

Amendments to Registration Regulation (O. Reg 508/22)

Survey Response Data

Identification	Response	Comments
CRPO Registrant	Strongly agree	
CRPO Registrant	Strongly agree	Internationally trained professionals can offer quality and valuable mental health care to help alleviate the burden of client volume on already registered psychotherapists. I welcome and appreciate the proposed amendments.
CRPO Registrant	Strongly agree	
CRPO Registrant	Strongly agree	
CRPO Registrant	Strongly agree	It took the CRPO months to approve my application. I feel very strongly that those should not count as the 24 month period before my first registration exam, since I couldn't start my career until you approved the application. I would also add that I don't see the point in even having the first exam need to be taken within the first 24 months. Why not have to have everything completed within the first 5 years? This first exam I am being forced to take before completing my hours is just an exercise that my governing body is making me jump through. I do not feel ready, as I am trying to build a career after hustling my way through school. I think this adds undue stress to new practitioners starting their careers, and undue stress onto the CRPO who has to mark a bunch of redundant exams (much of them, I'm sure, were only taken because they were forced, not necessarily because the practitioners were ready). This leads to many probably having to retake them, which means more marking for the CRPO (which costs all of us time and money). Why not allow the practitioners to choose when they are ready within the 5 years? This governing body asks a lot of its members and does very, very little in return, including taking a very long time to approve applications, respond, and makes it very difficult to register hours. Every interaction with the CRPO is absolutely excruciating.
Stakeholder representing a service providing organization	Strongly agree	It is critical that we increase the number of qualified psychotherapists available to meet the increasing demands. I currently work in the field of pain, addiction and mental health wellness and will consider becoming an RP because of the proposed changes.
CRPO Registrant	Strongly agree	
Member of another regulated health profession	Strongly agree	
Other (please specify affiliation)	Strongly agree	
CRPO Registrant	Strongly agree	I feel instead of using word "emergency", one can use "alternate" or "special" class.
CRPO Registrant	Strongly agree	
CRPO Registrant	Strongly agree	Re: emergency class, agree that applicants do NOT need to complete the mapping tool, but do need supervision from an RP (Ontario) if they are from/ required to be from another jurisdiction ; Agree with the proposed time lines for exams to eliminate extension requests (saves a lot of time!)
Member of another regulated health profession	Strongly agree	
Psychotherapy graduate or student	Strongly agree	If support is needed, ideally participants pushing through an accredited school should be able to support this initiative (vs hold them back).
CRPO Registrant	Strongly agree	I have read through the proposed changes and everything seems reasonable to me. I appreciate the balance of public protection and flexibility, as well as consideration of how long certain tasks take.
CRPO Registrant	Strongly agree	
Other (please specify affiliation)	Strongly agree	I am a qualified clinician from France and a person of colour who sees and hears all the time of persons seeking competent clinicians and possibly someone of colour to whom they may speak. I am currently working as a French teacher all the while trying to get a sabbatical so that I may fulfil the requirements of the CRPO. I missed being grandfathered in to the CRPO because I was busy working as an elementary school teacher. I have completed the Program for the Internationally-Trained Psychologists here in Toronto.
CRPO Registrant	Strongly agree	
CRPO Registrant	Strongly agree	
CRPO Registrant	Strongly agree	
CRPO Registrant	Strongly agree	

CRPO Registrant (FR)	Strongly agree	<p>any psychotherapist in good standing in another jurisdiction is as competent as those in Ontario and therefore could participate in the emergency when necessary; this will remove barriers for clients whose language and customs require these psychotherapists from other jurisdictions. it will not be in competition with Ontario psychotherapists since each of us has our own characteristics. It will be up to the customers to choose.</p> <p>*NOTE: This submission was originally received in French and has been translated.</p>
CRPO Registrant	Agree	Mental Health is a priority in Canada, so any extra support to get more people having access to it is relevant.
