way that is responsible and effective.

In order to ensure that this accountability is meaningful, it is essential that we scrutinize our work in a way that allows problems to become opportunities to find solutions that will support the growth and development of Registered Psychotherapists and their practice. This includes, but is not limited to, initiatives such as:

- regularly reviewing Council needs related to their roles and effective governance, and providing ongoing education and orientation to ensure they are knowledgeable;
- evaluating the trends that we see being reviewed by the Inquiries, Complaints and Reports Committee so that we can be proactive in the issues that we tackle through our Quality Assurance Program;
- seeking out best practices to be employed in our Client Relations Program to prevent and address sexual abuse of clients by Members;
- considering matters that go to the Discipline Committee in determining what education and communication with Members needs to be prioritized; and
- discerning how to improve our processes from registration and complaints cases that result in appeals to the Health Professions Appeal and Review Board.

For truly meaningful accountability, it is also necessary that we share what we learn in the evaluation of our work, our success and – probably

most importantly – any areas where we fail to achieve our goals. While we communicate regularly (and plan to do even more connecting with stakeholders over the coming year) this Annual Report is CRPO's opportunity to provide an overview of the year's learning and what we have done or plan to do with the lessons we have learned and the knowledge we have acquired.

With that direction in mind, I am pleased to submit CRPO's Annual Report for 2016-17. As you will read in the Committee Reports, this has been a year of considerable accomplishments for the College of Registered Psychotherapists of Ontario. Much of the labour over this second year since proclamation has involved further developing infrastructure and capacity, while addressing the increasing volume that comes with a growing Membership. The diligence, thoughtfulness and work ethic of everyone contributing to the growth and development of psychotherapy as a regulated profession is admirable. I am thrilled to be working with such a committed and knowledgeable Council and staff team and look forward to the year ahead.

**Deborah Adams**  
Registrar



### 2016

#### Q1 (April – June)

- Quality Assurance Committee appoints nine qualified candidates to the roster of Peer Assessors.
- Council approves a policy authorizing disclosure of the names of unauthorized practitioners when legal proceedings have been initiated.
- The Peer and Practice Review process of the Quality Assurance Program is launched.

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#### Q2 (July – September)

- Council approves *The Controlled Act of Psychotherapy: A Clarification*.
- CRPO holds its first discipline hearing.

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#### Q3 (October – December)

- Council hires Deborah Adams as Registrar.
- Council approves a new Professional Practice Standard – 3.7: Affirming Sexual Orientation and Gender Identity.
- A 10th education and training program is recognized.

### 2017

#### Q4 (January – March)

- Council approves Phase Two of transparency initiatives proposed by the Advisory Group for Regulatory Excellence.
- Council approves the Zero Tolerance of Sexual Abuse by Members policy.
- Consultation regarding *The Controlled Act of Psychotherapy: A Clarification* is launched.
- Council elects Andrew Benedetto as President.
- The first Practice Advisor is hired.
- The QA Portal, an online resource that helps Members meet their QA requirements, is launched.
- Grandparenting registration route closes on March 31, 2017.
- The 2017 QA submission period, where Members are required to submit their Professional Development tools, closes on March 31, 2017.

REGISTRATION



APPLICATIONS RECEIVED

3,225

Grandparenting

224

Regular Route



APPLICATIONS REFERRED

90

To a Panel of the Registration Committee



REGISTRATION EXAM OCTOBER 2016

49

Passed

11

Failed

82%

Pass Rate  
(Compared to 72% in March 2016)



MEMBERSHIP

3,765

RP

167

Qualifying

72

Inactive

4,004

Total as at March 31, 2017

25 % >

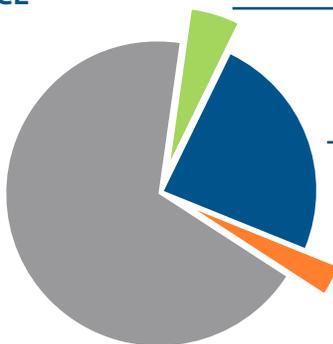
From 2015-16 Fiscal Year

QUALITY ASSURANCE

PROFESSIONAL DEVELOPMENT

1,365

Out of 1,450 Met Requirements Before Deadline



58

Participated After Receiving Past-Due Notice

24

Not Required to Participate

3

Eligible for Peer and Practice Review

85

Did Not Meet Deadline



PEER AND PRACTICE REVIEW

45

Members Completed Step 1

37

Completed and No Further Review Required

8

Moved on to Step 2

4

Cases Reviewed to Date

4

In Queue

1

Decision Issued

3

Pending

COMPLAINTS AND CONCERNS



PANEL DECISIONS  
OUTCOME

2

Refer to  
Discipline

2

Enter Into  
Undertaking

9

Specified Continuing  
Education or Remediation  
Program (SCERP)

8

In-Person  
Caution

6

Issue Written  
Advice

14

Take No  
Action

2

Registration Revoked per  
False Application Information

\*NOTE: There were no incapacity proceedings during the 2016-17 fiscal year.

