



**Prince Edward Island
Counselling Association**

Contact Information:

Sandi Duffield-King,
32 Greenwood Drive,
Charlottetown, PEI C1C 1J3
675-7480 PH; sdking@edu.pe.ca

PEICA - PCC

(Psychotherapist Counselling Chapter - name under review)

**Position Paper
The Pursuit of Regulation**

February 5, 2006

Respectfully Submitted By:

PEICA Executive Team

President: Sandi Duffield-King

Vice-President: Judy MacDougall

Treasurer: Maribeth Noonan

Secretary: Joan Murray

PR Chair: Carolyn Black

Ex-Officio Members:

Dept. of Edu. Counselling Specialist:

June Sanderson

TRI-PD Chair: Deborah Wood-Salter

Atlantic Chapter Director: Daphne Campbell

CCA Director to PEI:

Corrine Hendriken-Eldershaw

PEICA-PCC Executive Team

President: Sandi Duffield-King

Vice-President: Corrine Hendriken-Eldershaw

Treasurer: Deborah Wood-Salter

Secretary: Greg Davis

Regulation Committee Members:

Carolyn Black

Marion Clorey

Table of Contents

Introduction:	Page 4 of 20
----------------------------	------------------------------

Questions and Response:	
1. The party must demonstrate need for the legislation from the perspective of public protection - what is the significant risk to the public (risk in the sense of demonstrable harm).	Page 5 of 20
2. High public need or demand for the service, and are the services firmly established and effective (are there established educational standards and evaluations - such as a national exam?).	Page 8 of 20
3. Sufficiency of supervision, if required, and whether professionals practice independently based on standard skills, knowledge, judgment and ethical conduct.	Page 12 of 20
4. Whether any other regulatory body or legislation already applies to the individuals on whose behalf this request is being made (in this case, social workers, and psychologists, for example, are already regulated under other legislation).	Page 14 of 20
5. Impact on other occupations - how to reconcile any overlap. Also, who may already be working as a counsellor in some capacity, but would be left out by your legislation because they don't meet the standard? Are their services needed by the public?	Page 15 of 20
6. Precedent - Legislation governing this group in other Canadian jurisdictions.	Page 15 of 20
7. Membership size, and proof that members would be willing and able to contribute, in terms of costs, efforts and skills to carry out the work of a governing body, both to regulate and discipline members, as well as to establish a separate member interest association.	Page 16 of 20
8. Ability by the group to favour public interest above the group's self - interest.	Page 17 of 20
9. Likelihood of compliance - willingness / ability of members to meet the standards set out and submit to the disciplinary processes.	Page 19 of 20

Appendixes	Page 20 of 20
Appendix I: CCA Code of Ethics	Page 20 of 20
Appendix II: CCA Standards of Practice	Page 20 of 20
Appendix III: National Entry Level Competencies for Counselling Therapists	Page 20 of 20
Appendix IV: PEICA-PCC Constitution and By-Laws	Page 20 of 20
Appendix V: CCA Chapters	Page 20 of 20

Introduction:

In the spring of 2006 representatives from PEICA and PEICA-PCC met with the Minister of Health, the Deputy Minister and the Department's Solicitor. As a follow up to that meeting, on May 31, 2006 the solicitor sent a list of questions required to be answered for regulation. **Some of the issues relating to these questions presented by the solicitor on June 14, 2006 are:**

"In terms of the criteria, we believe that, based on our information to date, the following criteria have not been met:

#1 - clear need for the legislation (not only is the department not convinced that there is a clear need for the requested legislation, this would also seem to be borne out by the fact that no other jurisdiction (other than Quebec and their limited legislation) has moved to legislate professional counselling;

concerning #3, we have not received enough information yet on this ground - is there supervision for folks just starting out? Are there standard skills, knowledge, judgment and ethical conduct that would cover all to be licensed under your Act, given the broad range of counselling you would want your legislation to cover?;

#4 - there is already legislation covering social workers and psychologists - would you be including them in the coverage of your statute if they are working as counsellors?

#5) there is overlap with other occupations - this is in fact part of the reason why other jurisdictions have declined a similar request - further, we were advised that this is why in B.C. there were difficulties in developing the competencies, and a splinter group formed to work on competencies for all of the other occupations doing counselling that would not be covered by the proposed legislation out there;

#6) as previously mentioned, other jurisdictions have rejected similar requests.

And we have not really rec'd enough information concerning criteria 7, 8 and 9."

The fundamental argument for regulation is that its absence puts the public at risk of harm. This is imminently the case with counselling, as has been demonstrated over and over in many jurisdictions.

By definition the success of personal counselling relies on a trusting professional relationship between an often vulnerable client and their therapist. The possibilities for pervasive and irreversible harm are ever-present in a therapeutic counselling practice.