CRPO Registrant	Agree	The information presented outlines a reasonably fair and ethical process to emergency increase of human resource needs within the province, with a primary goal of public protection clearly evident. Thanks, the increase in qualified practitioners is desperately needed.
CRPO Registrant	Agree	
CRPO Registrant	Agree	I agree with the changes the CRPO are suggesting. Would it be beneficial to add that currently registered RP's should be notified of the emergency and offered the opportunity to fill said roles before moving forward with registering those who may not be fully ready yet?
CRPO Registrant	Agree	<p>While I appreciate that the legislation has primarily been opened at the behest of the provincial government to amend the legislation to include the emergency class registration, there are other equally if not more important amendments to be made to the Registration Regulation, in the public interest. The Registration Regulation currently allows a person to register with the college and practice the profession (under supervision) without ever having any clinical experience. The only requirements are that the person has completed the required 360 hours of didactic coursework and written the Jurisprudence e-learning module. Unfortunately, the private training schools lobbied the transitional council vigorously to not require clinical experience to register with the College and there was no appetite for a student class of registrant. The transitional council was working to balance the public interest with a mandate from government to consider impact on the private training schools, many of whom did not have the means to provide onsite or externship practice placements for students. The argument was that it would not be in the public interest to lose these training programs, and that the playing field needed to be leveled with larger institutions like universities. What the transitional council was not able to foresee is the way this omission in the legislation would begin to shape how programs of study are offered. Moreover, that institutions such as [redacted] would take advantage of this omission in order to create a money-making diploma mill graduating hundreds of students a year who only have the 360 hours of didactic learning. Many of these graduates are unable to find placements and many if not most are not remotely ready to begin seeing clients, have inadequate supervision and do not do well on the national examination. There is a growing negative and country wide reputation that [redacted] grads are substandard and pose a risk to the public interest. Additionally other institutions see a money making opportunity by capitalizing on the high demand for mental health degrees and show interest in pursuing similar [redacted] style programs. Universities are facing increasing financial crunches and looking for ways to cut costs and increase revenues. I know of two universities who have eagerly looked at this "loophole" has a money-making endeavor. The separation of didactic teaching from clinical experience is dangerous, as it removes or severely mitigates the importance and value of integrated practice. Integrated practice requires the integration of theory into practice as the theory is being learned. Moreover, integrated practice requires an integration of clinical competence with clinical experience. Competencies cannot be taught or learned in a clinical experience vacuum. Competency development requires clinical practice. Finally, attention to the safe and effective use of self cannot be properly learned or assessed theoretically (in didactic learning alone). Students require clinical experience to better understand that interface between the personal and the professional. The continued absence of a requirement for some level of integration of theory into practice or clinical experience before becoming registered will grow exponentially as a risk to the public if left unchecked. I implore the college to take legislative and non-legislative action to address this concern before it gets more out of hand. A person should not be allowed to register as an RP(Qualifying) without having a minimum of 200 hours of supervised direct client contact. Programs should be required to ensure and demonstrate how students integrate theory into practice in real world (not role play or case study) settings. No registrant should ever be allowed to take a first attempt on the national exam without significant clinical practice. In fact, I would argue, that the step to become an RP (or perhaps independent practice) is to first accumulate 450 supervised DCC and then write the first attempt of the exam. Finally, were the College to open the legislation it should also create a "supervisor" class of registrant and strengthen the requirements to become a clinical supervisor, particularly to those who are entering the profession.</p>

		*NOTE: This submission was edited to redact the name of an institution identified by the respondent. No other changes to the submission have been made.
CRPO Registrant	Agree	
CRPO Registrant	Agree	
CRPO Registrant	Agree	Good Effort
CRPO Registrant	Agree	
CRPO Registrant	Agree	I think that the emergency designation would be a great addition. That said, I think that a class similar to this one in that it doesn't require Canadian experience should be available to people immigrating to Canada who have the education and experience in their own country to be able to do the work here. Bridging is so difficult. Make it easier for us to have more qualified professionals.
