CRPO Town Hall
A review of the last year and a preview of the work to come

April 24, 2024

Housekeeping

Agenda

- Welcome and Opening Remarks

- Registration & Examination update

  - Clinical Supervisor definition update

- Entry to Practice Competence review

- Professional Practice Standards

- Quality Assurance Program update

  - Case based assessment and PD reporting

- Conduct update

  - Trauma-informed regulation report and conduct statistics

- Diversity, Equity and Inclusion update

  - Self-identification data collection initiative

- College Performance Measurement Report

Town Hall Schedule

Thursday May 30 @ 8 am	Governance and Regulation
Wednesday June 5th @ 4:00	Trauma Informed Regulation: what recommendations results from the independent review of the College's conduct processes and what is the College doing with them?
Monday September 23rd @ noon	Quality Assurance update: how is the Case Based Assessment going?
Tuesday October 29th @ 8:00 am	L'année en revue et l'année à venir : le point sur le travail de l'OPAO.
Monday November 18th @ noon	Private Practice and Self-Regulation: Issues for RPs who are in (or thinking about going into) private practice
January - date and time to follow	Conduct issues: information about what kinds of complaints the College is getting and how they are being addressed
February – date and time to follow	Clinical Supervision: An overview of requirements and coming changes and a review of issues the College sees
March 2024 – date and time to follow	Diversity, Equity and Inclusion Efforts at the College: an update on the work CRPO is doing to ensure that the principles of DEI inform the work of public protection

Registration & Examination Update

Alexandra Brennan
Manager, Registration
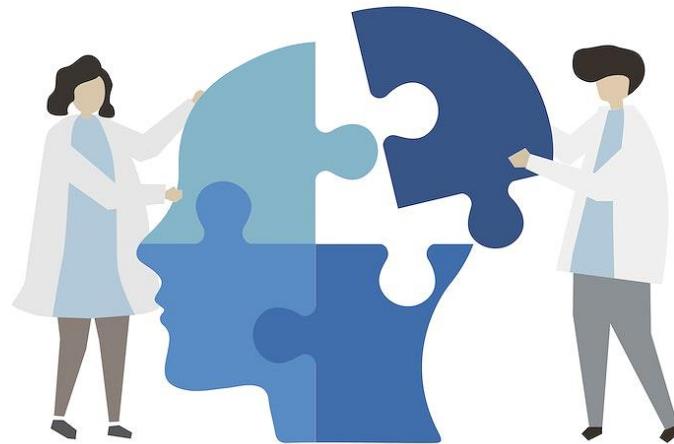
Registration Statistics

Application Type	April 2022 – March 2023	April 2023 – March 2024	Change
Recognized Program	1,995	2,031	2%
Non-Recognized Program	252	140	-44%
Other (Labour Mobility, Indigenous Pathway)	10	9	-10%
Total Applications	2,257	2,320	3%

Processing Timelines

- [Month of applications being processed](#)
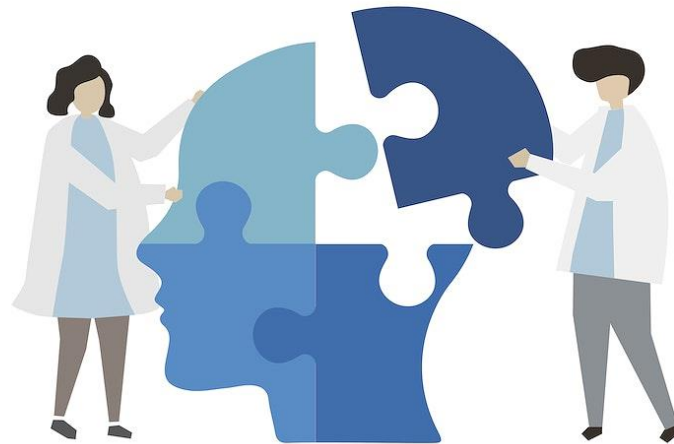
2023 Exam Overview

- 2 sittings

- 1,850 exam writers

- 91% overall pass rate

- Writers from:
  - 26 recognized education programs
  - 117 non-recognized education programs
  - 1 accepted bridging program

Supervision Tool Rollout

Changes to Clinical Supervision

Mark Pioro
Deputy Registrar & General Counsel

Clinical Supervisor definition update

Professional Practice Standards

Mark Pioro
Deputy Registrar & General Counsel

Professional Practice Standards Review: Overview

- Standards establish minimum base requirements for all RPs

- Guiding objectives: ensuring competent and ethical practices, earning and maintaining public trust, and responsiveness to evolving research and practice environments.