PRACTICE ADVISORY (JANUARY 1 – MARCH 31, 2017)



NUMBER  
OF INQUIRIES



49

Calls



80

E-mails



TOP 5  
ISSUES

1. Various Aspects of Setting Up a Private Practice/Business
2. Scope of Practice
3. Privacy/Record-Keeping/Consent
4. Various Concerns About Technology in Private Practice
5. Difficult Clinical Situations/Duty to Report

\*NOTE: The Practice Advisory service was initiated as of January 2017.

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**2016–17**

**Committee Reports**

The College of Registered Psychotherapists of Ontario (CRPO) has several statutory and non-statutory committees whose work allows CRPO to fulfill its regulatory mandate.

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## Executive Committee

The Executive Committee is responsible for providing strategic direction, financial oversight and engaging in policy development and research. In addition, the Executive Committee makes recommendations on policy issues to Council. In certain circumstances, it may act on behalf of Council and will respond to issues that arise between Council meetings as required.



Andrew Benedetto, RP  
President

## Policy/Committee Work

During the 2016-17 fiscal year, the Executive Committee met in-person on six occasions and held seven meetings via teleconference. The Committee worked on various initiatives during this time including:

- Selection of a new Registrar.
- Review of transparency initiatives leading to recommendations for approval by Council, including amendments to College By-laws requiring additional information about Members be posted on the Public Register, as well as procedures regarding Council meetings and information made available to observers and other stakeholders.
- Authorizing staff to execute a lease for a new office space.
- Formalizing the Committee appointment process to establish an effective mechanism to support Council members in contributing effectively to the regulatory functions of the College.
- Development of *The Controlled Act of Psychotherapy: A Clarification* document, in collaboration with other regulatory bodies in Ontario whose members would have access to the controlled act of psychotherapy. Following completion of the document, Executive Committee recommended its approval by Council and subsequently assisted with plans to seek stakeholder feedback concerning clarity provided by the document.

## Committee Members:

Andrew Benedetto, RP  
(President from January 2017)

Malcolm MacFarlane, RP  
(Vice-President from January 2017)

Carol Cowan-Levine, RP  
(President until January 2017)

Mary Kardos Burton

Shikha Kasal  
(until January 2017)

Sheldon Kawarsky  
(from January 2017)

Kevin VanDerZwet Stafford, RP  
(until January 2017)

## Challenges and Opportunities

- Council and staff plan to implement changes from **Bill 87, the Protecting Patients Act, 2017**, once it is passed into law. The Committee looks forward to collaborating with Members and stakeholders in working toward eliminating sexual abuse of clients by Members, while continuing to work to ensure the safety and well-being of all clients in the care of Registered Psychotherapists.
- Executive Committee continues to support proclamation of the **controlled act of psychotherapy**. The Committee will strategize communications and development of needed tools and processes once proclamation is announced.
- The Committee is assessing the **orientation** of Council and committee members, including ongoing professional development.

## Client Relations Committee

The Client Relations Committee (CRC) is charged with the development, ongoing maintenance and evaluation of the Client Relations Program.

The requirements of the program are set out in Section 84 of the *Regulated Health Professions Act, 1991* (RHPA) and include the following measures for preventing and dealing with the sexual abuse of clients by Members:

- a) educational requirements for members;
- b) guidelines for the conduct of members with their clients;
- c) training for the College's staff; and
- d) the provision of information to the public.