CRPO Registrant	Agree	
CRPO Registrant	Agree	
CRPO Registrant	Agree	
CRPO Registrant	Agree	This seems a fair way to onboard extra therapists in a crisis.
CRPO Registrant	Agree	
CRPO Registrant	Agree	
CRPO Registrant	Agree	
CRPO Registrant	Agree	While I think that bridging qualified, foreign trained, mental health professionals into the CRPO system is critical and would add a more rich and diverse profession to draw from, appropriate bridging programs and knowledge transfer/exchange opportunities should be explored. I also think that those coming to assist from more developed/privileged countries could be hired more specifically to cooperatively develop and support Canada's growing mental system. Temporary and immediate support from more established professions could potentially translate to developing a more robust system and new generation of Canadian mental health leaders.
CRPO Registrant	Agree	
CRPO Registrant	Agree	
CRPO Registrant	Agree	
Psychotherapy graduate or student	Agree	
CRPO Registrant	Agree	my only concern is the continuation of treatment of client's utilizing this type of emergency RP. It would appear that you have this covered with the time allotment to write exams.
Psychotherapy graduate or student	Agree	
CRPO Registrant	Agree	
CRPO Registrant	Agree	While the proposed regulations establish grounds for accelerating the number of therapists available to help the public, there is nothing in the suggested provisions to increase the number of available supervisors to take on the proposed increase in RP (Qualifying). Furthermore, the provisions for Supervisors currently requires 1,000 hours of practice, educational component and a minimum of 5 years of practice. I submit that perhaps the minimum of 5 years of practice may need to be reduced to enable more supervisors to oversee the influx of RP (Qualifying) candidates.
CRPO Registrant	Agree	I believe the amendments to the Registration Regulation are all useful to the entry of qualified practitioners entering the field during times of public crises. However, my only concern was that registrants would be exempt from providing CRPO with a mapping tool. When completing this tool, a registrant provides descriptions of the courses they took and a deeper understanding of course objectives. I recall while filling out the mapping tool, that I was encouraged to think more in-depth about how each course applied to the competencies of being a psychotherapist. The mapping tool was the second longest part of the application process and for good reason. I believe it's an important step and a safeguard that could be neglected. Perhaps registrants could provide these course descriptions after their registration has been completed, but absolutely not be exempt from them altogether. It could be an important indicator of what areas of education were missed in their programs.
CRPO Registrant	Agree	
CRPO Registrant	Agree	Thank you for all the hard work you all do in making our regulatory board an effective and useful agency for both the public members as well as for registrants. The challenges that you are faced with in managing multiple voices and offering nimble services and programs is quite astonishing. Changes like these need to be made in uncertain times and thoughtful and inquisitive people like yourselves make this

		possible. Without such a dedication and efforts, the strength of our profession would be weakened and quickly tested for integrity. Thank you from the bottom of my heart and the spirit of our industry to maintain such a rigorous world of regulations and professionalism!
CRPO Registrant	Agree	
CRPO Registrant	Agree	
CRPO Registrant	Agree	
Psychotherapy graduate or student	Agree	N/A
CRPO Registrant	Agree	
CRPO Registrant	Agree	I welcome the proposed changes. Please find my feedback/recommendations hereunder: - Using the words "Emergency Class" might give clients the idea that this therapist only deals with crisis. If an applicant is meeting this criteria: "This requirement ensures the applicant has training and experience in the profession and that they have undergone an application review in another jurisdiction. The requirements in the other jurisdiction need to be similar but not identical to CRPO's requirements, which allows for flexibility" and the applicant has completed the jurisprudence course, then I do not see why the applicant cannot register directly as "Qualifying". - I propose that if an applicant under the "Emergency Class" meets the required number of DCC and Supervision hours then upon successfully completing the exams, they can transfer to the RP category instead of the "Qualifying" category. - Strongly agree with the removal of the education mapping tool which is time consuming especially given that the applicant has not only completed a program but also been reviewed in another jurisdiction. - Strongly support that the 24 months for completion of the exams should start from the date of registration instead of completion. I wonder if the 24 months could be extended as some of my interns have expressed that their friends and them wish to complete more education/training before attempting the exams. Thank you for reading and considering my feedback!