The following addresses each question and these concerns.

1. The party must demonstrate need for the legislation from the perspective of public protection - what is the significant risk to the public (risk in the sense of demonstrable harm).

Response: Timely access to professional mental health services is an issue for the residents of Prince Edward Island. Public services, while excellent, are not able to meet the demands in a timely fashion. Wait times increase resulting in individuals suffering from lack of, delayed, or reduced service with the potential outcome of increased harm and decreased quality of life for self and others.

Since the public service is not adequate to meet the demand, the general public must frequently seek the services of mental health professionals in private practice or through community agencies. The general public can not readily discern between the range of persons offering mental health services. In Prince Edward Island, there is no legislation in place to prevent someone with a few non-credit courses to market themselves as a mental health professional. On the other hand, there are individuals who have acquired therapeutic counselling degrees at a "Masters" Level from accredited institutions with supervised practicum who are currently not recognized by this province through statutory regulation.

CCA's (Canadian Counselling Association) voluntary CCC (Certified Canadian Counsellor) process with all the elements of a voluntary regulatory process currently offers protection to the public in the event that a client or other individual has concerns about unethical practice by a CCC. The matter can be reported and investigated by the Ethics Committee of the CCA. This factor alone should prompt the government to enact statutory regulatory legislation as it ensures protection to the general public not guaranteed under the current system. Statutory regulatory legislation would allow the public to identify individuals who have gone through the rigorous process and are qualified for national certification with the Canadian Counselling Association.

Vulnerable persons accessing these services may be putting themselves at a significant risk. The failure to protect the public from this potential is wrong. Persons in this situation are at risk for increased mental health issues and decreased quality of life and productivity. In extreme cases such practices could result in costly hospitalization or worse still suicide and/or self harming behaviours.

The Ontario government has passed first reading toward legislation around counselling practices of psychotherapists and mental health therapist. A recently reviewed document by that government states that "the primary objectives, (of such legislation), include the protection of the public from incompetent and unqualified individuals and the promotion of informed consumer choice through a system of scope of practice statements."

SCHEDULE Q: PSYCHOTHERAPY ACT, 2006

The Psychotherapy Act, 2006, promotes the principles of public protection and patient safety, informed choice relating to health care practitioners, quality health care services and accountability for practitioners within the profession of psychotherapy Psychotherapy is currently an unregulated profession in Ontario; no restrictions exist about who may call

themselves a psychotherapist or who may practice the profession. Ontarians receiving psychotherapy services at present have no reliable way of knowing which practitioners possess the appropriate competencies and training required for safe practice.

The Psychotherapy Act, 2006, creates a new regulated health profession, the profession of psychotherapy, and a new self-financing, non-profit regulatory body, the College of Psychotherapists of Ontario, with the statutory authority to govern members of the profession. Regulatory Colleges such as this one serve the public interest by:

- Regulating the practice of the profession and governing their members in accordance with the legislation;*
- Setting registration requirements for entry to practice into the profession;*
- Developing and maintaining quality assurance programs that promote the continuing competence of members;*
- Developing standards of practice that establish how members do their jobs in an effective, safe and ethical manner;*
- Assisting individuals to exercise their rights under the Regulated Health Professions Act, 1991 (RHPA);*
- Implementing complaints and discipline processes; and*
- Fulfilling any other objects relating to human health care that the College council considers desirable.*

The new Act is established under the RHPA whose primary objectives include the protection of the public from incompetent and unqualified individuals and the promotion of informed consumer choice through a system of scope of practice statements, controlled acts, protected titles, standards of practice and complaints and discipline processes. This new Act, like the existing health profession-specific Acts, establishes the College with a governing Council comprising a majority of elected professional members and a minority of publicly appointed individuals. Like the others, the new Act deems the Health Professions Procedural Code, which is Schedule 2 to the RHPA, to be part of the Act. Under the new Act, the scope of practice of psychotherapy is the assessment and treatment of cognitive, emotional or behavioural disturbances by psychotherapeutic means, delivered through a therapeutic relationship based primarily on verbal or nonverbal communication. The new Act restricts the use of the titles, “psychotherapist” and “Registered Mental Health Therapist” to members of the College. No person other than a member may hold themselves out as qualified to practice in Ontario as a psychotherapist or registered mental health therapist. Anyone who contravenes these requirements is guilty of an offence and on conviction is liable to a maximum fine of \$25,000 for a first offence and a maximum of \$50,000 for a subsequent offence. The new Act also authorizes members of the College to perform a new controlled act (an activity that when performed by an unqualified practitioner may put the public at substantial risk and are therefore “controlled” for use by legislation) of treatment “by means of psychotherapy technique delivered through a therapeutic relationship, an individual’s serious disorder of thought, cognition, mood, emotional regulation, perception or memory that may seriously impair the individual’s judgement, insight, behaviour, communication or social functioning. The Bill amends subsection 27(2) of the Regulated

