



# **Controlled Act Task Group Consultation Documents**

Final Draft, March 2018

## A. Psychotherapy with a Registered Psychotherapist

Psychotherapy is primarily a talk-based therapy intended to help individuals improve their mental health and well-being. Psychotherapy occurs when the Registered Psychotherapist and client enter into a psychotherapeutic relationship where both work together to bring about positive change in the client's thinking, feeling, behaviour and social functioning. Individuals usually seek psychotherapy when they have thoughts, feelings, moods and behaviours that are adversely affecting their day-to-day lives, relationships and the ability to enjoy life.

A psychotherapy client should be able to observe the following key elements over the course of their work with a Registered Psychotherapist:

- A conversation about the **benefits, risks and expected outcome(s)** of the psychotherapy and the opportunity to give their **informed consent**.
- A clearly communicated, mutually agreed upon **goal** or **plan** for the psychotherapy.
- Each therapy session has a **clear beginning** and a **clear end** where problems or concerns are presented and discussed and outcomes are explored.
- The Registered Psychotherapist demonstrates the appropriate use of **boundaries** to create a **safe and confidential environment**.

These important elements are part of the effective **client-therapist psychotherapeutic** relationship that is the foundation of psychotherapy. Through this relationship, Registered Psychotherapists are expected to:

- ensure that the client's well-being is at the forefront of the relationship;
- work with the client(s) to gather relevant information that will support the formulation of a plan for psychotherapy;
- continuously evaluate outcomes of each session and the impact on overall treatment goal(s);
- practice safe and effective use of self throughout the psychotherapeutic process; and
- adhere to the standards of practice for the profession.

Registered Psychotherapists will be competent to use a treatment approach or modality that is part of one or more of the categories of prescribed therapies, which include:

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

## **B. Draft Regulation: Categories of Prescribed Therapies Involving the Practice of Psychotherapy**

Ontario Regulation

1. The following are 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

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## C. Draft Policy: Activities that are Not Part of the Controlled Act of Psychotherapy

In order for a Registered Psychotherapist to engage in the controlled act of psychotherapy:

- there must be a **psychotherapeutic relationship** between client and Registered Psychotherapist;
- the Registered Psychotherapist must be providing treatment intended to help individuals improve mental health and well-being;
- the Registered Psychotherapist must be using a technique that is captured by the categories of prescribed therapies;
- the client must be suffering from a serious disorder of thought, cognition, mood, emotional regulation, perception or memory; and
- the client's disorder may seriously impair the individual's judgement, insight, behaviour, communication or social functioning.

Various mental health practitioners providing services may have a 'therapeutic' (i.e., beneficial / supportive) relationship with their clients and use psychotherapy techniques occasionally as an ancillary part of their duties. However, this does not necessarily constitute a psychotherapeutic relationship, where the intention is to engage in psychotherapy.

Activities that, in isolation and absent a formal psychotherapeutic relationship, are not considered by CRPO to involve the controlled act of psychotherapy include:

- **Advocating**
- **Case management**
- **Clinical follow-up/care and discharge planning**
- **Coaching**
- **Coordinating**
- **Counselling and support**
  - *advising / advice giving*
  - *instruction*
- **Crisis intervention/management**
  - *de-escalation*
  - *safety planning*
  - *referral to other services*
- **Hypnotherapy**
  - *smoking cessation*
- **Information/advice and knowledge transfer**
  - *instructing*
- **Intake and referral**
- **Mediating**
- **Monitoring**
- **Problem solving**
  - *information and advice giving*
  - *12 step program*
  - *social skill development*
  - *instruction*
  - *emotional regulation*
- **Psychometric testing and assessment**
- **Rehabilitation**
  - *helping an individual to deal with symptoms of a medical illness,*
  - *resuming activities of daily life*
  - *learning or relearning skills that assist in carrying out the activities of daily life*
- **Spiritual or faith guidance**
- **Teaching**
  - *social skill development*
  - *emotion regulation*
  - *prescriptive programs*

## D. Companion Document for Registered Psychotherapists

### Background

In determining the categories of prescribed therapies that involve the practice of psychotherapy, CRPO considered the significant evolution in the field over the past several decades. Operating from the position that models are orienting frameworks used to help guide or inform clinicians in having therapeutic conversations, CRPO has identified five broad categories of prescribed therapies:

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

All psychotherapeutic modalities used by Registered Psychotherapists should fall within these categories. Based on the extensive work that has been completed to review the applications of some 7,000 individuals (approximately 6,000 of whom have been deemed to meet the entry-to-practice requirements and to be working within the scope of practice for psychotherapy), CRPO is confident that this framework will allow Registered Psychotherapists to situate their own practices within the categories of prescribed therapies. All Registered Psychotherapists will be competent in and able to draw from one or more of the categories to provide safe, effective and ethical care within the setting of a formal and clearly observable psychotherapeutic relationship.