CRPO Registrant	Agree	
CRPO Registrant	Agree	Essential to have a Masters Preparation
CRPO Registrant	Agree	.
CRPO Registrant	Agree	Clarifying questions: - What kind of supervision do RP (Emergency class) need? (i.e., only from RPs or okay to get supervision from social workers?) How often (i.e., 1 hour for every 5 hours DCC?) - any minimum hours for criteria of practicing psychotherapy in last 3 years? Will you ask for proof? - Are jurisdictions of practice outside of Canada considered? I appreciate how there is room for growth for emergency status clinicians in that they can become qualifying members of the college.
CRPO Registrant	Agree	
CRPO Registrant	Agree	Appears to be all very logical amendments.
CRPO Registrant	Agree	Clearer explanation or example of when this would be done and expectations of current registrants.
CRPO Registrant	Agree	I think that the removal of Canadian Experience should be more than just under emergency circumstances, there surely must be other ways of assessing that someone is properly trained and understand the necessary legal and cultural requirements to practice in Ontario that don't risk discrimination, as does the Canadian Experience requirement
Member of another regulated health profession	Neither agree nor disagree	The first two changes seem appropriate, however the third regarding the the completed program does not seem to address the issue of student therapists presenting themselves as fully trained Registered Psychotherapists (Qualifying) to the public despite not having completed their program. They continue to open practice and present themselves as clinicians before completing their practicum hours and this is misleading and has been negatively impacting the perception around Registered Psychotherapists (Qualifying) since the change was made to allow them to register after their coursework component was done. Apologies if I'm misunderstanding and this isn't the change that has been discussed to address the above.
CRPO Registrant	Neither agree nor disagree	Strongly agree with masters requirement, as it is a common criticism the psychotherapy/counselling profession, that not all have a masters degree, and this detracts from the credibility of the profession. I don't know that Bill 106 needs to cover psychotherapy/counselling? I think maybe just more physicians and nurses are needed in an emergency, such as given caps on medical school spots in Canada and that many physicians and nurses are choosing to leave the jurisdiction and/or country and/or profession. The change to the exam timing seems reasonable. Thank you for inviting feedback.
CRPO Registrant	Neither agree nor disagree	In theory I can understand the need for a provision like this. However, I have a 2 major concerns with this approach as it doesn't seem to address the actual issues. 1) To me there was a bottle-neck during the pandemic that prevented many new grads from taking their exam. From where I am sitting the problem exists in the way grads can take their exam during an emergency situation, rather than creating this provision. If the provision allows for exams to be taken in a different way, then perhaps that would be

		<p>useful. 2) Post-pandemic we are seeing a saturation of the market in private practitioners for 2 reasons. 1) Many in health care are leaving due to the unsafe work conditions set up by the provincial government. No personal control means worsening mental health, a private practice allows individuals to have more control; and 2) During lockdowns people went back to school to upgrade skills and now we have an influx of new grads. I am assuming this provision is set out to get the public access to more mental health care in an emergency situation. Unfortunately, this provision doesn't remove the barriers that allow the public more access to RPs. For the public, there are not enough places to obtain good mental health care, and they can't necessarily afford private practice (good care). Apps are not a solution for mental health problems. For the RPs, the government needs to find mechanisms to take care of employees in public health care (there is so much research on how to support this). This is more cost-effective than absenteeism and turnover. If the government would address this issue they could retain employees. To me these are the problems, not an emergency provision that does nothing but saturate the market further and leaves a barrier between the public and their mental health care.</p>
CRPO Registrant	Neither agree nor disagree	
CRPO Registrant	Neither agree nor disagree	
	Neither agree nor disagree	
Other (please specify affiliation)	Neither agree nor disagree	<p>I am not convinced the proposed emergency changes will both provide increased access and protect public and practitioners. Time Limits are too long to constitute emergency, And no I for given on integrity of test taking, specifically about proctoring. How is it determined the person taking the exam is the person registering? Too Many details are left out for me to give an informed decision at this time. I agree we need increased access. More details need to be specified about how to do that safety for vulnerable people.</p>