Health Professions Act, 1991 to include the new controlled act. The College Council, with Ministerial review and the approval of the Lieutenant Governor in Council, may make regulations under the new Act:

- (a) prescribing the therapies involving the practice of the new profession;*
- (b) governing the use of prescribed therapies*
- (c) prohibiting the use of prescribed therapies in the course of practicing the new profession.*

Transitional provisions in the new Act provide for the appointment of the College Registrar and Council by the Lieutenant Governor in Council. The transitional Council and the Registrar may do anything that is necessary or advisable for the implementation of the Act and anything that they could do once the Act is in force. During the transition period, the Minister may review the transitional Council's activities, require it to make, amend or revoke a regulation and do anything that is necessary or advisable to carry out the intent of the new Act and the RHPA. After the transition period, the transitional Council shall be the College Council if it is constituted in accordance with the Act, or if it is not, it shall be deemed to be the Council until a new Council is constituted in accordance with the provisions of the Act.

The Bill also amends other Acts, including the following:

- (a) the Medicine Act, 1991 to authorize members of the College of Physicians and Surgeons of Ontario to perform the new controlled act of "Treating, by means of psychotherapy technique delivered through a therapeutic relationship, an individual's serious disorder of thought, cognition, mood, emotional regulation, perception or memory that may seriously impair the individual's judgement, insight, behaviour, communication or social functioning."*
- (b) the Psychology Act, 1991 to authorize members of the College of Psychologists of Ontario to perform the new controlled act of Treating, by means of psychotherapy technique delivered through a therapeutic relationship, an individual's serious disorder of thought, cognition, mood, emotional regulation, perception or memory that may seriously impair the individual's judgement, insight, behaviour, communication or social functioning."*

Given that the practice of psychotherapy often takes place in private, unsupervised settings with emotionally vulnerable patients/clients, it is widely agreed that there is a significant risk of harm inherent in the practice of psychotherapy. While consequences of substandard or negligent practice may not always be obvious, survey data, professional disciplinary cases and court actions, together with the views of regulators and practitioners in the field based on experience, reveal that incidents of abusive and negligent behaviour with serious consequences for patients or clients, and sometimes third parties, occur in the context of psychotherapy. The risk of harm is one of the main justifications cited by other jurisdictions for regulating the practice of psychotherapy.

There are two major sources of potential harm for patients/clients receiving psychotherapy:

- *The nature of the relationship between patient/client and therapist; and*

- *The failure to properly assess or implement specific psychotherapeutic interventions.*

Examples of harm arising from the therapeutic relationship include:

- *Exploitation and/or abuse of the patient/client;*
- *Engaging in sexual contact or any sexual relationship with the patient/client;*
- *Breaching the patient's/client's privacy/confidentiality through unsanctioned disclosure of clinical information*

Examples of harm arising from failure to properly assess or implement care include:

- *Employing inappropriate treatment approaches, thereby causing delay in appropriate management or resolution of the problem, and possible exacerbation of the patient's/client's condition; and*
- *Failure to identify physical or mental health issues requiring other forms of treatment.*

The nature of psychotherapy practice, particularly the intense client-therapist relationship, brings with it special concerns, for example transference (the redirection of feelings and desires to a new object, sometimes the psychotherapist). In addition, an inherent power imbalance exists in the patient-therapist relationship, one that may be manipulated and exploited by an unscrupulous practitioner dealing with an emotionally fragile or vulnerable client. Throughout Ontario's HPRAC's consultation process, a large majority of stakeholders clearly stated that there is risk of harm associated with the practice of psychotherapy. This conclusion was confirmed by jurisdictional reviews.

In particular, two groups were identified as posing an increased risk of harm to patients or clients:

- *Unregulated practitioners engaged in private individual practices, especially those without professional affiliation, supervision, or a circle of peers; and*
- *Regulated professionals who practice psychotherapy without formal training in psychotherapy*

A similar approach in this province is necessary.

2. High public need or demand for the service, and are the services firmly established and effective (are there established educational standards and evaluations - such as a national exam?).

To respond to this question requires sharing the mission and purpose of the Canadian Counselling Association (CCA) which will ultimately result in the need and demand for therapeutic counsellors. Educational standards are duly noted through the following: CCA Certification Program and CCC Designation, Continuing Education Units (CEU), Liability Insurance, Ethics (Code of Ethics, Standards of Practice and Ethics Casebook) and Accreditation Standards for counsellor education programs.