### Prescribed Therapies

#### Inclusive Models

The following are examples of therapy modalities that fall under the five categories of psychotherapy that will be listed in regulation. ***These examples are not intended to be exhaustive, rather are intended to help RPs situate their own practices within what are intended to be broad categories.*** CRPO is aware that some of these modalities could reasonably be seen as being part of more than one of the five categories or considered to be more accurately captured by a category other than the one in which CRPO has situated it for the purposes of this document.

### **Cognitive and Behavioural Therapies**

- *Acceptance and Commitment Therapy*
- *Cognitive Behaviour Therapy*
- *Dialectical Behaviour Therapy*
- *Exposure Therapy*
- *Mindfulness Based Cognitive Therapy*
- *Rational-Emotive Therapy*
- *Schema Therapy*

### **Experiential and Humanistic Therapies**

- *Art Therapy*
- *Emotion-Focused Therapy*
- *Gestalt Therapy*
- *Multi-cultural Therapy*
- *Music Therapy*
- *Play Therapy*
- *Psychodrama*
- *Rogarian Person Centred Therapy*
- *Satir Transformational Systemic Therapy*

### **Psychodynamic Therapies**

- *Adlerian Therapy*
- *Psychoanalytic Psychotherapy*
- *Interpersonal Therapy*
- *Jungian Analysis*
- *Object Relations Psychotherapy*
- *Reichian Therapy*
- *Relational Psychotherapy*

### **Somatic Therapies**

- *Biofeedback*
- *Ericksonian Hypnosis*
- *Emotional Freedom Therapy*
- *Eye Movement Desensitization Reprocessing*
- *Neurolinguistic Programming*
- *Sensory Motor Therapy*
- *Somatic Experiencing*

### **Systemic and Collaborative Therapies**

- *Dialogic Therapy*
- *Family Systems Theory*
- *Interpersonal Psychotherapy*
- *Multi-systemic Therapy*
- *Narrative Therapy*
- *Solution Focused Therapy*
- *Strategic and Structural Therapies*

## Activities that do not Constitute Psychotherapy

CRPO has developed a list of activities that are deemed to be *outside* the practice of psychotherapy. Psychotherapists may do some of these activities. However, a provider who undertakes these activities in the absence of a formal psychotherapeutic relationship is not practising psychotherapy. These activities include, but are not limited to:

- **Advocating**
- **Case management**
- **Clinical follow-up/care and discharge planning**
- **Coaching**
- **Coordinating**
- **Counselling and support**
  - *advising / advice giving*
  - *instruction*
- **Crisis intervention/management**
  - *de-escalation*
  - *safety planning*
  - *referral to other services*
- **Hypnotherapy**
  - *smoking cessation*
- **Information/advice and knowledge transfer**
  - *instructing*
- **Intake and referral**
- **Mediating**
- **Monitoring**
- **Problem solving**
  - *information and advice giving*
  - *12 step program*
  - *social skill development*
  - *instruction*
  - *emotional regulation*
- **Psychometric testing and assessment**
- **Rehabilitation**
  - *helping an individual to deal with symptoms of a medical illness*
  - *resuming activities of daily life*
  - *learning or relearning skills that assist in carrying out the activities of daily life*
- **Spiritual or faith guidance**
- **Teaching**
  - *social skill development*
  - *emotion regulation*
  - *prescriptive programs*

## E. Self-Assessment Tool for Unregulated Practitioners

### Background

Anyone whose work falls within the [scope of the practice of psychotherapy](#), and who is not already registered with another Ontario regulatory college whose members can provide the controlled act of psychotherapy, should consider becoming a member of CRPO. Anyone who fits within the following descriptions **must** be registered:

- using the title “psychotherapist”, “Registered Psychotherapist” or any abbreviation thereof; and
- holding out as qualified to practise as a psychotherapist in Ontario (no matter what title they may use).

Additionally, once the transition period built into the [December 2017 proclamation](#) of the [controlled act of psychotherapy](#) ends on December 31, 2019, anyone whose practice involves the provision of the controlled act must be registered with one of the six colleges authorized to perform that act.

### Instructions

This tool is intended to assist unregulated practitioners in determining if they should be applying for registration with CRPO or another regulatory college, or if they need to consider amending their practice. There are four components assessed by this tool: the scope of psychotherapy, the controlled act of psychotherapy, the psychotherapeutic relationship and the entry-to-practice requirements. All seven questions should be answered and considered in determining what course of action a provider should be taking with their practice.

