



PRESIDENT'S ANNUAL REPORT

2006

2006 PRESIDENT'S REPORT

The 2006 Annual Report has been prepared with contributions by the Ontario Psychological Association President, Dr. Jack Ferrari, the Executive Director, Dr. Ruth Berman, Chairs of Committees and Task Forces, alliance and liaison representatives, and the staff of Central Office.

The report reviews the Association's activities, projects, and accomplishments since the previous Annual General Meeting and in accordance with the by-laws, contains the views of the President on the state of the Association's affairs.

The Report is tabled for acceptance at the 2007 Annual General Meeting to be held on February 21, 2007 in conjunction with the Association's Annual General Meeting at the Renaissance Toronto Airport Hotel.

BOARD OF DIRECTORS

In 2006-2007, The Association directed its energies at establishing and strengthening community partnerships, as well as enhancing communication with members. The Association was led in these efforts by an Executive of **Drs. Mary Broga** (Financial Officer), **Jack Ferrari** (President), **Jonathan Golden**, Community, Family and Children's Services Practice Area Director, **Joyce Isbitsky**, Thunder Bay-Sudbury Regional Director, **Cheryl Pohlman**, Education Practice Area Director, and **Douglas Saunders** (Past-President). Other elected Board members who were part of the 2006 leadership team were **Margaret Weiser**, Windsor-London Regional Director, **Andrew Matthew**, Director-at-Large, **Amber Paterson**, Director-at-Large, **Maria Kokai**, Director-At-Large, **Connie Kushnir**, Toronto Regional Director, **Christina Lee**, Independent Practice Area Director, **Lewis Leiken**, Ottawa-Kingston Regional Director, **Vincent Lo**, Health Practice Area Director, **Keith McFarlane**, Justice Practice Area Director, and **Diana Velikonja**, Kitchener-Hamilton Regional Director. **Drs. Mario Cappelli, Kate Hays, and Ruth Berman** were ex-officio members. The Association's administrative officer, **Ms. Carla Mardonet**, served as recording secretary for the Board meetings.

The Board of Directors met on five occasions during the past year. Board meetings were held on April 7, June 16, September 29, December 1, 2006; and February 21, 2007. New Board members were provided with orientation at the April meeting, and participated in planning and review of goals and priorities. Progress in achieving previous priorities was evaluated, leading to modifications and revisions as necessary. Overall, the Board continued to endorse the following priorities.

I Strengthen and build the Association : continue to define the roles of practice-area and regional representatives; enhance section and committee accountability; continue to define the involvement of Early Career Psychologists (ECPs), enhance communication with the membership, especially via improved website.

II Membership recruitment and retention: establish a taskforce to study Membership Recruitment and Retention issues, in the light of ongoing challenges in these areas: enhance visibility of the organization via such initiatives as the Ministry of Education project; initiate projects aimed at positioning psychology in the health care field, such as legislative changes to hospital privileges; establishment of a task force to consider prescription privileges; improved liaison with groups such as the Hospital Psychology Association of Ontario, the Chief Psychologists group in Education.

III Strengthen public education (enhanced profile and visibility for Public Education Committee; greater support for regional associations of members throughout Ontario; expanding access and utilization of available resources, including Association's lending library system; actively supporting members' involvement in public education events; enhancing professional psychology's profile in Ontario; working with CPA, CPAP, and other provincial PAs to develop greater national profile for professional psychology).

IV Professional advocacy issues (greater member participation in advocacy initiatives; develop and implement professional advocacy strategies for provincial Ministries; co-ordinate professional response to Auto Insurance changes; follow-up on the OPA Ministry of Education working group ; explore new initiatives with the Ministry of Child and Youth Services; follow-up on the role of psychology in interdisciplinary Primary Health Care initiatives; monitor the WSIB Programs of Care; work with CPA, and other provincial Associations towards developing national advocacy capability).

This year's financial report, prepared by Dr. Mary Broga, Financial Officer, outlines a budget for 2006 that was approved by the Association's Board of Directors. Revenues have accrued from the Ministry of Education project, but the Board was cautious about any assumption that such revenue flow could be maintained, and noted that our main source of revenue will continue to be membership. The graduated membership fee structure for Early Career Psychologists (ECPs) will be monitored and reviewed, once trends have been established—it is as yet unclear what effect this initiative has had on revenue and membership recruitment and retention.