CCA Mission:

The Canadian Counselling Association (CCA) is a national and bilingual organization dedicated to the enhancement of the counselling profession in Canada.

In striving to fulfill this mandate the CCA promotes policies and practices which support the provision of accessible, competent, and accountable counselling services throughout the human lifespan, and in a manner sensitive to the pluralistic nature of society. CCA strives to understand the needs of the diverse community of counsellors in Canada and aspires to being inclusive in its membership and to being a strong voice for the promotion of counselling.

Purpose of CCA:

The Canadian Counselling Association is a national association of professionally trained counsellors engaged in the helping professions. Its members work in many diverse fields of education, employment and career development, social work, business, industry, mental health, public service agencies, government and private practice. CCA presently has approximately 2,460 members across the country.

The association has provided leadership and has been involved in the promotion of therapeutic counselling since 1965. It nurtures formal and informal links with similar organizations in Canada and internationally. It offers the opportunity for its members to be in contact with other counsellors which are active in a variety of work settings, world wide, in order to exchange ideas and best practices, provide mutual support and promote professional development. In addition, CCA presently has ten Chapters http://www.ccacc.ca/e_Chapters.html (See Appendix 5) representing specialized interest groups of counsellors from all parts of Canada.

The Canadian Counselling Association is continually upgrading its services to its therapeutic counsellor members. This facilitates their professional involvement and development, while promoting quality service for their clients.

CCA Certification Program and CCC Designation:

The purpose of the CCA counsellor certification program is to identify to the public those therapeutic counsellors who, through a process of credential evaluation, are judged qualified to provide counselling services. Besides setting standards of professional preparation, this program also mandates expectations for continuing education, requires adherence to a formal code of ethics, and provides for advising and disciplining those members on matters of professional conduct.

CCA is careful to distinguish between membership only and certification. This is for the benefit of the public so that membership alone is not misunderstood as representing an evaluation of a member's qualification to practice which, in fact, it is not. Therefore, members are not permitted to place CCA membership on business cards or to use it in other ways which might lead the public to mistakenly equate membership with certification. To accomplish this goal CCA places the following declaration on its application form:

Please note that membership in CCA does not qualify you as a certified therapeutic counsellor, mention of membership is not to be utilized on business cards, or in other ways intended to advertise a member's qualifications as a counsellor. Should you wish to use a qualification designation from CCA, you must seek certification, which will permit the use of the letters CCC as the appropriate statement about qualifications to practice counselling.

Only therapeutic counsellors who are certified by the Canadian Counselling Association are permitted to use the protected title Canadian Certified Counsellor and/or the acronym 'CCC'. They also receive a certificate which their clients should expect to see displayed at the place of work.

Continuing Education Units: CEU

Counsellor certification from CCA is for a period of three years only but it can be renewed upon application providing the requirements for continuing education are met and the member remains in good standing in CCA. To assist all its members with the need for continuing education, CCA has established a national continuing education program for (therapeutic) counsellors in Canada. This service adjudicates a wide variety of professional events, including: workshops, conferences, institutes and courses, and grants credits for those approved for continuing education. It includes keeping a continuous record of the acquisition of these credits and issuing to members, and on a member's request to others, an official continuing education transcript.

Liability Insurance

CCA members who meet all the requirements for certification are eligible to obtain liability insurance. The insurance is available through a Group Plan, from CCA's broker of choice. This national company has considerable experience with professional liability insurance and provides insurance services for a number of other professions in Canada.

ETHICS: Code of Ethics (See Appendix I or go to link), Standards of Practice and Ethics Casebook

*CCA has demonstrated its firm commitment to the establishment and maintenance of high standards of ethical conduct for its members. In 1999 the Association adopted a third revised edition of its **Code of Ethics** <http://www.ccacc.ca/ECOEJAN07.pdf> and most recently 2006 adopted a fourth revised edition since its inception thirty-seven years ago. All members receive a copy of this Code upon achieving membership and sign a commitment to strive to understand and adhere to the ethical expectations contained in it. In 2001 CCA adopted new **Standards of Practice** for (therapeutic) Counsellors. This document provides direction and guidelines to enable its members to conduct themselves in a professional manner consistent with the **Code of Ethics**. It is intended as further public protection by establishing a set of expectations for the provision of quality counselling services and for the maintenance of counsellor accountability.*

*In addition, CCA published in 2006 a revised and greatly expanded third edition of its **Ethics Casebook**. This casebook contains essays on a wide variety of ethical issues addressed in the Code and, through the provision of case examples, it assists members in applying the*

ethical standards to their daily counselling practice. CCA also offers, and supports the delivery of, workshops, conference presentations, and other educational events, on ethical and legal issues in the practice of counselling.