Entry to Practice Competency Profile
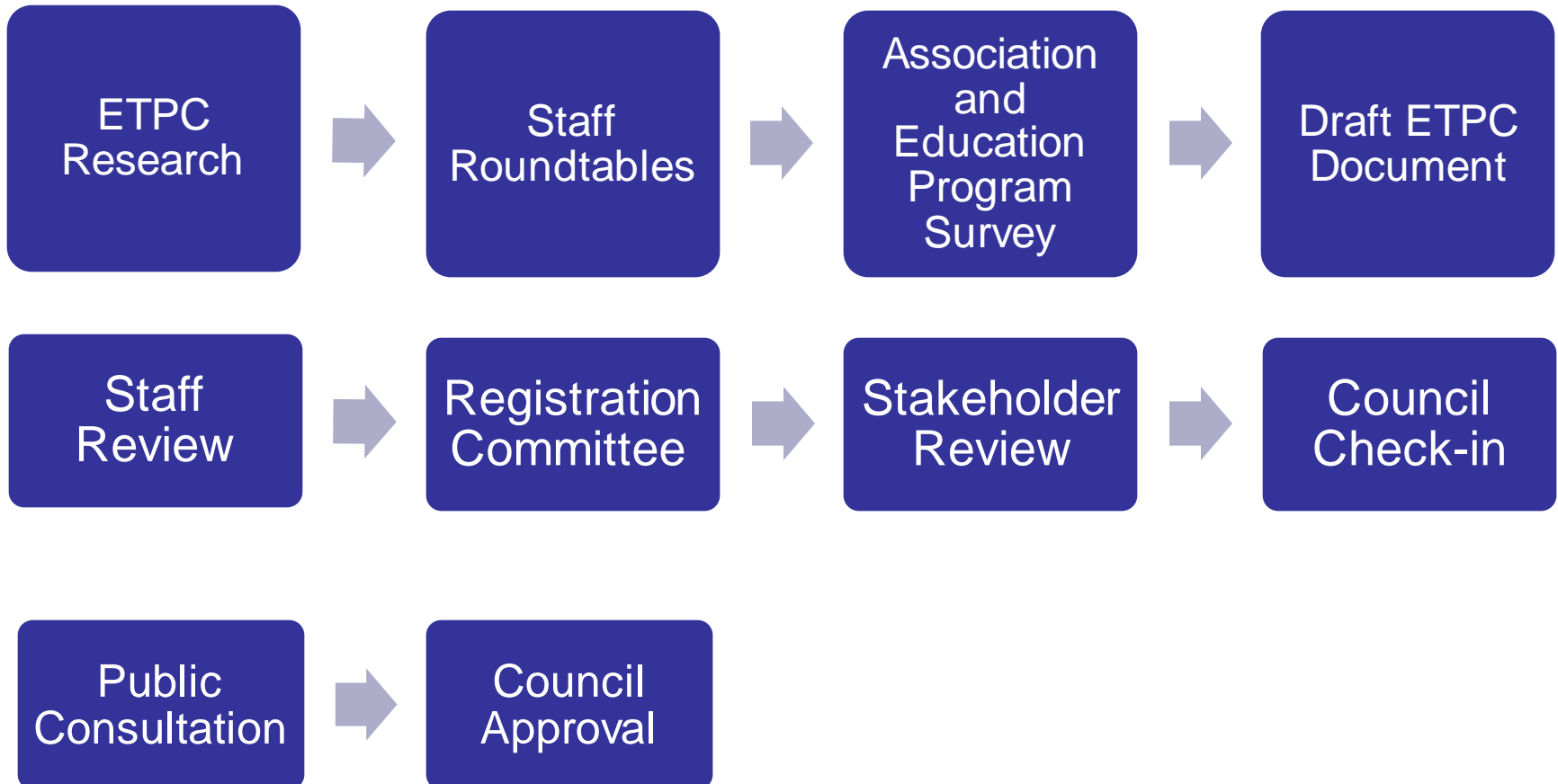
Pamela Bialik
Policy Analyst