CRPO Registrant	Neither agree nor disagree	
Other (please specify affiliation)	Neither agree nor disagree	<p>Registered Psychotherapists since 2015 have paid HST. This needs to be removed firstly. We are regulated health care professionals and no other Regulated Health Care Professionals are required to pay this tax.</p>
CRPO Registrant	Neither agree nor disagree	<p>Overall, I agree with the changes to the regulation and introduction of the Emergency Class registration. I am also in agreement with the exam writing deadlines and believe it is reasonable that a first attempt should be made within two years of registration. My main concern is around education requirements and the wording around "successfully completed". I am of the belief that registrants should have completed their graduate degree in entirety before entering into the RP (Qualifying) class. However, the wording as specified in the following section: "Note: The Registration Regulation allows an applicant to apply and register in the Qualifying class once they have substantially completed their education and training if they are actively pursuing the completion of the training. The proposed amendment to the Registration Regulation will not impact this." is concerning. First, it is unclear what is meant by "substantially completed" their training. Does this mean students could apply for RP (qualifying) status before even initiating their practicum? I believe this situation is putting the public at unnecessary risk, as recently we have encountered situations where students who have not initiated practicum are opening a private practice or applying for clinical jobs using their RP (qualifying) designation, without having encountered any clinical experience in the past. Furthermore, there have been other situations where students in practicum have started private practices on the side but have not informed the practicum site, and are not seeking supervision for the work they are doing in their private practice. In other words, they may be under supervision in practicum and not under any form of supervision in their private practice, which I believe places the public in unnecessary risk. I strongly feel that in order to become registered as RP (qualifying), you should have finished the entirety of your educational program. I believe this would increase the credibility and relevance of the RP (qualifying) designation, as it would only be conferred after completing the necessary education and minimize the possibility of students initiating their own (often times unsupervised) private practices without having completed the practicum component, which is arguably the most fundamental aspects of their schooling. I would like to see this made more clear that programs should be completed in their entirety prior to having the RP (Qualifying) designation conferred. Perhaps it could be updated that students can apply during practicum, but the designation would not actually be conferred until proof of graduation is submitted? I feel this would be a much more reasonable approach that protects the public effectively.</p>
CRPO Registrant	Neither agree nor disagree	<p>While the Emergency RP designation may help to alleviate the currently immense demand for psychotherapy in Ontario, I am not convinced that more psychotherapists would help to alleviate the</p>

		<p>impact of the emergency situation induced by the COVID-19 pandemic. While I am uncertain if this is something within the CRPO's power to suggest, it is likely that the detrimental impact of the current mental health crisis could be reasonably quelled if Ontario were to add psychotherapy to the list of OHIP-funded services, and allow registered professionals other than MDs and psychiatrists (such as RPs) to bill OHIP for said services. I am ultimately indifferent to the CRPO's attempts to create a new class of RPs to help stymie the negative mental health impacts of the pandemic, as I believe that this will not allow the citizens of Ontario any greater access to quality mental health services. Ultimately, having more practitioners will do little to assist in citizens' ability to access these services, as psychotherapeutic services remain largely unaffordable to those who need it most. However, if RPs, psychologists and other capable registered professionals are granted the authority to bill OHIP for what only psychiatrists are currently permitted to provide, the mental health situation in the province would almost certainly improve dramatically. Thank you for taking the time to read and consider my feedback - I hope that my words, as a mental health practitioner, carry some influence as the CRPO decides how to best handle the untenable mental health crisis in Ontario.</p>
CRPO Registrant	Neither agree nor disagree	The changes need to be permanent. If acceptable for an emergency, they are acceptable for all applications.