During the past year, the Association has continued to be actively working on behalf of the membership in a number of areas, some ongoing, some new. The following list provides a range of examples of areas and issues tackled by the OPA leadership team in 2006:

- 1 Partnered with the Ministry of Education on a project to provide assessments to students in early grades in Ontario schools, in order to reduce waiting times for assessments. Partnered with other professional groups, such as the Associations of Speech Pathologists and Occupational Therapists, on this endeavour.

- 2 Continued to communicate on Psychology's behalf with HPRAC and the Ministry of Health and Long Term Care on proposed changes to the RHPA. Maintained Ontario professional psychology's Disaster Response Network; maintained a partnership agreement with the Emergency Management Unit of the Ontario Ministry of Health and Long Term Care to provide a provincial Support Line, staffed by psychology volunteers offering crisis support and information on access to community mental health resources for individuals affected by disasters.
- 3 Advocated with the Ministry of Health for the inclusion of psychologists in new province-wide health initiatives, such as LHIN committees, and Primary Healthcare (Family Health) Teams.
- 4 Continued to lobby to develop working groups and new initiatives with the Ministry of Children and Youth Services in addressing issues such as implementation of effective evaluation tools; the development of a long-term provincial strategy policy framework to integrate child and youth mental health services; and the importance of psychology in the incorporation of family-focused, culturally competent, evidence-based and developmentally appropriate services.
- 5 Finalized the new Policies and Procedures manual; continued to develop a comprehensive Fees and Billings Guidelines document.
- 6 Maintained the Early Career Psychologist position within the leadership of the Association; moving to make the position a voting position on the Board.
- 7 Launched an enhanced Association website; expanding members' web-based services to provide more timely and convenient access to important information regarding the profession, and improve the Association's administrative functioning for the staff and members.
- 8 Conducted regular consultation meetings with the College of Psychologists of Ontario to advocate for members' interests in relation to new College initiatives.
- 9 Provided office space, and maintained liaison, with the National Advocacy Coordinator of CPAP, Natasha Teoli, in order to co-ordinate public education efforts.
- 10 Continued to coordinate the presence of professional psychologists in the WSIB's development of Programs of Care, and supported the efforts of the Auto Insurance Taskforce on behalf of members.
- 11 Continued work toward establishing formal Human Resources processes for staff of the organization.

EXECUTIVE COMMITTEE

The Executive Committee is responsible for coordinating and implementing the Board of Directors' organizational priorities and objectives; they work collaboratively with the Board of Directors, staff, committees and task forces to achieve these objectives.

In 2006-7, the Executive Committee met on five occasions: In March, May, September, November 2006, and January 2007. Executive members also participated in between-meeting consultations as necessary to decide on emerging issues. The Executive Committee was composed of the following members: **Drs. Mary Broga** (Financial Officer), **Jack Ferrari** (President), **Jonathan Golden**, Community, Family and Children's Services Practice Area Director; **Joyce Isbitsky**, (Thunder Bay-Sudbury) **Cheryl Pohlman**, Education Practice Area Director, **Douglas Saunders** (Past-President); **Ruth Berman** (Executive Director, ex-officio), and **Ms. Carla Mardonet** (Administrative Officer), as the Committee's recording secretary.

The Executive Committee worked collaboratively with the Board of Directors, staff, committees and task forces to fulfill its primary responsibility for coordinating and implementing the Board of Directors' organizational priorities and objectives.

This year, in addition to its more generic responsibilities, Executive committee members, in particular the Association's officers, were responsible for developing and performing a review of the Executive Director position. The challenges of this task led to the formation of a new Human Resources Task Force, which will be a subgroup of the recently established Human Resources Committee.

The Executive Committee took the lead in co-ordinating the Ministry of Education project, and in establishing and working with a Core Committee, until a Project Manager could be hired.

INTERNAL AFFAIRS

FINANCE AND AUDIT COMMITTEE

The 2006 Finance and Audit Committee members included: Drs. Don Rudzinski; Brian Wilson; Lewis Leikin; and Mary Broga (Chair). Dr. Ruth Berman and Ms. Carla Mardonnet provided thoughtful administrative guidance and support to the Committee. The Committee met via teleconference on the following dates in 2006: May 19; September 12; and November 24. At each of these meetings, the Committee reviewed quarterly financial statements and made recommendations for their approval to the Board of Directors. The Committee also provided recommendations to the Board on the following issues:

- The accounting and financial reporting of the funds received for the Ministry of Education initiative.
- The need to increase revenues for the Association, as well as to find ways to cut expenses in order for the Association to maintain a sound financial base.
- Improvement to the staff benefit package.
- The unit fee for psychological services to remain at the same level as that of 2006.
- The membership dues to remain at the same level as that of 2006.
- A budget for 2007.