Entry to Practice Competencies Review: Overview

- The competency profile lists the competencies that must be possessed by individuals entering the profession for the first time, in order for them to practise safely, effectively and ethically across a variety of practice settings.

- Last updated in 2012

ETPC Review: Process

ETPC Research → Staff Roundtables → Association and Education Program Survey → Draft ETPC Document

Staff Review → Registration Committee → Stakeholder Review → Council Check-in

Public Consultation → Council Approval

Quality Assurance Program Update

Case Based Assessment

Case Based Assessment

Sample cases: https://www.surveymonkey.com/r/Y527JZ9

Frequently asked questions: https://www.crpo.ca/ppr-faq/

Case Based Assessment

2023 CBA results

CBA	# of RPs	Successful	Self-directed review	Peer-assisted review
2023 Spring CBA	794	668	113	13
2023 Fall CBA	930	785	117	28
2023 Reassessments	8	5	2	1
Total	1732	1458	232	42
Percentage		84%	13%	3%

2023 PD Cycle

The reporting cycle for odd-year registrants (2015, 2017, 2019, and 2021) ended on December 31, 2023

2023 PD cycle	
Total # of RPs required to report	5798
Completed by December 31, 2023	4174
Completed late*	1565
Non-responsive	12
Changed registration status	47

Practice Advisory Service

Practice advisory data

		2020-21	2021-22	2022-23	2023-24
Q1	Apr-Jun	669	614	760	796
Q2	Jul-Sep	505	505	607	823
Q3	Oct-Dec	612	576	720	904
Q4	Jan-Mar	626	765	851	865

Common topics include:

- Confidentiality
- Competence and consultation
- Cross border practice
- Fees
- Closing, Selling or Relocating a Practice
- Mandatory reporting/Duty to report

Conduct Update

Jenna Smith
Manager, Professional Conduct

Trauma Review

Let your voice be heard!

An invitation to participate in the CRPO's Complaints and Reports Processes Review

What is the Review about?
The College of Registered Psychotherapists of Ontario (CRPO) engaged the Barbra Schlifer Commemorative Clinic (the Clinic) to conduct an Independent Review of the College's complaints and reports processes. The College has initiated this Independent Review to ensure that their complaints and reports processes are responsive to those who report having experienced trauma, are trauma-informed, and are procedurally fair.

What does participation involve?
The Clinic's Review Team will conduct individual interviews and collect information through written responses. Interviews will be approximately 1 hour to 1.5 hours long and will be held by videoconference, with the option of attending via telephone. If you participate, you will receive a gift card ($100 for an interview or $50 for a written response).

Why am I being invited to participate?
The College identified that you were involved in a complaint in the last few years. If you do not want to participate, simply disregard this invitation. You do not need to let us or the College know you wish to decline this invitation.

Why participate?
Your opinions, views, and thoughts are essential to help us better understand any potential harm from the College's current practices when responding to complaints, reports, and barriers to making a complaint or filing reports.

What is the Barbra Schlifer Commemorative Clinic?
The Clinic is a non-profit charitable organization that provides holistic and accessible social services to diverse women who have experienced gender-based violence. The Clinic's services include legal representation, trauma-informed counselling, interpretation services, and advocacy.

Why should I trust you?
Your participation will be anonymous to the College. While the College has identified you as a potential participant, they will not know if you have decided to participate. All your information will be held confidential by the Clinic and used only for the Review.

We know that this may be a hard topic to discuss. If you participate in an interview, you will be offered a free, one-time session with a registered social worker.

How can I participate?
To express your interest in participating, email the Clinic's Review Team at the email below. Please let us know if you want to be interviewed or submit written responses. Please do not email the College to express interest in participating.