CRPO Registrant	Neither agree nor disagree	While I agree with the intent, I am deeply concerned about emergency situations being times when atypical registration is implemented as these are times when people can be at their most vulnerable and therefore, most likely to be misled. Given that there is an underbelly within helping professions of people who seek to exploit their positions, I feel that emergencies are exactly when we must be most vigilant about applying standards.
CRPO Registrant	Neither agree nor disagree	They sound reasonable and we'll thought out with both public safety and practicality in mind
CRPO Registrant	Neither agree nor disagree	
CRPO Registrant	Neither agree nor disagree	
Member of another regulated health profession	Disagree	<p>I want to start with saying thank you for your attempt at making registration easier. I have a very specific viewpoint related to registration and the impact on insurance companies. My experience has been that 3 of the bigger insurance companies do not process claims unless the practitioner is a RP. This leaves a large gap in services for individuals and adds to the need for an "emergency class". I would be happy to register with 2 different colleges and pay the fees but the process for registering for an RP is difficult and requirements repetitive. I have read the "emergency class" proposal and it remains complicated and redundant specifically for the other professions who are qualified to practice psychotherapy (social workers, nurses, occupational therapists and physicians). The only significant change I see is not needing to do the mapping. The government has dictated that CRPO be the lead related to psychotherapy so I feel the responsibility falls to the CRPO to collaborate and merge the regulatory bodies to be effective for the public, not restrictive. My proposal is</p> <ol style="list-style-type: none"> 1) CRPO collaborate with the Ontario regulatory colleges whose registrants can practice so CRPO is better able to understand the education provided to their registrants. An example is the Professional Practice Jurisprudence Registered Psychotherapists document that discusses and is in alignment with what the nursing profession regulates, and the universities teach. This is basic health care provider information and completing a nursing program would educate you on most of the content. Completing the program would most certainly prepare you for research and continuing education, which would be needed to specialize in psychotherapy. 2) Take work experience such as mental health nurse, psychiatric nursing ect into consideration within the nursing profession. 3) Add the regulatory colleges allowed to practice psychotherapy and their programs to your current approved program list and add other certificate programs as necessary. 4) Continue with supervisory hours for independent practice.
CRPO Registrant	Disagree	<p>Overall, I do not understand the rationale for the proposed changes and for the inclusion of this new registration class. Insofar as I can tell from the document outlining the proposed changes, the changes will only apply to those who are already regulated under a different province or territory, and have been working within the field within the past three years. This means that within Canada, only psychotherapists currently registered in Nova Scotia, New Brunswick, PEI, and Quebec who have been working within the past three years are eligible for registration under the RP (Emergency Class). It is unclear whether psychotherapists in Alberta will be included. From my understanding of the legislation in Ontario as well as the other provinces, many if not all of the registrants from the above mentioned provinces can already take on a small number of Ontario clients. Why would a psychotherapist who is already regulated in their own province also register in Ontario? There does not seem to be an</p>

		<p>incentive or rationale to do this, as the labour mobility mentioned in the document already seems to exist. Can it reasonably be expected that a member of another College would voluntarily register with the CRPO if they're already able to take on a small number of Ontario clients? Are there repercussions for those found to be working with Ontario clients without maintaining dual registration in their home province and Ontario? Is the RP (Emergency Class) designed to encourage providers in other provinces to move to Ontario temporarily to work exclusively with Ontario clients? If so, why? Additionally, the new RP (Emergency Class) would be required to practice with supervision in the interest of public safety, but there does not appear to be a similar process for increasing the number of qualified supervisors. How are RP (Emergency Class) registrants supposed to access recognized supervision? Would they be required to have an Ontario supervisor, or would an out of province supervisor be recognized? Speaking from personal experience, it can already be difficult for Ontario registrants to access adequate supervision as waitlists for supervisors are long. Is there a plan to allow for an emergency class of supervisors or similar to account for this increased need? I am also curious why