The Finance & Audit Committee provided minutes of its meetings and Financial Statements at each Board of Directors meeting. The objectives of the Committee include monitoring revenues and expenses against the approved budget; preparing a budget for the up-coming year; recommending an Audit Firm for approval by the membership, and providing guidance to the Board regarding financial matters.

A grateful expression of appreciation is extended to all members of the Finance & Audit Committee for their time and effort on behalf of the Association.

HUMAN RESOURCES COMMITTEE

The Human Resources Committee was established to consider ongoing formalized procedures re: Human Resources issues in the organization. The previous committee was split off as a Task Force to look at Executive Director performance matters (evaluation processes, communication). This committee disbanded in November, and was reconstituted; the new members are **Dr. Diana Velikonja, Dr. Margaret Weiser, and Dr. Don Rudzinski.**

The new overseeing Human Resources Committee has not yet met, but will be convened when the Task Force has completed its work. It will be chaired by a Presidential Officer, and membership will include the Financial Officer, as well as Board and non-Board professional representation.

MEMBERSHIP RECRUITMENT

The OPA maintains its ongoing commitment to the recruitment and retention of eligible members. Three years ago it introduced an “Early Career Psychologist” (ECP) category aimed at increased recognition and participation of recently graduated psychologists at the beginning of their professional careers. A graduated fee structure was introduced at that time, offering reduced member fees over a five year span that included two years of supervised practice, plus the following first three years of autonomous practice. This fee structure aimed to reduce the financial burden of membership for ECPs during their early years of establishing themselves professionally. Many ECPs have taken advantage of the new reduced fee opportunity to join the OPA. Whether this program will encourage ECPs to retain their membership beyond this five year reduced fee window remains to be seen. As the program is still in its early stages, there is as yet insufficient data to indicate its any overall success and monitoring is still ongoing.

In addition, the OPA remains focused on broadening its membership generally, in response to the need to generate increased revenue to match the increase in operating costs. To this end, a new Membership Task Force is in the process of being established, composed of both existing Board members and a cross –section of individuals from the membership at large. Its mandate will be to review our existing membership structure and benefits, and consider any recommendations for change in regard to membership categories, eligibility and benefits.

IT/WEBSITE TASKFORCE

Task Force Chair: Andrew Matthew
Members: Ruth Berman
Connie Kushnir
Christina Lee
Carla Mardonet
Doug Saunders
Margaret Weiser

The IT/Website Taskforce has worked on improving the OPA website to make it a better resource for OPA members and the public. The changes have been undertaken to create: greater accessibility to our website; improved navigation within the site; increased public information about professional psychologists and how to access their services; expanded information about OPA and its member services; promotion of the Early Career Psychologist section within the website; and the On-Line ‘Live Learning Centre’. Other new and improved features include Headline News, Website Link Exchange Program, high priority Rapid Link buttons, and the addition of “Brief Bio’s to the Referral Service. The IT/Website Taskforce is continuing to work on maintaining and upgrading the website, including the examination and evaluation of Forum use/nonuse by members.

ETHICS AND POLICY COMMITTEE

The members of the Ethics and Policy for 2006 were: Ruth Berman, Harvey Brooker, Elspeth Evans, Carole Gentile, Christian Keresztes, Ian Nicholson, Douglas Reberg, Judith Schapira, Carole Sinclair, and Lynn Wells. Dr. Ron Frisch rejoined the committee after many years of service with the College of Psychologists of Ontario.

Some highlights of the EPC's activities in 2006 were:

- The Third Party Working Group (TPWG), chaired and reported by Dr. Douglas Reberg, continued its work on drafting a document that will assist members in dealing with third party situations.
- A new sub-committee chaired by Dr. Ian Nicholson was struck to develop a strategy and succession plan for the sustainability of OPA's Fall Ethics Course for members and College registrants.
- The Committee responded to a request for input on the revisions to OPA's Guide To Fees and Billing Practices.
- The Committee continued to monitor legislative issues and also responded to Board requests for policy reviews and input.