The Standing Ethics Committee is dedicated to advising the CCA Board on all matters pertaining to the maintenance and evaluation of ethical standards. It also serves in a consultative role to CCA members. They are invited to consult the Committee should they be challenged by an ethical dilemma or feel the need to seek clarification of some aspect of the Code of Ethics. The Ethics Committee also manages the complaints and disciplinary procedures of CCA. This includes receiving and investigating all complaints and proceeding with sanctions should this be warranted. The CCA affiliate in Nova Scotia, the Nova Scotia Association of Counselling Therapists, performs this function for CCA members who are also 'Registered Counselling Therapists' (RCT - voluntary at this point in time) in that Province. Other CCA members in Nova Scotia, however, are the responsibility of the National Ethics Committee.

Code of Ethics:

You will find a PDF copy of our CCA Code of Ethics on the CCA website at the following address: <http://www.ccacc.ca/ECOEJAN07.pdf> You can download PDF format from this site.

Standards of Practice:

Hard copy format only. **Appendix II** is the order form. You will also find the Standards of Practice order form on our CCA website at <http://www.ccacc.ca/documents/PubOrderForm.doc>.

Ethics Casebook:

The CCA Ethics Casebook titled, "**Counselling Ethics: Issues and Case**" is available for CCA members only.

Accreditation Standards:

In another landmark decision, CCA, in 2002 adopted a set of standards for the accreditation of therapeutic counselling education programs in Canada. These standards include expectations with respect to the curricular, human and other resources necessary for the professional preparation of counsellors and will be managed by the CCA Accreditation Council. It is expected that many universities will seek to participate in this important new service.

Counselling Therapist Entry Level Competencies:

A BC task force established a Counselling Therapist Competency Profile (See Appendix III). This fall PEICA along with our sister organizations in New Brunswick and Nova Scotia validated these competencies. CCA is undertaking to validate them nation-wide. An outcome of this endeavour will be a national exam.

We trust this covers the response to your question regarding our established educational standards and evaluations which protects the public and ultimately results in public need and demand for the services of a professional certified counsellor. We are firmly established and effective with clear competencies for moving regulation forward.

3. Sufficiency of supervision, if required, and whether professionals practice independently based on standard skills, knowledge, judgment and ethical conduct.

Individuals with “Masters” Level therapeutic counselling degrees are eligible for certification through the Canadian Counselling Association. This certification is a rigorous process (equal to a voluntary regulatory process) ensuring the individual has completed a comprehensive course load in the therapeutic counselling field; a supervised practicum of 400 hours (including 120 hours of direct contact and involving both a practicum theory supervisor at the doctorate level and a field supervisor at the “Masters” level). A re-certification process every three years involving continuing education units insures individuals keep up to date on standards of practice. Certified Canadian Counsellors (CCC) must also abide by a Code of Ethics.

Counsellors may apply for CCC (Canadian Certified Counsellor) designation after completing a Master’s degree in counselling from an accredited higher education institution. A supervised practicum of a minimum of 120 direct client contact hours must be part of the program. As to ongoing supervision, The **CCA Code of Ethics** states (see Appendix I):

Counsellors take reasonable steps to obtain supervision and/or consultation with respect to their counselling practices and, particularly, with respect to doubts or uncertainties which may arise during their professional work". (A4 Canadian Counselling Code of Ethics).

The PEICA-PCC Constitution (see Appendix IV) states in Articles # 9 and #53(7):

Supervision of Registered Psychotherapist Candidates

9 (1) *A supervisor is a Registered Psychotherapist, or another registered mental health professional, chosen by the candidate, subject to the approval of the Registration Committee. The Registration Committee may not reject a potential supervisor based on the supervisor's preferred counselling approach, but will require that the supervisor*

(a) have a Master's level degree comparable to the Master's level counselling degree acceptable for CCC

(b) be registered in a professional mental health association governed by
(i) a Code of Ethics comparable to the PEICA-PCC Code of Ethics, and

(ii) a procedure for discipline

(2) The Registration Committee must grant approval for and register the supervisory relationship prior to the acceptance of the applicant as a Registered Psychotherapist Candidate.