the proposed registration changes only seem to apply to current (within the past three years) psychotherapists or providers. There do not seem to be any changes to registration requirements for new psychotherapists entering the field, despite an increase in the number of applications over the past few years. For instance, in 2020 the CRPO reported over 8000 new registrants and a 24% increase in applications. In 2021, the CRPO reported over 9000 new registrants and a 38% increase in applications. Only 3% of those 2021 registrants were reported as out of province. What is the rationale for decreasing barriers to entry for out of province current therapists, but not for new registrants? Particularly those already within the province, who would have a greater understanding of various resources, community supports, health care regulations, etc in Ontario. If the rationale for changes is to allow for an emergency class of supervised, qualified psychotherapists, why pour resources into out of province applications instead of into support for new applicants and registrants? Does this not pull labour resources from within the CRPO from processing in province applications and answering questions/getting support to applicants or registrants who will be working in Ontario longterm? Finally, the proposed changes don't seem to address therapists/counsellors in unregulated provinces who are already working with clients within Ontario. Perhaps this is outside of the scope of these particular proposed changes, but it seems worth noting nevertheless. Overall, these proposed changes leave me with more questions than answers. The changes seem well intended, but to my eyes don't accurately reflect the true need or provide solutions to ongoing issues within the field, particularly for emergency situations like the COVID-19 pandemic.</p>
CRPO Registrant	Disagree	<p>Ontario has a large volume of registered psychotherapists, both qualifying and fully qualified. I see no reason to create an emergency category for this field of work. Removing barriers so the public can access these services should be the priority. For example - removing the HST on psychotherapy provided by a CRPO registrant would go a long way to making our services more accessible. I also believe that creating an emergency category poses potential risks to the general public who may not be aware of the rigorous process of becoming a full registrant of CRPO thereby decreasing the general public's risk of harm from lesser qualified individuals. If such a category is created, there should be more stringent requirements for supervision within the first few months of registration in this category.</p>
CRPO Registrant	Disagree	<p>My humble thought is this: I would want to ensure we are not compromising on the quality of psychological care. The foundations of the undergraduate degree be in psychology. Master's also in Psychology to ensure that the therapist is well versed in psychotherapeutic techniques with hands on experience.</p>
CRPO Registrant	Disagree	<p>There should continue to require a minimum proficiency in either of Canada's official languages.</p>
CRPO Registrant	Disagree	<p>Educational requirement should be acceptable at the HBA level (Psychology) as an HBSW is acceptable through the OCSWSSW to practice psychotherapy</p>
CRPO Registrant	Disagree	<p>I believe an emergency class will only dilute the requirements to become a RP.</p>
CRPO Registrant	Disagree	<p>While the need to expedite health care services in emergency situations is important, it should not be at the detriment of regulated care. Allowing people to offer therapeutic services before having completed all CRPO requirements feels negligent and potentially dangerous. Yes, people would be receiving care faster but my concern is around the quality of care they be would receiving.</p>
CRPO Registrant	Disagree	<p>Concerned that in a state of emergency ill equipped individuals will be moved as a registered psychotherapist which will cause harm to the profession and individuals of the public. For members of the public it could cause greater difficulty during an emergency which may prevent them from seeking therapy in the future. Concerned the information submitted to be approved my CRPO will never be reviewed due to the large amount of applicants.</p>
CRPO Registrant	Disagree	<p>I agree with some parts and not others. Thanks!</p>

CRPO Registrant	Strongly disagree	Psychotherapy is not "emergency" or crisis services - it is, by definition, longer-term services in order to address "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 (RHPA 1991)." That simply cannot be done in a provision of emergency or crisis services that by definition are short-term.
Psychotherapy client	Strongly disagree	Having more therapist will not help with the mental health crisis - an increasing in funding to have access to these services will
Stakeholder representing a service providing organization	Strongly disagree	The issue of access to mental health care is not due to a lack of mental health professionals, it's due to a lack of mental health funding and coverage. Further funding needs to be provided to improve financial access to mental health services.