Carol Cowan-Levine, RP  
Committee Chair

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## Policy/Committee Work

During the 2016-17 fiscal year, the CRC had one teleconference and one in-person meeting. Work that took place during the meetings included:

- Adoption of the Committee's Terms of Reference.
- Thorough review of existing CRPO resources related to sexual abuse.
- Collection and processing of feedback from recent surveys regarding the complaints process, including those that included allegations of sexual abuse.
- Updates and adjusted wording of the Jurisprudence (JRP) Manual and CRPO website to better reflect CRPO's zero tolerance policy of the sexual abuse of clients by Members.
- Staff training regarding customer relations sensitivity training, empathetic listening and de-escalation to assist in responding appropriately when in contact with complainants.
- Content addressing issues of sexual abuse and an update on the CRC's establishment in the November Communiqué.
- Research and data compilation from other regulatory bodies regarding Member guidelines and public information dissemination methods to inform CRC work.
- Compilation of complaints and investigations data to inform committee work going forward.
- Zero Tolerance of Sexual Abuse by Members policy presented and passed by Council in January 2017.

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## Committee Members:

Carol Cowan-Levine, RP  
(Chair)

Shelley Briscoe-Dimock, RP

Mary Kardos Burton

Barbara Locke Billingsley

Susan (Sue) Lymburner, RP

Steven Stijacic

### Client Relations Committee (cont'd)

#### Challenges and Opportunities

In December 2015 the Minister's Task Force on the Prevention of Sexual Abuse of Patients, commissioned by the Minister of Health and Long-Term Care, presented their report *To Zero: Independent Report of the Minister's Task Force on the Prevention of Sexual Abuse of Patients and the Regulated Health Professions Act, 1991*.

This report was intended to provide advice and recommendations on how to strengthen the legislation in order to reinforce the province's policy of zero tolerance of the sexual abuse of patients by regulated health professionals.

The CRC received this report and reviewed the recommendations, particularly those related to:

- the current definition of "sexual abuse" contained in the legislation;
- support tools for client victims of sexual abuse;
- mandatory reporting requirements with respect to sexual abuse of clients by regulated health professionals;
- ways to further encourage and support clients who report incidents of sexual abuse to health regulatory colleges; and
- aspects of college discipline proceedings and other college processes that pertain to allegations of sexual abuse.

Bill 87, the *Protecting Patients Act, 2017*, contemplates significant changes to the RHPA. The intent of these changes is to:

- improve regulatory oversight and accountability;
- strengthen measures to protect patients/clients; and
- better support victims of sexual abuse by regulated health professionals.

The CRC work considered the anticipated sexual abuse amendments with the passage of Bill 87, specifically:

- changes to the administration of the funding for victims of sexual abuse by regulated health professionals;
- expansion of the criteria for mandatory revocation of the registration of a member;
- changes to the orders made by the Discipline Committee in findings of sexual abuse;
- changes to the definition of "patient" (client) for the purposes of sexual abuse provisions; and
- increasing fines for failing to make a mandatory report related to sexual abuse.

The Client Relations Committee and CRPO recognize the opportunities to take a leadership role in regulatory work to develop a Client Relations Program that encompasses breadth and depth, adopts the best practices to date and is committed to innovations and excellence.

## Discipline Committee

The Discipline Committee is responsible for holding discipline hearings in accordance with the *Regulated Health Professions Act, 1991*. The Committee also sets policies and procedures for the discipline process.

Matters arrive before the Discipline Committee as the result of a referral from the Inquiries, Complaints and Reports Committee, with specific allegations that a Member has engaged in professional misconduct.

If a panel makes a finding that a Member has committed misconduct, it can order one or more of the following penalties:

- direct the revocation of the Member's Certificate of Registration;
- direct the suspension of the Member's Certificate of Registration for a specified period of time;
- direct the imposition of specified terms, conditions and limitations on the Member's Certificate of Registration for a specified or indefinite period of time;
- require the Member to appear before the panel to be reprimanded;
- require the Member to pay a fine, up to \$35,000, to the Minister of Finance; and
- require the Member to pay all or part of the College's costs and expenses regarding the matter.

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### Policy/Committee Work

During the 2016-17 fiscal year, nine Committee members received training offered by the Federation of Health Regulatory Colleges of Ontario in order to prepare for participation on a panel. Independent legal counsel was also appointed to serve as the panel's legal advisor, independent of the College and the Member referred to the Committee.

The Committee did not hold any plenary (policy-making) meetings but conducted three hearings in September, January and March. All three hearings were completed by March 31, 2017. At the end of the fiscal year, there were no other outstanding matters awaiting a hearing date or that required scheduling.

When a hearing is concluded, the panel develops their Decision and Reasons. These documents are available through the Complaints and Concerns section of CRPO's website once they have been approved by panel members.