#### 1) Does your work primarily involve one or more of the following *in isolation* or in *the absence of a psychotherapeutic relationship*?

- **Advocating**
- **Case management**
- **Clinical follow-up / care and discharge planning**
- **Coaching**
- **Coordinating**
- **Counselling and support**
  - *advising / advice giving*
  - *instruction*
- **Crisis intervention / management**
  - *de-escalation*
  - *safety planning*
  - *referral to other services*
- **Hypnotherapy**
  - *smoking cessation*
- **Information/ advice and knowledge transfer**
  - *instructing*
- **Intake and referral**
- **Mediating**
- **Monitoring**
- **Problem solving**
  - *information and advice giving*
  - *12 step program*
  - *social skill development*
  - *instruction*
  - *emotional regulation*
- **Psychometric testing and assessment**
- **Rehabilitation**
  - *helping an individual to deal with symptoms of a medical illness*
  - *resuming activities of daily life*
  - *learning or relearning skills that assist in carrying out the activities of daily life*
- **Spiritual or faith guidance**
- **Teaching**
  - *social skill development*
  - *emotion regulation*
  - *prescriptive programs*

Answer:  Yes  No

**Note:** If you answered “yes” to question 1, you are most likely **not** working within the scope of practice of psychotherapy and do not need to be registered with one of the six colleges that are authorized to provide the controlled act of psychotherapy, even if these activities are provided to individuals with a serious disorder or impairment.

**2) Are you establishing and maintaining an ongoing psychotherapeutic relationship with your clients as indicated by all of the following:**

- You are responsible for having a conversation with clients about the **benefits, risks and expected outcome(s)** of the psychotherapy.
- You are responsible for gaining the client’s **informed consent**.
- You are responsible for developing, with the client, a mutually agreed upon **goal** or **plan** for the psychotherapy.
- You ensure that each therapy session has a **clear beginning** and a **clear end** where problems or concerns are presented and discussed and outcomes are explored.
- You demonstrate the appropriate use of **boundaries** to create a **safe and confidential environment**.
- You are responsible for ensuring that the client’s well-being is at the forefront of the relationship.
- You work with the client to gather relevant information that will support the formulation of a plan for psychotherapy.
- You continuously evaluate outcomes of each session and the impact on overall treatment goal(s).

Answer: Yes No

**3) Are you providing treatment to clients for cognitive, emotional or behavioural disturbances to improve their mental health and wellbeing?**

Answer: Yes No

**4) Are you trained in, competent with and using psychotherapy modalities from one or more of the following five categories of prescribed therapies described in Regulation or policy?**

**Note:** The modalities listed below are intended to be representative but not exhaustive.

### **Cognitive and Behavioural Therapies**

- *Acceptance and Commitment Therapy*
- *Cognitive Behaviour Therapy*
- *Dialectical Behaviour Therapy*
- *Exposure Therapy*
- *Mindfulness Based Cognitive Therapy*
- *Rational-Emotive Therapy*
- *Schema Therapy*

### **Experiential and Humanistic Therapies**

- *Art Therapy*
- *Emotion-Focused Therapy*
- *Gestalt Therapy*
- *Multi-cultural Therapy*
- *Music Therapy*
- *Play Therapy*
- *Psychodrama*
- *Rogierian Person Centred Therapy*
- *Satir Transformational Systemic Therapy*

### **Psychodynamic Therapies**

- *Adlerian Therapy*
- *Psychoanalytic Psychotherapy*
- *Interpersonal Therapy*
- *Jungian Analysis*
- *Object Relations Psychotherapy*
- *Reichian Therapy*
- *Relational Psychotherapy*

### **Somatic Therapies**

- *Biofeedback*
- *Ericksonian Hypnosis*
- *Emotional Freedom Therapy*
- *Eye Movement Desensitization Reprocessing*
- *Neurolinguistic Programing*
- *Sensory Motor Therapy*
- *Somatic Experiencing*

### **Systemic and Collaborative Therapies**

- *Dialogic Therapy*
- *Family Systems Theory*
- *Interpersonal Psychotherapy*
- *Multi-systemic Therapy*
- *Narrative Therapy*
- *Solution Focused Therapy*
- *Strategic and Structural Therapies*

**Answer:**  Yes  No

**Note:** If you answered “yes” to questions 2 to 4, you are most likely working within the scope of practice of psychotherapy and should consider applying for registration with the College of Registered Psychotherapists of Ontario or one of the other five colleges whose members are authorized to provide the controlled act of psychotherapy.