Psychotherapy client	Strongly disagree	
CRPO Registrant	Strongly disagree	We must uphold the standard of therapy the CRPO has set - that means no one can be rushed through the system. The requirements are fair, and all current registrants have gotten through. Especially for an emergency class, the individuals who respond should be highly trained, highly skilled, and not just individuals who have been rushed through. This will be damaging for the client, for psychotherapists in general, and to the college.
CRPO Registrant	Strongly disagree	
CRPO Registrant	Strongly disagree	
CRPO Registrant	Strongly disagree	
CRPO Registrant	Strongly disagree	The Profession of Psychotherapy is already greatly diminished in its' standing as compared to persons of equivalent educational and professional qualifications, for example dentistry. The profession is sadly underpaid compared to that of similar standards. There is absolutely no shortage of professional psychotherapists in Ontario, in fact there is now a plethora of under-qualified persons' offering service as counsellors through third party services. It is difficult for a private practitioner already for overhead. The public information about what a psychotherapist needs to improve as does the coverage by insurance providers through this better understanding. For example Greensield often allows coverage for counselors but not psychotherapists, the Police Commissioner "improved" OPP coverage by only allowing psychotherapists supervised by psychologist but expanding one contract with an EAP. If the standards of language and education for a Registered Psychotherapist are lowered, so will our profession be diminished, the ability to practice by those already and fully earned as RP's and you are making way for more 3rd parties to control the services provided through cheaper, more puppy-milled services of therapists new and willing to accept cheaper rates. It is abhorrent that is what is happening to health care here. The standards of those entering the practice need to be stringent and upheld, not diminishing our standards to meet those of developing countries. There is no real shortage at all. The shortage is in the integrity to maintain the profession at a high standard thereby encouraging better coverage. 8 years (16 academic semesters) of University warrants this. The solution I believe is to implore the province to cover properly registered and insured Registered Psychotherapists.
CRPO Registrant	Strongly disagree	It looks like the emergency class amendments are intended to increase capacity by compromising the quality of care that psychotherapists should provide. It's even more important to maintain that care, as shown by meeting the minimum registration/test/ exam criteria in emergency settings. I think the proposed changes have the potential to harm the public create damage to the regulated profession.
CRPO Registrant	Strongly disagree	I think the notion of an emergency class of registration poses undue risks to the public
CRPO Registrant	Strongly disagree	
Stakeholder representing a service providing organization	Strongly disagree	
CRPO Registrant	Strongly disagree	
CRPO Registrant	Strongly disagree	Given that there are now more and more Canadians who are seeking the RP status (it has become a popular program), I believe that there are many such Canadian RPs who don't yet have a full practice. Yet, they have invested long hours training and large sums of money to educate themselves. I wonder why the government is suggesting the implementation of a new 'Emergency RP' status, if there are many RPs who are still trying to build their practice, and who are not yet being fully utilized. RPs are professionals who, like other professionals, deserve to be compensated fairly. Is the government willing to provide programming that is government sponsored, so that the public can avail themselves of services, yet where the RP is being paid competitively? I am not sure why there is the belief that there are not enough practitioners. My understanding is that there is a lack of psychiatrists who can diagnose and prescribe - this is where there is a real shortage of services. I am confident that there are sufficient nos. of Canadian RPs who would be very pleased to gain more clients so as to consistently fill their roster. Perhaps if the

		<p>government funded such services with competitive pay to Canadian practitioners (e.g. have it covered by OHIP), then those in need of mental health care services who lack the funds to pay for it privately, would be able to receive care by qualified Canadians. Are other regulatory bodies (eg. social workers, etc.), in addition to the CRPO, considering reducing their requirements to obtain status as a professional practitioner? Does the government intend to utilize these "Emergency status RPs" as a lower paid practitioner, so that Canadian RP practitioners become pressured to lower their fees, or to lose their client base?</p>
CRPO Registrant	Strongly disagree	<p>Ontario is well saturated with psychotherapists. There are already difficulties getting insurance companies on board. Programs are churning out grads at an alarming rate. There is not enough work, we are not paid enough in agencies. We do not need a mechanism to fast track new registrants. We need advocacy from you.</p>