Christian Keresztes, Ph.D., CPsych.
Chairman, Ethics and Policy Committee

THIRD PARTY WORKING GROUP

OPA's Third-Party Working Group, a subcommittee of the Ethics and Policy Committee, has been working to develop resource materials to help membership deal with third-party situations. The Working Group's original task was to develop materials pertaining to insurance companies as third parties, but it quickly became clear that third party complications may be involved in practically any service delivery situation. Third-party involvement is very common for psychologists practicing in school, forensic and pediatric settings. In fact, all practicing psychologists must be prepared to consider the role of third-party persons or organizations with legitimate interest in services provided to first parties (persons, normally considered clients or patients, who meet directly with a psychologist and receive service).

Despite the ubiquity of third-party involvement, there are very few materials to help psychologists decide about responsibilities and priorities toward various parties, and those that are available tend to focus on situations involving managed care. OPA is the first psychological

association to undertake the task of preparing resource materials to help colleagues anticipate, prevent and resolve third-party complications in a broad range of practice settings.

The Working Group has met regularly (mainly in teleconferences) since September, 2003. It has surveyed the large literature on third-party issues, sought input from OPA colleagues about third-party situations, and is now well on its way to providing a finished set of resource materials.

The entire EPC membership has been involved at various points in Working Group activities, but the extensive involvement of Drs. Carole Gentile, Christian Keresztes, Carole Sinclair, Faith Kaplan, Ian Nicholson and Judith Schapira should be particularly acknowledged. Dr. Doug Reberg serves as Chair of the Working Group.

CONVENTION COMMITTEE

In 2006 the Association's plan for a full annual convention, which was to be held at the White Oaks Resort, had to be aborted, in light of the poor early registration received, which necessitated cancellation by mid-December or OPA facing severe financial penalties. While some financial loss did result due to the cancellation, this was far less than would have occurred had we not done so. The Convention Committee did however, manage to successfully produce a "February Mini-Conference" that was held over Friday and Saturday February 17 and 18, 2006 at the Delta Toronto Airport West Hotel. The workshop-oriented format seemed to generate considerable interest, and attendance was surprisingly positive considering the late planning and publication of this alternate event. Three half day and two full day workshops were held over the two day period and included: An Update on Auto Insurance; An Update on OPA Professional Advocacy Initiatives; and a half day workshop on Mindfulness Meditation led by Dr. Paul Kelly. The two day workshops offered Dr. Ray(Chip) Traftate on Treating Disruptive Anger in Adolescents and Adults, and Dr. Nancy McWilliams on the Psychodynamic Diagnostic Manual. Dr. McWilliams' workshop was also recorded and remains available on-line on the OPA's "Live Learning Centre" website.

Shortly after the 2006 meeting, the Convention Committee began its planning for the 2007 meeting, OPA's 60th anniversary convention. Alongside the Convention Committee, an Anniversary Committee, led by Dr. Doug Saunders and composed of a number of past presidents, turned its attention to developing ideas for special commemorative events to mark this anniversary occasion.

Members of the Convention Committee include: Dr. Ruth Berman, Chair, and Drs. Kate Hays, Doug Saunders, Greg Hamovitch, Sam Mikail and Lauren Dade.

EARLY CAREER PSYCHOLOGIST TASK FORCE

Task Force Chair: Michael Oosterhoff

Members: Daliah Chapnick
Andrew Matthew
Jessica Cooperman

London Brent Hayman-Abello

Ottawa Paul Basvits

Initiatives and Accomplishments:

- I. **Needs Assessment Survey:** Data for this online survey was compiled for 43 responders and completed in 2004. Discussions about doing another needs assessment survey is occurring.
- II. **ECP Webpage** (within OPA website): We are in the process of fine-tuning the five sections of our webpage section. These five sections are:
 - a. An overview of our Task Force and initiatives
 - b. A comprehensive list of resources for ECPs sub-divided into relevant sections (i.e., private practice, job-seeking, etc.)
 - c. An ECP listserv
 - d. Mentorship program for ECPs
 - e. Information about ECP professional and social programming

To date, all components of the website have been completed and placed on the web. Most recently, the listserv has been successful in enabling ECPs to connect regarding the licensing processes, to share new resources, and be apprised of upcoming events.