In order to determine if you are performing the controlled act of psychotherapy, service providers must assess the seriousness of an individual’s disorder and impairment. This includes an individual’s disorder or impairment of thought, cognition, mood, emotional regulation, perception or memory that may seriously impair the client’s judgement, insight, behaviour, communication or social functioning. In making this assessment, service providers should consider the following:

- The client’s subjective assessment of the level of seriousness of their condition.
- The clinician’s subjective assessment of the level of seriousness of the client’s condition.
- The assessment by another care provider of the level of seriousness of the client’s condition.

Considering the above information to determine whether you are you practicing the controlled act of psychotherapy, answer the following questions:

**5) Are you using psychotherapy to treat a client’s serious disorder of thought, cognition, mood, emotional regulation, perception or memory?**

**Answer:**  Yes  No

**6) Could your client’s judgment, insight, behaviour, communication or social functioning be seriously impaired by the disorder referred to in question 5?**

**Answer:**  Yes  No

**Note:** If you answered “yes” to questions 5 and 6 above, then you are most likely performing the controlled act of psychotherapy and **must** be registered with one of the six colleges authorized to provide the controlled act.

A full description of CRPO’s [entry-to-practice requirements](#) and the [registration application](#) process is available on CRPO’s website.

**7) Would you meet all of CRPOs entry-to-practice requirements including:**

- Have you been awarded a master’s degree in a program that has been approved by the Registration Committee or have successfully completed a program that the Registration Committee considers to be substantially equivalent?
- Have you completed 125 direct client contact hours (some or all can be completed as part of an education and training program or completed subsequently)?
- Have you completed 30 hours of clinical supervision with a supervisor who satisfies CRPO’s criteria (i.e., they are a regulated practitioner in psychotherapy in good standing with their college, who has extensive clinical experience, generally five years or more, in the practice of psychotherapy, and who has demonstrated competence in providing clinical supervision. Outside Ontario, a clinical supervisor is an experienced practitioner of psychotherapy qualified to provide clinical supervision in their jurisdiction)?

**Answer:**  Yes  No

**Note:** If you answered “yes” to questions 2 through 6 but cannot answer “yes” to question 7 (related to entry-to practice requirements), you may need to amend your practice in order to ensure that you are not engaged in unauthorized practice of the controlled act of psychotherapy.

## F. Registered Psychotherapists: Information for Ontarians

### What is psychotherapy?

Psychotherapy is primarily a talk-based therapy intended to help individuals improve mental health and well-being. Psychotherapy occurs when the Registered Psychotherapist and client enter into a psychotherapeutic relationship where both work together to bring about positive change in the client's thinking, feeling, behaviour and social functioning. Individuals usually seek psychotherapy when they have thoughts, feelings, moods and behaviours that are adversely affecting their day-to-day lives, relationships and the ability to enjoy life.

### What is a controlled act?

Under Ontario law, certain acts, referred to as "controlled acts," may only be performed by authorized health-care professionals. The [Regulated Health Professions Act, 1991](#) governs those procedures or activities that may pose a risk to the public if not performed by a qualified practitioner. Examples of restricted activities include performing invasive procedures below the skin, prescribing drugs, ordering X-rays and administering anesthesia.

The controlled act of psychotherapy is a smaller aspect of the overall practice of psychotherapy. In legislation, it is defined as follows: "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 judgment, insight, behaviour, communication or social functioning."

### Who can provide the controlled act of psychotherapy?

In Ontario, six regulated professions are authorized to provide the controlled act of psychotherapy. In addition to Registered Psychotherapists, these are: practitioners who are registered with the College of Psychologists of Ontario, Ontario College of Social Workers and Social Service Workers, College of Nurses of Ontario, College of Occupational Therapists of Ontario, and College of Physicians and Surgeons of Ontario.

### What elements should I expect to be able to observe in my work with a Registered Psychotherapist?

- A conversation about the **benefits, risks and expected outcome(s)** of the psychotherapy and the opportunity to give their **informed consent**.
- A clearly communicated, mutually agreed upon **goal** or **plan** for the psychotherapy.
- Each therapy session has a **clear beginning** and a **clear end** where problems or concerns are presented and discussed and outcomes are explored.
- The Registered Psychotherapist demonstrates the appropriate use of **boundaries** to create a **safe and confidential environment**.

### What elements make up an effective psychotherapeutic client-therapist relationship?

- the client's well-being is at the forefront of the relationship;
- work between the Registered Psychotherapist and the client to gather relevant information that will support the formulation of a plan for psychotherapy;

- continuous evaluation of outcomes of each session and the impact on overall treatment goal(s);
- the Registered Psychotherapist's practice of safe and effective use of self; and
- the Registered Psychotherapist adheres to the standards of practice for the profession.

**What kinds of therapies should I expect a Registered Psychotherapist to be competent to use?**

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

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