Shikha Kasal  
Committee Chair

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### Committee Members:

Shikha Kasal  
(Chair)

All Council members serve on the Discipline Committee.

Hearing panels are composed of three to five Committee members.

Heidi Ahonen, RP  
(Non-Council Committee Member)

## Fitness to Practise Committee

The Fitness to Practise Committee is responsible for holding hearings related to possible incapacity of Members in accordance with the *Regulated Health Professions Act, 1991*. The Committee also sets policies and procedures for the fitness to practise process.

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### Policy/Committee Work

During the 2016-17 fiscal year, the Fitness to Practise Committee did not hold any meetings and no matters were referred to the Committee that would require a hearing. Committee members will receive the necessary training if there is a need to conduct a hearing.



Barbara Locke Billingsley  
Committee Chair

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### Committee Members:

Barbara Locke Billingsley  
(Chair)

All Council members serve on the  
Fitness to Practise Committee.

Hearing panels are composed of at  
least three Committee members.

## Inquiries, Complaints and Reports Committee

The Inquiries, Complaints and Reports Committee (ICRC) screens and investigates complaints and other concerns about Members and determines the appropriate action to be taken. The Committee also makes recommendations regarding practice standards and guidelines for Members.

### Matters Initiated: 23

- Formal complaints: 15
- Registrar's investigations<sup>1</sup> : 8

### Decisions Released: 24

### Appeals Requested<sup>2</sup> : 3

### Outcomes:

- Refer to discipline: 2
- Enter into undertaking: 2
- SCERP<sup>3</sup> : 9
- In-person caution: 8
- Enter remedial agreement: 0
- Issue written advice: 6
- Take no action: 14
- Incapacity proceedings: 0

### Total outcomes<sup>4</sup>: 41

## Policy/Committee Work

The Committee held three plenary meetings and undertook various initiatives, including:

- **Transparency-related by-laws**
  - Recommending that Council make by-laws posting a notation on a Member's Public Register profile anytime an ICRC decision includes an in-person caution, Specified Continuing Education and Remediation Program (SCERP) or undertaking. Council approved the proposed by-laws in January and they took effect on April 1, 2017 (after the 2016-17 fiscal year closed).
- **New Professional Practice Standard**
  - Creating a Professional Practice Standard entitled *Affirming Sexual Orientation and Gender Identity*. Based on recent Ontario legislation, the standard responded to so-called 'conversion' or 'reparative' therapy. Council approved the standard in November 2016.
- **Confidentiality in team settings**
  - Discussing at length the College's expectations of Members working in team settings (e.g. hospitals, community agencies) and the confidentiality of client information in those settings. The College held a public consultation in the summer of 2016 and discussion around this issue is ongoing.



Kevin VanDerZwet Stafford, RP  
Committee Chair

### Committee Members:

Kevin VanDerZwet Stafford, RP  
(Chair)

Shelley Briscoe-Dimock, RP

Carol Cowan-Levine, RP

Kathleen (Kali) Hewitt-Blackie, RP  
(Non-Council Committee Member)

Mary Kardos Burton

Kenneth Lomp, RP  
(Non-Council Committee Member)

Susan (Sue) Lymburner, RP

Keith Marlowe, RP

Paula (Pat) Rayman, RP

Len Rudner

Steven Stijacic

<sup>1</sup> Formal investigation resulting from an information source other than a formal complaint.

<sup>2</sup> With the Health Professions Appeal and Review Board.

<sup>3</sup> Specified continuing education or remediation program.

<sup>4</sup> Each decision may contain more than one outcome.

### Inquiries, Complaints and Reports Committee (cont'd)

#### Policy/Committee Work (cont'd)

- **Reporting information on criminal acts**
    - Adopting a policy on reporting to police where a Member may have committed a criminal act. This policy was approved by Council in September 2016.
  - **Unauthorized practice**
    - Approving a policy/process, subsequently approved by Council, for responding to non-members using the title “psychotherapist” or holding themselves out as psychotherapists. Includes the publication of the names of non-members if the College initiates legal proceedings against them.
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#### Challenges and Opportunities