- III. **Workshop at OPA Convention** (Feb. 24): Plans for the 2006 convention were tabled with the changes to the 2006 OPA convention. In 2005 “**Managing a Private Practice: What Every Early Career Psychologist Should Know**” and “**Financial Therapy**” were successful and well-attended convention and social events. An evaluation completed by attendees indicated that they were interested in participating in future ECP events.

In 2007 the OPA conference symposium “**Psyching Up: promoting our unique contribution as Early Career Psychologists**” focuses on 1) the unique contribution of psychologists; 2) promotion of these contributions to potential referral sources and domain-specific consumers; and 3) future directions, challenges, and opportunities for psychologists in school, hospital, and private practice domains.

- IV. **Reduced Fees for ECPs:** The continuation of this program to encourage ECP membership appears successful with increasing ECP numbers. We continue to be pleased that OPA is able to accommodate this important initiative, not only for OPA membership, but also for

Convention fees and the Referral Service. The response from ECPs has been very favourable.

- V. **ECP Numbers:** As of September 2006 we had approximately 200 early career psychologist members in OPA, spread through the supervised first year practice to the 3rd year autonomous practice. Five members had moved from ECP status to full member status in that period. Upcoming for 2007, a survey of early career psychologists transitioning to full member status in OPA will be attempted to determine continued interests and needs.
- VI. **Forging Networks in Ontario:** We have broadened our ECP network to London and Ottawa. Two ECP colleagues in Ottawa (Paul Basevits) and London (Brent Hayman-Abello) continue to act as point people in those areas and have been identified on the web. In 2006, Brent Hayman-Abello presented at the London Regional Psychological Association (LRPA) regarding ECP issues and opportunities in OPA.
- VII. **Gaining Presence Within National Associations:** The ECP initiative in OPA continues to represent one of a handful of task forces in North America, and the only one in Canada. One of our goals continues to be establishing ourselves as a model Task Force for other provinces (and states) and positioning ourselves to be a liaison with them to facilitate their initiatives. This year:
- An article “Early Career Psychologists in Ontario”, detailing the taskforce and its activities in OPA, was published in *Psynopsis* in 2006.
- In 2005, the Chair presented on “Promising Best Practice Strategies for Early Career Psychologist Involvement in Psychological Associations” at the APA State Leadership Conference. March 2005 (Washington).

NOMINATIONS COMMITTEE

A number of positions for the 2007 Board of Directors required new terms to be filled including: President-Elect, Financial Officer, 5 Practice Area Director positions, 2 Director at Large positions and the new seat for an Early Career Psychologist Director. Results from the October 2006 Call for Nominations that had been previously mailed to all members were reviewed, with the task of developing a slate to be brought forward at the Annual General Meeting in February 2007. The slate of proposed individuals that will constitute the OPA Board of Directors for 2007, and any remaining vacant seats, will be presented to the membership at the February 2007 Annual General Meeting.

Respectfully submitted, **Dr. Cheryl Pohlman, Chair Nominations Committee**

GOVERNANCE COMMITTEE

This past year the Governance Committee, through its Policy and Procedures Manual Task Force (whose membership included **Dr. Cheryl Pohlman (Chair), Drs. Brian Wilson, Michael Harnadek, Mary Broga, Doug Saunders and Ruth Berman**), completed the final work on the Association's Policy and Procedures Manual. The Manual provides a consolidated set of policies and procedures that offer greater clarity and conciseness to assist the Board of Directors in exercising its mandate, as prescribed in the Bylaws of the Association, as well as providing a resource for members to understand various policies and procedures. The final draft of the new Policy and Procedures Manual was approved by the Board of Directors at its September 2006 meeting and is now posted on the OPA website. The work of the Governance Committee (whose membership included **Dr. Cheryl Pohlman (Chair), Drs. Margaret Wieser, Maria Kokai, Mary Broga, Michael Oosterhoff and Ruth Berman**) then focused attention toward development of a set of amendments to the current Bylaws directed toward the inclusion of an Early Career Psychologist seat on the Association's Board of Directors. The proposed Bylaw amendments were approved by the Board of Directors at its December 2006 meeting and will be brought forward for ratification by the OPA membership at its Annual General Meeting in February 2007. A third area of focus for the Governance Committee, in response to a request from the Board of Directors, has been to begin the process of developing and piloting a variety of procedures and forms that would help the Board to improve efficiency in conducting its meetings (e.g., Board meeting evaluations, alternative agenda formats).

