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Mr. Deepak Anand, MPP, Chair
Ms Tanzima Khan, Clerk
Standing Committee on Social Policy
Room 1405, Whitney Block, Queen's Park
Toronto, ON
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Dear Mr. Anand:

Re: Bill 283, Advancing Oversight and Planning in Ontario's Health System Act, 2021, Schedule 4

I am a psychologist in Ontario where I have been registered to practice since 1994. I am writing in support of the proposed Schedule 4, Psychology and Applied Behaviour Analysis Act, 2021.

In general, I think this is an important model for the regulation of newer and smaller health professions to link the new proposed regulation of the Applied Behaviour Analysts with the existing College of Psychologists of Ontario. I think is consistent with developing view of the health regulation having fewer rather than greater numbers of colleges. I applaud the government for its efforts for not only the regulation of Applied Behaviour Analysts, but also the merging of that new regulatory authority with the existing regulatory authority of the College of Psychologists.

However, as I read through the proposed legislation, I do have one particular concern and I wanted to raise it this committee because I feel this is very important. The concerns are with the first three parts of Section 8:

> ***Restricted titles***
>
> *8 (1) No person other than a member shall use the title "psychologist", "psychological associate" or "behaviour analyst", a variation or abbreviation or an equivalent in another language.*
>
> ***Representations of qualification, etc.***
>
> *(2) No person other than a member shall hold themself out as a person who is qualified to practise in Ontario as a psychologist, psychological associate or behaviour analyst or in a specialty of psychology or applied behaviour analysis.*

Same

(3) A person who is not a member contravenes subsection (2) if the person uses the word "psychology" or "psychological", an abbreviation or an equivalent in another language in any title or designation or in any description of services offered or provided.

The concern is primarily with section 8(3). I think the issue I will be raising is also present in Sections 8(1) and 8(2). However, the greatest impact of this issue can be seen in the potential interpretation of Section 8(3).

That specific piece of the legislation has been in force since the original Psychologists Registration Act, 1960 when Psychology became a regulated health profession (the first provincial regulation of Psychology in Canada). At the time, it was recognized by the Ministry of Health that, to protect the public, it was required to regulate more than just the term "psychologist" but also the term "psychological" and "psychology". These terms are so broadly used in the public domain, that the government of the time wanted to ensure that if and when these terms were used to describe the health care someone received (e.g., a "psychology report" or a "psychological assessment") that the person providing these services were appropriately trained and regulated. Therefore, when the original Psychology legislation was put place in 1960, the government recognized that public protection needed and included that in the 1960 legislation.

Moving forward to the Psychology Act, 1991, as part of the Regulated Health Professions Act implementation, the Ministry of Health transitioned that section of that original 1960 legislation into the new psychology legislation.

In the 2001 Health Professions Regulatory Advisory Council report *"Adjusting the Balance: A review of the Regulated Health Professions Act"*, several regulated health professions reported that they did not have a similar protection of the public as did Psychology. Their professions did not have similar sections in their legislations. HPRAC indicated that this Psychology legislative protection was carried over from the earlier legislation as important for Psychology. There were other sufficient legislative protections available for the other regulated health professions. As a result, HPRAC did not recommend that other professions have similar sections in their legislation. The professions made similar comments to HPRAC as part of the review for the *"Regulation of Health Professions in Ontario: new Directions"* review but HPRAC did not respond to those comments in its 2006 report.

Thus, the proposed section 8(3) is a continuation of a unique legislative protection that has been successfully protecting the citizens of Ontario for more than half a century.

While the proposed legislation line is identical to the wording in the Psychology Act, 1991, the meaning of the legislation would be different. In my opinion, this would result in a decrease in protection to the public. The difference is that the word "member" has only covered Psychology providers (Psychologists, Psychological Associates) for the last 60 years. In the proposed legislation, it would include both Psychology providers and Applied Behaviour Analysts. While we are very fortunate to have such strong professionals in our province who are Applied Behaviour

Analysts, they are *not* trained as Psychologists and the current wording would legally allow Applied Behaviour Analysts to provide, for example, "Psychological Assessments" or conduct a "Psychology Consultation".

This is not the spirit of the legislation that has been working for over 60 years. I truly do not believe that the government, in drafting this legislation, intended to have the Applied Behaviour Analysts to have access to use these terms that have had decades of restriction to protect the public.

I would suggest this section of the legislation could be easily revised to continue the current public protection. Section 4, which discusses access to Controlled Acts, repeated the previous sections in the Psychology Act, but adds the phrase *"In the course of engaging in the practice of psychology..."* at the beginning. This ensures that this section of the revised legislation is limited to only the one profession. In Section 8(3), this wording could be added in a manner such as:

> *A person who is not a member in the course of engaging in the practice of psychology contravenes subsection (2) if the person uses the word "psychology" or "psychological", an abbreviation or an equivalent in another language in any title or designation or in any description of services offered or provided.*

I also believe that sections 8(1) and 8(2) could be similarly revised in order to ensure that the relevant professions have the limited access to the relevant title. Otherwise, members of either profession may use the titles of the other profession to describe themselves and their work. For example, a child Psychologist with no training in ABA could say that they are an Applied Behaviour Analyst when working with parents who have a child in distress, even though they have not had formal ABA training. They may be able to provide care, but it would be misleading if they could use that title – even though it would now be legal under the proposed section 8(1).

There was also a response to a question at the committee meeting that suggested that the *"Scope of Practice"* in Sections 3(1) and 3(2) would not allow for people to use the terms or titles in section 8. While I recognize and value the importance of the *"Scope of Practice"* in the RHPA-related health care legislations, they do not restrict the use of specialised terms or titles that protect the public in their accessing health care. That important public protection is the reason that the legislation includes the important restrictions proposed in Section 8.

In closing, I want to thank the Committee for the ability to present this information to the committee and then provide this written information. I also want to re-iterate my support for the important and valuable changes in Schedule 4 of this legislation.

Ian R. Nicholson, Ph.D., C.Psych.