- The College has received several complaints or reports of sexual misconduct about Members alleged to have occurred **prior to establishment of the College** on April 1, 2015. This has posed unique challenges given the unclear jurisdiction of the ICRC and Discipline Committee over pre-College conduct. ICRC has taken several approaches, including considering referring matters to the Discipline Committee for a hearing, recommending that the Registrar revoke the Member’s Certificate of Registration for providing false or misleading information about their past conduct, or issuing an in-person caution and directing the Member to undergo remediation on ethics and boundaries.
- The ICRC hopes to improve **timelines for complaint resolution**. Based on the 2015-16 fiscal year, the mean time for processing a formal complaint was 239 days (median 251 days). However, with growing membership, ICRC workload may increase. In the interim, the ICRC will provide complainants and Members with average timelines so as to provide reasonable expectations at the outset.
- The ICRC continually reflects on how to make **remediation** meaningful and effective. For example, an in-person caution is intended as a serious yet supportive conversation with a Member subject to a complaint or report. The Committee has learned from experience how to approach these interactions with Members to allow for a more positive experience.
- The College is regularly presented with **complex policy questions**. In response, the ICRC hopes to develop useful and practical resources for Members that address the diverse array of questions Members face in their varied practice environments. Given this diversity, addressing these questions effectively typically requires a collaborative approach and so can be time consuming and resource-intensive and thus the College works to prioritize the issues it tackles as much as possible.

## Quality Assurance Committee

The Quality Assurance (QA) Committee is responsible for developing and maintaining the QA Program, including the policies, processes, tools and resources that are necessary to facilitate Member participation.

The QA Program is a central fixture in a Member’s ongoing relationship with CRPO. Building on the professional culture that existed prior to the regulation of psychotherapists in Ontario, the QA Program promotes continuing competence in the safe, ethical and effective practice of psychotherapy by helping Members to identify areas of knowledge, skill and judgment in which they excel, and areas which may benefit from enhancement.

A number of tools have been developed and Members are encouraged to adapt the QA tools to suit their practice needs and circumstances.

Examples of QA tools:

- Self-Assessment
- Learning Record
- Learning Plan
- QA Portal Practice Resources

### Professional Development Component (Reporting Period Jan. 1, 2017 – March 31, 2017)

- Members required to complete new Member requirements: Approximately 1,450
- Members required to complete ongoing requirements: 0
- Deferrals granted: 3
- Members who did not demonstrate adequate participation: 85
- Of the 85, Members not required to demonstrate participation in QA due to change in registration status (e.g. suspension of certificate for non-completion of renewal requirements, change from RP to Inactive): 24
- Members who demonstrated adequate participation after receiving past-due notice: 58
- Members eligible to be selected for Peer and Practice Review due to inadequate participation: 3

### Peer and Practice Review Component (Reporting Period June 2016 – March 31, 2017)

- Members randomly selected: 52
  - Members selected due to incomplete PD tools: 1
  - Deferrals granted: 8
  - Members who successfully completed Step 1: 45
  - Members whose Step 1 results required review: 1
- Note:** Not all Step 1 PPR results require review by a panel of the Committee. An algorithm applied to the scoring determines whether it is necessary for a Member to move on to Step 2.
- Members who participated in Step 2: 8
  - Step 2 PPR results reviewed: 4 of 8
  - Number of PPR decisions issued: 1 of 8



Paula (Pat) Rayman, RP  
Committee Chair

### Committee Members:

- Paula (Pat) Rayman, RP  
(Chair)
- Andrew Benedetto, RP
- Carol Cowan-Levine, RP
- Mary Kardos Burton
- Sheldon Kawarsky
- Malcolm MacFarlane, RP
- Keith Marlowe, RP
- Len Rudner

## Quality Assurance Committee (cont'd)

### Policy/Committee Work

As the QA Program is designed to address the needs of Members and respond to changes that will impact the profession, development and refinement is ongoing. During the 2016-17 fiscal year, the QA Committee:

- **Finalized development of the Peer and Practice Review (PPR) tools**
  - This facilitated the launch of CRPO's PPR process. Tools include the Prequestionnaire, Remote and In-Person Interviews, and the Advertising and Record-keeping checklists.
- **Revised the Professional Development tools**
  - This enabled the transfer of the tools to a format where they can be completed online through the Quality Assurance Portal.
- **Established policies**
  - Policies related to the participation of new Members (i.e. those who are in their first calendar year of registration) and Members registered in the RP (Inactive) category.