Kindly note that there are limited interview spots. Expressing your interest in participating via interview does not guarantee that you will be interviewed. If you do not get an interview spot, you can still participate by responding in writing if you wish.

Language interpretation and accessibility accommodations are available upon request.

To participate, email the Clinic's Review Team at:

For more information on the Clinic:

Distribution of Formal Complaints & Registrar's Reports by Theme

DOMAIN 6: SUITABILITY TO PRACTICE
STANDARD 12

Statistical data is collected in accordance with the recommended method or the College's own method: R e c o m m e n d e d
If a College method is used, please specify the rationale for its use:

Context Measure (CM)

CM 5. Distribution of formal complaints and Registrar's Investigations by theme in CY 2023	Formal Complaints received		Registrar Investigations initiated		
Themes:	#	%	#	%	
I. Advertising	6	6	0	0	
II. Billing and Fees	14	13	NR	NR	
III. Communication	6	6	NR	NR	*What does this information tell us? This information facilitates transparency to the public, registrants and the ministry regarding the most prevalent themes identified in formal complaints received and Registrar's Investigations undertaken by a College.*
IV. Competence / Patient Care	39	37	9	53	
V. Intent to Mislead including Fraud	35	33	NR	NR	
VI. Professional Conduct & Behaviour	83	78	10	59	
VII. Record keeping	7	7	NR	NR	
VIII. Sexual Abuse	NR	NR	NR	NR	
IX. Harassment / Boundary Violations	13	12	NR	NR	
X. Unauthorized Practice	NR	NR	0	0	
XI. Other <please specify>	0	0	0	0	
Total number of formal complaints and Registrar's Investigations**	106		17		

Formal Complaints *NR* Registrar's Investigation

**The requested statistical information (number and distribution by theme) recognizes that formal complaints and Registrar's Investigations may include allegations that fall under multiple themes identified above, therefore when added together the numbers set out per theme may not equal the total number of formal complaints or Registrar's Investigations.

Distribution of Formal Complaints & Registrar's Reports

DOMAIN 6: SUITABILITY TO PRACTICE		
STANDARD 12		

Statistical data collected in accordance with the recommended method or the College's own method: R e c o m m e n d e d

If a College method is used, please specify the rationale for its use:

Context Measure (CM)			
CM 6. Total number of formal complaints that were brought forward to the ICRC in CY 2023	90		What does this information tell us? The information helps the public better understand how formal complaints filed with the College and Registrar's Investigations are disposed of or resolved. Furthermore, it provides transparency on key sources of concern that are being brought forward to the College's Inquiries, Complaints and Reports Committee.
CM 7. Total number of ICRC matters brought forward as a result of a Registrar's Investigation in CY 2023	43		
CM 8. Total number of requests or notifications for appointment of an investigator through a Registrar's Investigation brought forward to the ICRC that were approved in CY 2023	26		
CM 9. Of the formal complaints and Registrar's Investigations received in CY 2023**:	#	%	
I. Formal complaints that proceeded to Alternative Dispute Resolution (ADR)	0	0	
II. Formal complaints that were resolved through ADR	0	0	
III. Formal complaints that were disposed of by ICRC	14	14	
IV. Formal complaints that proceeded to ICRC and are still pending	15	16	
V. Formal complaints withdrawn by Registrar at the request of a complainant	NR	NR	
VI. Formal complaints that are disposed of by the ICRC as frivolous and vexatious	NR	NR	
VII. Formal complaints and Registrar's Investigations that are disposed of by the ICRC as a referral to the Discipline Committee	NR	NR	

Distribution of ICRC Decisions by Theme

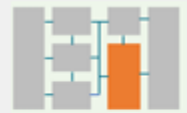Statistical data collected in accordance with the recommended method or the College's own method: R e c o m m e n d e d

If a College method is used, please specify the rationale for its use:

Context Measure (CM)							
CM 10. Total number of ICRC decisions in 2023	62						
Distribution of ICRC decisions by theme in 2023*	# of ICRC Decisions++						
Nature of Decision	Take no action	Proves advice or recommen dations	Issues a caution (oral or written)	Orders a specified continuing education or remediation program	Agrees to undertaking	Refers specified allegations to the Discipline Committee	Takes any other action it considers appropriate that is not inconsistent with its governing legislation, regulations, or by-laws.
I. Advertising	0	NR	0	NR	NR	NR	0
II. Billing and Fees	NR	0	0	NR	0	0	0
III. Communication	NR	NR	NR	NR	NR	0	0
IV. Competence / Patient Care	16	NR	NR	NR	NR	0	NR
V. Intent to Mislead Including Fraud	12	NR	0	0	NR	0	NR
VI. Professional Conduct & Behaviour	22	10	NR	6	NR	NR	NR
VII. Record Keeping	NR	NR	NR	NR	NR	NR	NR
VIII. Sexual Abuse	NR	0	0	0	0	NR	0
IX. Harassment / Boundary Violations	9	NR	NR	NR	0	NR	NR
X. Unauthorized Practice	NR	0	0	0	0	0	1
XI. Other *<please specify>*	0	0	0	0	0	0	0

90th Percentile
of Days to Dispose of File

DOMAIN 6: SUITABILITY TO PRACTICE		
STANDARD 12		

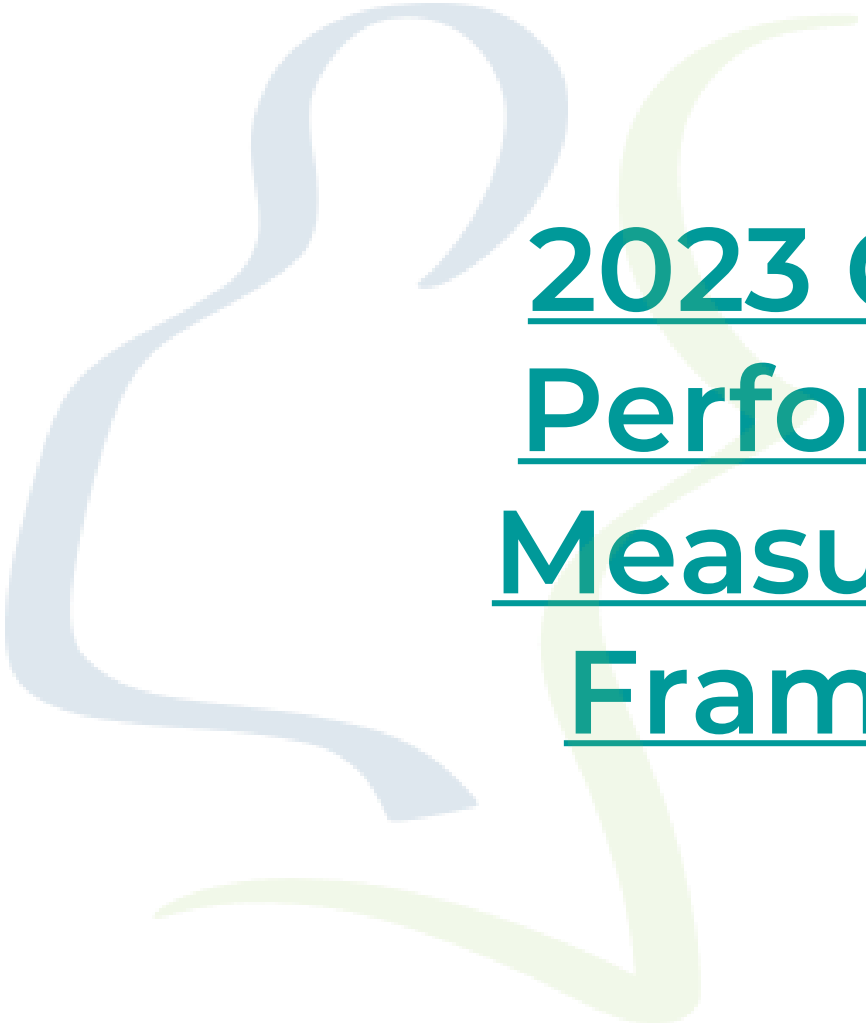Statistical data collected in accordance with the recommended method or the College own method: R e c o m m e n d e d