(3) The supervisor will be responsible for confirming that the candidate has completed the requirements for supervised experience. The requirements are that the candidate:

(a) has completed, after the granting of the qualifying graduate degree, no less than 2000 hours of professional counselling practice;

(b) has completed within the 2000 hours specified in (a), a minimum of

- 800 hours of counselling with individuals, couples, families or groups; and
- (c) has completed a minimum of 50 contact hours between the supervisor and the candidate.
- (4) The supervisor will report once to the Registration Committee on the following points when the candidate requests Registered Psychotherapist status:**
- (a) since the authorized beginning of the supervisory relationship:**
 - (i) the number of hours of professional counselling practice completed;**
 - (ii) the number of hours of counselling with individuals, couples, families or groups completed;**
 - (iii) the number of hours of contact between the supervisor and the candidate; and**
 - (b) a pass-fail evaluation of the candidate based on adherence to the Code of Ethics and Standards of Practice of the Association.**
- (5) The relationship between the candidate and the supervisor is a confidential one except regarding adherence by the candidate to the Code of Ethics and Standards of Practice of the Association.
- (6) If the supervisor has reasonable cause to warrant a complaint against the candidate, the supervisor will follow the procedure outlined in Bylaw 61(3) and (4) for members initiating complaints, even if the supervisor is not a member.

Registration Committee

- 53 (1) There is established a Registration Committee which shall consist of at least three Registered Psychotherapist or Retired Members who were previously Registered Psychotherapist, appointed by the Board.
- (2) Three members of the Registration Committee shall be a quorum.
 - (3) The Registration Committee will evaluate the applications of all applicants for registered membership in PEICA-PCC in accordance with the membership requirements in these Bylaws.
 - (4) If in the opinion of the majority of members present at a meeting of the Registration Committee an applicant for registered membership meets the eligibility criteria prescribed by these Bylaws, the Registration Committee may
 - (a) grant the applicant admission to PEICA-PCC as a registered member in the applicable category; and
 - (b) direct the Registrar to enter that person's name, address, and membership category in the Register.
 - (5) The Registrar shall inform the applicant, in writing, of the Committee's decision.
 - (6) The Registration Committee may delegate any of its powers under this Bylaw to the Registrar as it sees fit.
 - (7) The Registration Committee will oversee the supervisory relationship of RPT Candidates by**
 - (a) granting approval of the supervisory relationship of a RPT Candidate prior to the registration of the Candidate, according to Bylaw**

9(2); and

(b) confirming that the Candidate has completed the supervised experience requirements before granting Registered Psychotherapist status to the Candidate, according to Bylaw 9 (4).

(8) The Registration Committee shall develop or modify as appropriate, subject to the approval of the Board:

(a) application forms and procedures;

(b) certificates of registration and procedures for issuance and renewal of same; and

(c) supervision forms and procedures.

In the case of individuals working within organizations such as mental health centres, family service agencies and schools settings, supervision is frequently provided by directors within these organizations and/or through consultation in a peer supervision format. CCC practitioners in private practice are encouraged to seek out supervision on their own so as to avail themselves of outside expertise.

The certification process ensures individuals have the skills and knowledge base required to carry out therapeutic counselling activities. In order to maintain certification, CCC's must also provide evidence of Continuing Education Units which keep counsellors current in their scope of practice.

In regards to the issue of judgement, ongoing supervision ensures counselling therapists have the benefit of outside expertise particularly in difficult cases. CCC's are also trained, knowledgeable and ethically required (by the CCA Code of Ethics) in the process of making appropriate referrals when clients require a more specialized service beyond the expertise of the counselling therapist.

All CCC's must agree to adhere to the CCA Code of Ethics. This code holds members to be accountable and responsible and thereby protects the public whom they serve.

4. Whether any other regulatory body or legislation already applies to the individuals on whose behalf this request is being made (in this case, social workers, and psychologists, for example, are already regulated under other legislation).

Response: Three decades ago, the State of Virginia, took on this responsibility and established the first statute to regulate counselling separate from psychology. Today, only Nevada and California have not implemented such responsible, protective legislation. Quebec also established legislation; BC and NS are deliberating on it; and Ontario has just passed first reading on Bill 171, Schedule Q. As a result of the National Symposium on Counsellor Regulation (2005) statutory regulation became a pan-Canadian issue.

Statutory accountability, within a context of ethical and practice standards, with peer review and

discipline, including public participation maximizes public protection. The public participates in the regulatory process through representation on the Board of Directors of the therapeutic counselling regulatory body, and in the registration and complaints review processes. This all points to public assurance to accessible and accountable counsellor practitioners.

Ontario's Bill 171 is an umbrella act that incorporates many related health professions - Schedule Q is the 'Psychotherapy Act.' Perhaps a similar approach would work here.

5. Impact on other occupations - how to reconcile any overlap. Also, who may already be working as a counsellor in some capacity, but would be left out by your legislation because they don't meet the standard? Are their services needed by the public?

Two groups that need to be considered in this regard are addictions counsellors and nurse counsellors. The latter do have regulated professional training. They would not be impacted by this legislation. Addictions counsellors, on the other hand, could be impacted. If they are doing therapeutic counselling but don't meet professional counselling standards, there would need to be a 'grand-fathering in' competency based process so that the public could continue to be served.