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### Challenges and Opportunities

- The QA Committee is working to **shorten timelines associated with participation in Peer and Practice Review**. Considerable effort has gone into managing timelines, however, because many resources necessary to deliver the PPR were developed alongside the launch of the various PPR tools, timelines were often extended. During the next random selection phase the QA Committee will be able to shorten timelines as the processes and related resources are now established, tested and are proving to be reliable.
- The QA Committee is **developing resources that will be helpful to Members**. The launch of the Professional Development and PPR tools and processes was an opportunity for the Committee to gain insight into the needs and expectations of Members. These needs and expectations will be prioritized and practice resources will continue to be widely available to Members.
- The QA Committee is working to **clarify some aspects of CRPO's Professional Practice Standards**, as it became evident as a result of Member engagement in the PPR process that there were challenges in applying the standards in particular practice contexts. Look for additional resources and/or clarification on practice areas such as record-keeping and electronic practice in the coming fiscal year.

## Registration Committee

The Registration Committee is responsible for developing policies for entry into the College and transfers between registration categories. Registration Committee members also form panels to review applications for registration that have been referred by the Registrar.



Andrew Benedetto, RP  
Committee Chair

### Panel Work

When there are doubts about whether an applicant meets the registration requirements, that application is referred to a panel to determine:

- whether to approve the application without any restrictions;
- approve with terms, conditions and limitations; or
- refuse registration.

In the 2016-17 fiscal year, 90 applications were referred to the Registration Committee for review over the course of 10 panel meetings. Should an applicant be refused registration, they can appeal to the Health Professions Appeal and Review Board. The one appeal heard by the Board in the fiscal year upheld the decision of the panel.

### Policy/Committee Work

The Committee held three plenary meetings, which included the following policy considerations:

- **Clinical supervisor requirements**
  - The Committee approved a set of criteria for demonstrating competence in providing clinical supervision that will take effect April 1, 2018. These criteria take into consideration the diversity of the profession, requirements of established supervisor designations and other regulated professions capable of serving as clinical supervisors. These criteria will be reviewed in the coming year to ensure that they contribute to the role clinical supervision plays in public protection.
- **Police record checks**
  - The Committee, as well as Council, have discussed at length whether a police record check should be completed as part of the registration process, which also included stakeholder consultation in late 2016.
- **Renewal deferral/extension policy**
  - Established a policy for Members to make a formal request to delay the deadline to submit information related to renewing their membership in exceptional circumstances.
- **Return to active practice**
  - Approved a policy for Members wishing to move out of the Registered Psychotherapist (Inactive) category and back to active practice, which clarifies how Members demonstrate they possess the knowledge, skill and judgement expected of current, active Members.

### Committee Members:

Andrew Benedetto, RP  
(Chair)

Heidi Ahonen, RP  
(Non-Council Committee Member)

Carol Cowan-Levine, RP

Sabine Cox, RP  
(Non-Council Committee Member,  
until January 2017)

William (Bill) Helmeczi, RP  
(Non-Council Committee Member,  
until January 2017)

Tamar Kakiashvili, RP  
(Non-Council Committee Member)

Shikha Kasal

Sheldon Kawarsky

Barbara Locke Billingsley

Malcolm MacFarlane, RP

## Indigenous Registration Task Group

**Note:** During the 2016-17 fiscal year, the Indigenous Registration Task Group did not hold any meetings.

## Examination Committee

The Examination Committee considers appeals regarding failure of the Registration Examination where there are alleged grounds of unfairness. The Committee may also grant time extensions to individuals who, due to extenuating circumstances, are unable to write the Registration Examination within the time period set in the Registration Regulation.



Malcolm MacFarlane, RP  
Committee Chair

## Registration Examination

The second administration of the Canadian Professional Standard for Counselling and Psychotherapy (CPSCP): Entry to Practice Competency Assessment (commonly known as the “Registration Examination”) took place on October 20, 2016. There were 135 Qualifying Members deemed eligible by CRPO to write the Exam; of those candidates who wrote the Exam, 82 per cent were successful.

### Committee Members:

Malcolm MacFarlane, RP  
(Chair)

Andrew Benedetto, RP

Sheldon Kawarsky

Barbara Locke Billingsley

Steven Stijacic

Kevin VanDerZwet Stafford, RP

## Policy/Committee Work

The Examination Committee did not meet during the 2016-17 fiscal year since no appeals were filed.

## Nominations and Elections Committee

The Nominations and Elections Committee is responsible for addressing election-related disputes, for identifying candidates and encouraging them to run for election to Council, and for assisting the Registrar in supervising and administering elections if requested.