If College method is used, please specify the rationale for its use:

Context Measure (CM)		
CM 11. 90th Percentile disposal of:	Days	*What does this information tell us? This information illustrates the maximum length of time in which 9 out of 10 formal complaints or Registrar's investigations are being disposed by the College.*
I. A formal complaint in working days in CY 2023	457	*The information enhances transparency about the timeliness with which a College disposes of formal complaints or Registrar's investigations. As such, the information provides the public, ministry, and other stakeholders with information regarding the approximate timelines they can expect for the disposal of a formal complaint filed with, or Registrar's investigation undertaken by, the College.*
II. A Registrar's investigation in working days in CY 2023	623	

Diversity, Equity and Inclusion Strategy Update

2023 College Performance Measurement Framework

Domains	Standards
Governance	1. Council and statutory committee members have the knowledge, skills, and commitment needed to effectively execute their fiduciary role and responsibilities pertaining to the mandate of the College.
	2. Council decisions are made in the public interest.
	3. The College acts to foster public trust through transparency about decisions made and actions taken.
Resources	4. The College is a responsible steward of its (financial and human) resources.
System Partner	5. The College actively engages with other health regulatory Colleges and system partners to align oversight of the practice of the profession and support execution of its mandate.
	6. The College maintains cooperative and collaborative relationships responds in a timely and effective manner to changing public expectations.
Information Management	7. Information collected by the College is protected from unauthorized disclosure.
Regulatory Policies	8. Policies, standards of practice, and practice guidelines are based in the best available evidence, reflect current best practices, are aligned with changing public expectations, and where appropriate aligned with other Colleges.
Suitability to Practice	9. The College has processes and procedures in place to assess the competency, safety, and ethics of the people it registers.
	10. The College ensures the continued competence of all active registrants through its Quality Assurance processes. This includes an assessment of their competency, professionalism, ethical practice, and quality of care.
	11. The complaints process is accessible and supportive.
	12. All complaints, reports, and investigations are prioritized based on public risk, and conducted in a timely manner with necessary actions to protect the public.
	13. The College complaints process is coordinated and integrated.
Measurement, Reporting and Improvement	14. The College monitors, reports on, and improves its performance.

Standards we met partially

3.3 The College has a Diversity, Equity, and Inclusion (DEI) Plan.

a. The DEI plan is reflected in the Council's strategic planning activities and appropriately resourced within the organization to support relevant operational initiatives (e.g. DEI training for staff).

⇨ DEI WG established and working with request that recommendations regarding DEI plan be made to Council

⇨ Monthly meetings of 15-member working group supported by staff and DEI consultant

⇨ staff, Council and committee training ongoing

3.3 The College has a Diversity, Equity, and Inclusion (DEI) Plan.

b. The College conducts Equity Impact Assessments to ensure that decisions are fair and that a policy, or program, or process is not discriminatory.

- ⇨ Committees are using HPRO equity assessment tools to evaluate governance, resources & measurement, reporting and improvement
- ⇨ Self-identification data collection initiative approved and operational infrastructure in development to implement collection from applicants, registrants and complainants

10.1 The College supports registrants in applying the (new/revised) standards of practice and practice guidelines applicable to their practice

a. Provide examples of how the College assists registrants in implementing required changes to standards of practice or practice guidelines (beyond communicating the existence of new standard, FAQs, or supporting documents).

⇨ during the Professional Practice Standards review process

resources made available included:

⇨ Access to revised JRP

⇨ Practice resources

⇨ CBA situational judgement sample cases

⇨ Revised PPS launch webinar

Areas of focus for 2024

- develop supporting resources to revised Professional Practice Standards

- articulate formal Diversity, Equity and Inclusion strategy

- continue Registrant Management System implementation

- implement recommendations from trauma-informed review of core regulatory processes

- rollout Peer Coaching Program

- begin evaluation of Quality Assurance Program enhancement project

- by-law review including public consultation

Thank You!