It would also benefit the public if new addictions counsellors were required to be adequately trained to belong to a professional body. We understand that there is a trend in other maritime provinces to standardize training for addiction counsellors, requiring a BSW or a Masters in counselling or social work.

Some forms of psychotherapy require specialized training. CCA rigorously evaluates credentials and admits a 'masters equivalency' when training meets the required standards. This allows well-trained professionals to become certified with CCA and regulated under this legislation.

6. Precedent - Legislation governing this group in other Canadian jurisdictions.

Counselling associations across Canada are taking a careful look at the guidelines regarding entry-to-practice competencies required for the therapeutic counselling profession. Due to the nature of the work and responsibility to the public, it is deemed necessary that therapeutic counsellors become a regulated body. To that end, a joint Counsellor Competency Validation Survey was commissioned by Therapeutic Counselling Associations of New Brunswick, Nova Scotia, and Prince Edward Island to identify entry-to-practice competencies. We drew on work previously completed by a BC task force.

Currently there is one province (Quebec) that regulates counsellors and psychotherapists. *Quebec has four different statutes in place* for regulating various groups who provide counselling services.

In the province of Ontario, many different professional organizations are currently working with their provincial governments to bring forward statutory legislation. *Ontario is breaking ground in this area, with new legislation that has passed first reading to regulate and protect the titles 'Psychotherapists' and 'Mental Health Therapists.'* British Columbia and Nova Scotia have been negotiating with their government now for a number of years.

7. Membership size, and proof that members would be willing and able to contribute, in terms of costs, efforts and skills to carry out the work of a governing body, both to regulate and discipline members, as well as to establish a separate member interest association.

Response: The membership size for the PEICA as of February 1, 2007 is 72 members. The specific group interested in regulation is the PEICA-PCC. That group has a membership of 32. In addition CCA has 25 members in PEI that do not currently belong to PEICA. As PEICA-PCC develops the capacity to register practitioners, these practitioners are likely to join as well - making the potential PEICA-PCC membership 57.

During the PEICA's Annual General Meeting in May 2006, the membership voted that they were willing to support the movement to a regulated profession, both financially and with regard to the work that would need to be completed. They gave the Executive approval to develop a fee schedule that would support the PEICA-PCC's regulation process, including errors and omissions insurance and a registrar.

Within our current membership, there are people with experience at the National Level with regard to ethics, ethical dilemmas and disciplinary action required as a result of unethical behaviour. The PEICA uses the Code of Ethics set out by the Canadian Counselling Association as its Code of Ethics. Each Certified Canadian Counsellor, as a part of their Masters training, has completed a supervised practicum. Certified Canadian Counsellors are well educated with regard to ethical standards of practice. It is the responsibility of a PEICA and (05/19/2005) *Canadian Counselling Association Members to ensure that they are familiar with this Code of Ethics, understand its application to their professional conduct, and strive to adhere to its principles and values. Counsellors should also be familiar with other sources of information which will assist them in making informed professional decisions. These include; the laws, regulations, and policies which are professionally relevant to their working environment.*

Members are accountable to both the public and their peers and are therefore subject to the complaints and disciplinary procedures of the Canadian Counselling Association. Violations of this Code, however, do not automatically imply legal liability. Such a determination can only be made by legal and judicial proceedings. This peer review process is intended to enable the Association to advise and discipline its members in response to complaints originating either with peers or the public.

Although a Code of Ethics is essential to the maintenance of ethical integrity and accountability, it cannot be a substitute for the active process of ethical decision-making. Members increasingly confront challenging ethical demands and dilemmas in a complex and dynamic society to which a simple and direct application of this code may not be possible. Also, reasonable differences of opinion can and do exist among members with respect to how ethical principles and values should be rank-ordered when they are in conflict. Therefore, members must develop the ability and the courage to exercise a high level of ethical judgement. For these reasons, the code includes a section on ethical decision making.

In February of 2006 the PEICA established a separate interest Chapter of members that would deal with ethical complaints and disciplinary action. This group consists of members who are Certified Canadian Counsellors and also members of the PEICA-Psychotherapist Counselling Chapter (draft name). This body will regulate our profession on PEI.

8. Ability by the group to favour public interest above the group's self - interest.

Response: The basis of this point falls within the Counsellor's Code of Ethics. The beginning of the Counsellor's Code of Ethics is as follows:

Ethical Principles:

The expectations for ethical conduct as expressed in this Code are based on the following fundamental principles:

- a. respect for the dignity of persons*
- b. not wilfully harming others*
- c. integrity in relationships*
- d. responsible caring*
- e. responsibility to society*
- f. respect for self-determination"*

The CCA Code of Ethics then goes on to state the professional responsibilities of counsellors.

