



College of
Registered
Psychotherapists
of Ontario

The Professional Practice Standards (2024)

Updates and Highlights

March 5, 2024

Introduction

- Welcome
- Outline

What Are Professional Practice Standards?

- Form the base expectations of the profession
- Written standards and guidelines assist registrants in the safe, ethical, and effective practice of the profession
- Reviewed periodically based on various factors, including data from CRPO investigations and practice advice questions, evolving societal expectations, the current practice environment, and system partner feedback.

Where to Find the Standards?

- English: www.crpo.ca/standards
- French: www.crpo.ca/normes

The Standards Review Process

- Legislative research, literature scan, jurisdictional scan, internal data review
- Review by QAC Committee and Council
- Consultations with subject matter experts and professional associations
- Public consultation
- Approved by Council

Overall Changes to the Standards

- Structure
- Standard statements first, numbered
- Key definition section
- Commentary
- Wording
- Registrant instead of member
- Gender neutral

Clinical & Ethical Judgment; Small Communities (Standards 1.6. & 1.7)

- Standard on Conflict of Interest (1.6) and Dual Relationships (1.7) expanded to include increased emphasis on clinical and ethical judgement
- New definition for "small community"
- Additional guidance on treating individuals who know each other
- New commentary on conflicts occurring within small communities

Advertising and Expanding Areas of Practice (Standards 2.1 & 6.2)

- 2.1.4 Registrants complete appropriate, verifiable education, and receive clinical supervision or consultation, before changing or expanding their practice area.
- 6.2.7 Registrants advertise an area of practice only if they have verifiable training in that area of practice.

Informing Clients about CRPO (Standard 3.6)

- The revised Standard 3.6.1 states: “As part of the consent process, registrants inform clients that the registrant is registered with CRPO and that CRPO is the organization that sets the rules for and considers complaints about registered psychotherapists.”

Supervisor Professionalism (Standard 4.1)

- Power imbalance similar to therapist–client
- Professionalism expectation made explicit
- Examples:
 - Conflicting roles
 - Undue influence and abuse
 - Mandatory reporting

Supervision Frequency (Standard 4.2)

- Clinical supervisors and supervisees have a shared responsibility of applying professional judgment to determine the appropriate frequency of clinical supervision. Factors may include:
 - The level of experience and competency areas of the supervisee (that is, a newer practitioner will require more frequent clinical supervision)
 - The nature of the therapy (modality, clientele, presenting issues)
 - Caseload (a supervisee seeing a larger number of clients will require more supervision)
 - Other supports available (peer group, consultation, administrative supervision)

Report-Writing (Standard 5.2)

- 5.2.2. When providing a report or certificate, registrants indicate whether they are providing opinion, stating objective fact, or summarizing information provided by a client

Reviews, Testimonials and Endorsements (Standard 6.2)

- 6.2.2 Registrants do not request or solicit testimonials or use them in their advertising.
- This rule does not prevent clients or others from reviewing or endorsing registrants (e.g., on third party Internet sites for rating professionals), provided registrants do not request them to do so, and provided registrants do not influence which reviews or endorsements are published.
- Registrants are expected not to advertise or promote third party reviews or endorsements about them, as doing so could be misleading.

Health Information Custodian Successor (Standard 6.4)

- 6.4.3 Registrants who are health information custodians provide the College with up-to-date information about who would take custody of the records in their care in event of the registrant's death or long-term inability to fulfill their obligations related to this position.
- 6.4.4 Registrants acting as health information custodians maintain records in a secure manner for the period set out in Standard 5.1, even after the closure of their practice, unless the records are transferred to another health information custodian.

Protections for Clients' Close Contacts (Standard 1.8)

- 1.8.2 Registrants are respectful, both during and outside of treatment sessions, of clients' representatives, family, partners, or other individuals with whom clients maintain a close personal relationship. They refrain from sexual, verbal, physical, psychological and emotional abuse towards any of these individuals.
- 1.8.3 Registrants do not unduly influence clients, their representatives, family, or partners, including but not limited to personal life decisions, the making of wills, or powers of attorney.

Joint Therapy Records (Standard 5.1)

Commentary

- Registrants should explain to joint clients how records are kept and how they may access those records. Clients may access the entire record if all participants consent or submit a joint request (e.g., both members of a couple request access to the couple therapy record). If only one participant requests access to a joint record, and the others have not consented, they are only entitled to the information about themselves, and any communal information (e.g., general themes) that is not attributable specifically to another participant

Next Steps

- Uploading edited and formatted versions
- Translation
- Peer case and CBA updates
- Communique featurette articles
- Feedback survey



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Thank You & Questions

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