Keith Marlowe, RP  
Committee Chair

## Policy/Committee Work

The Committee met once in the 2016-17 fiscal year to address a vacancy in District 6 – Central West. As no nominee had come forward for this district during the 2015 Council election or a by-election held in April 2016, the Committee was asked to consider when to hold another by-election and what to do if the vacancy continued. Committee members recommended that, following a second by-election in April 2017, if the vacancy continued Council should consider merging the district with a neighboring district and creating a new seat.

### Committee Members:

Keith Marlowe, RP  
(Chair)

Shikha Kasal

Malcolm MacFarlane, RP

Paula (Pat) Rayman, RP

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**College of Registered  
Psychotherapists and  
Registered Mental Health  
Therapists of Ontario**

**Financial Statements  
March 31, 2017**

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## Independent Auditors' Report

To the Board of Directors of College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario.

We have audited the accompanying financial statements of College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario, which comprise the statement of financial position as at March 31, 2017, the statements of operations, changes in net assets and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

### Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audits in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error.

In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario as at March 31, 2017, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

*Crowe Soberman LLP*

Chartered Professional Accountants

Licensed Public Accountants

Toronto, Canada

July 25, 2017

# FINANCIAL STATEMENTS

College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario

## STATEMENT OF FINANCIAL POSITION

At March 31 2017 2016

### ASSETS

#### Current

Cash	\$ 3,652,661	\$ 2,724,393
Prepaid Expenses and Sundry	71,624	11,773
	3,724,285	2,736,166
<b>Capital Assets</b>	<b>28,918</b>	<b>22,396</b>
	<b>\$ 3,753,203</b>	<b>\$ 2,758,562</b>

### LIABILITIES

#### Current

Accounts Payable and Accrued Liabilities	\$ 103,162	\$ 74,430
Government Remittances Payable	315,310	208,087
Deferred Revenue	2,181,851	1,642,451
Due to Ministry of Health and Long-Term Care	–	3,840
	<b>2,600,323</b>	<b>1,928,808</b>

#### Commitments

### NET ASSETS

Net Assets Invested in Capital Assets	28,918	22,396
Unrestricted Net Assets	1,123,962	807,358
	1,152,880	829,754
	<b>\$ 3,753,203</b>	<b>\$ 2,758,562</b>

# FINANCIAL STATEMENTS

## College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario STATEMENT OF OPERATIONS

At March 31 2017 2016

### REVENUE

Membership Fees	\$ 1,966,654	\$ 1,370,545
Application Fees	431,921	194,264
Jurisprudence Fees	153,944	82,733
Administration Fees	17,489	–
Interest Income	12,547	4,989
Ministry of Health and Long-Term Care Funding – Net	–	256,160
	<b>2,582,555</b>	<b>1,908,691</b>

### EXPENSES

Salaries and Benefits	1,484,945	1,144,534
Information Technology Costs	228,169	123,196
Quality Assurance Program Tools and Resources	106,943	34,088
Meetings – Council and Committees	103,122	38,348
Complaints and Discipline Tools	90,401	31,166
Registration Tools and Resources	59,626	5,922
Professional Fees	51,596	53,022
Office Expenses	46,015	43,937
Communications and Media Costs	24,400	15,859
Staff Training and Professional Development	13,833	7,494
Travel and Accommodations – Council	11,795	14,768
Meetings – Office and General	6,573	2,984
Directors Insurance	6,109	5,507
Bank Charges and Interest	5,828	4,830
Consultants	5,000	7,340
Telephone	3,916	2,622
Travel and Accommodations – General	2,170	4,561
Amortization of Capital Assets	8,988	90,584
	<b>2,259,429</b>	<b>1,640,762</b>
<b>Excess of Revenue Over Expenses</b>	<b>\$ 323,126</b>	<b>\$ 267,929</b>

Fees are the College's only source of income and they must provide the financial means to develop and manage all of the CRPO programs required by the *Regulated Health Professions Act, 1991* (RHPA).

The College is required under section 85.7 of the RHPA to maintain adequate financial reserves to meet statutory obligations, in particular with regards to processing and disposing of complaints and reports and providing funding for therapy for victims of sexual abuse by Members. For this reason, any excess funds that the College acquires at the end of each fiscal year are used to maintain the reserve necessary to fulfill its mandate, and in case of any unplanned or extraordinary expenses. The accumulation of this reserve is balanced with careful attention to the quality of the administration and management, including the financial management, of the College.