Professional Responsibility

A1. General Responsibility

Counsellors maintain high standards of professional competence and ethical behaviour, and recognize the need for continuing education and personal care in order to meet this responsibility.

A2. Respect for Rights

Counsellors participate in only those practices which are respectful of the legal, civic, and moral rights of others, and act to safeguard the dignity and rights of their clients, students, and research participants.

A3. Boundaries of Competence

Counsellors limit their counselling services and practices to those which are within

their professional competence by virtue of their education and professional experience, and consistent with any requirements for provincial and national credentials. They refer to other professionals, when the counselling needs of clients exceed their level of competence.

A4. Supervision and Consultation

Counsellors take reasonable steps to obtain supervision and/or consultation with respect to their counselling practices and, particularly, with respect to doubts or uncertainties which may arise during their professional work.

A5. Representation of Professional Qualifications

Counsellors claim or imply only those professional qualifications which they possess, and are responsible for correcting any known misrepresentation of their qualifications by others.

A6. Responsibility to Counsellors and other Professionals

Counsellors understand that ethical behaviour among themselves and with other professionals is expected at all time.

A7. Unethical Behaviour by Other Counsellors

Counsellors have an obligation when they have serious doubts as to the ethical behaviour of another counsellor, to seek an informal resolution with the counsellor, when feasible and appropriate. When an informal resolution is not appropriate or feasible, or is unsuccessful, counsellors report their concerns to the CCA Ethics Committee. When the counsellors are members of a CCA Affiliate organization that has agreed to manage Complaints and Disciplinary Procedures for its members, counsellors will report their concerns to the appropriate committee of the CCA Affiliate.

A8. Sexual Harassment

Counsellors do not condone or engage in sexual harassment, which is defined as deliberate or repeated verbal or written comments, gestures, or physical contacts of a sexual nature.

A9. Sensitivity to Diversity

Counsellors strive to understand and respect the diversity of their clients, including differences related to age, ethnicity, culture, gender, disability, religion, sexual orientation and social-economic status.

A10. Extension of Ethical Responsibilities

Counselling services and products provided by counsellors through classroom instruction, public lectures, demonstrations, publications, radio and television programs, computer technology and other media must meet the appropriate ethical standards of this Code of Ethics.

The responsibility of Certified Canadian Counsellors to act in a nature that complies with the CCA Code of Ethics is inherent to our training and our practice. It governs all aspects of our work. It is the responsibility of a Certified Canadian Counsellors to monitor their peers to ensure adherence to ethical behaviour. It is inherent to the Certified Canadian Counsellor's Code of Ethics to favour public interest above self - interest.

9. Likelihood of compliance - willingness / ability of members to meet the standards set out and submit to the disciplinary processes.

During the fall of 2006 the Therapeutic Counselling Associations of New Brunswick, Nova Scotia, and Prince Edward Island commissioned Dr. David Cane (Catalysis Consulting) to survey their memberships in order to validate Counselling Therapists Competencies. Dr. Cane followed the same process that was used in British Columbia. As a result the task group for Counsellor Regulation in British Columbia has developed a generic, entry-to-practice competency profile that is applicable to a broad range of counselling therapist-related professions. The Prince Edward Island Psychotherapist Counselling Chapter (PCC) used this survey to develop an entry-to-practice competency for its membership. The Counselling Therapist Competency Validation Survey was completed in the fall of 2006 with a 66% response. This gives good indication of both interest and positive likelihood of members to comply.

Further, the Prince Edward Island Psychotherapist Counselling Chapter (PCC) agreed that it would come under the standards and discipline of Canadian Counselling Association (CCA). The CCA is a national body that provides entry-to-practice guidelines that include a code of ethics, and standard level of education. A Affiliate Agreement with CCA has already been drafted. The formal signing of this agreement is planned to take place during our national President's visit to the Island in February 2007.

The decisions of the Prince Edward Island Psychotherapist Counselling Chapter (PCC) to this date have demonstrated a positive movement toward meeting standards set out by the CCA and to submit to their well established disciplinary process set forth by the CCA Ethics Committee.

Appendixes

- Appendix I:** **CCA Code of Ethics**
<http://www.ccacc.ca/ECOEJAN07.pdf>
- Appendix II:** **CCA Standards of Practice**
<http://www.ccacc.ca/documents/PubOrderForm.doc>
- Appendix III:** **National Entry Level Competencies for Counselling Therapists**
- Appendix IV:** **PEICA-PCC Constitution and By-Laws**
(The PEICA group pursuing statutory regulation and currently CCA members with the goal of registering Certified Canadian Counsellors)
- Appendix V:** **CCA Chapters**
http://www.ccacc.ca/e_Chapters.html