Respectfully submitted, **Dr. Cheryl Pohlman, Chair Governance Committee**

EXTERNAL AFFAIRS

PUBLIC EDUCATION INITIATIVES

Committee Members: Drs. Christina Lee, Maria Kokai, Pat Mc-Garry Roberts, Joyce Isbitsky, Doug Saunders, Ruth Berman, and Connie Kushnir (Chair). Staff: Ms. Natasha Teoli

Report submitted by Dr. Connie Kushnir

The Public Education Committee focused on three major initiatives during 2006: Psychology Month, Check-up From the Neck Up, and the Psychologically Healthy Workplace Award. In addition to these initiatives, individual psychologists provided direct service in the form of workshops, seminars and talks, as well as being involved in mental health coaching at a

large scale community event. Members have also continued to remain active with print and broadcast media. The chair of this committee attended the Third Annual National Advocacy Forum in Ottawa in January and attended the State Leadership Conference in Washington in March.

PSYCHOLOGY MONTH

Members were provided with a comprehensive tip sheet and members were encouraged to use the OPA Resource Library for brochures, fact sheets, toolkits and videos. Psychology Month posters were also printed and made available to members. Numerous members requested resources and posters. Some of the activities were:

The Toronto Catholic District School Board arranged for the teachers and parents of each school to receive psychology related brochures and fact sheets and February's school newsletters included an article for parents written by psychology staff. The Dufferin-Peel Catholic District School Board sent an email message to all staff including fact sheets relevant to students. Southlake Regional Health Centre held a Lunch and Learn where they showed a film on bullying followed by a Q & A. They provided pamphlets and handouts on psychology and mental illness. The Road to Resilience brochure was distributed to the Toronto Police Service to introduce them to the contributions of psychology and to promote the development of coping strategies. Bloorview Kids Rehab offered relaxation and discussion sessions about how to cope with stress and anxiety. At the Hospital for Sick Children, Psychology Month posters were put in high traffic/high visibility locations and set up an information booth in the cafeteria.

PSYCHOLOGY MONTH 2007

In October, the Public Education Committee hired Ms. Natasha Teoli as part-time coordinator for Psychology Month.

Ms. Teoli has completed the following:

1. A Psychology Month Flyer was created asking members to consider participating in Psychology Month 2007. The flyer provides examples of what psychologists did in 2006, ideas for 2007 and where to get more information. A copy of the Psychology Month poster was on the other side of the flyer. This flyer was included in the mail out to all members in October, was included in the newsletters of the Sections on Independent Practice and Psychology in Education, and was posted on the website.
2. A letter to OPA members outlining why and how to get involved in Psychology Month was sent to all members via the Listserv.
3. Suggested Activities for Psychology Month: Examples of past activities undertaken by Ontario psychologists in previous campaigns as well as suggestions for participating in February 2007.

4. Resources: All of the resources available at the OPA office were reorganized and put into a data base by categories of information.
5. Invitation to Event. A generic letter (Swiss Cheese) was created which can be adapted by members to invite people to attend Psychology Month events by filling in the letter with the members' organization and event details.
6. Outreach to Colleagues. A generic letter (Swiss Cheese) was created to let members' colleagues (i.e., other psychologists or allied health professionals) know about Psychology Month events, or to invite others to participate with members.
7. Website: The Psychology Month logo was posted on the OPA website home page with a link to all of the public education materials listed above. There is also a link under "February Events."
8. Speaker's Directory: The previously developed media directory is being updated. Members have been invited to complete the Speaker's Directory Application, which is being made available on the OPA website. There is also discussion around making it possible to fill out the application online.
9. A data base containing a list of all psychologists interested in Psychology Month and who have previously participated in it, has been created.
10. A database of all current and previous Psychology Month events/activities has also been created.
11. A letter to local private schools has been created, providing them with names of psychologists who are able to speak on a variety of topics of interest to staff, students and parents. This will be sent out in January.
12. A list of media contacts, including the multi-cultural media, has been created.
13. There is a plan to create and send out a press release regarding Psychology Month. This will include some fact sheets regarding psychology and psychologists, as well as OPA's role in psychology in Ontario over the past 60 years.
14. There is a plan to have a display of Public Education materials at the 60th Anniversary convention. Members from the committee as well as Ms. Teoli will be available to talk to OPA members at the display table.

CHECK-UP FROM THE NECK-UP

This past spring, OPA partnered with the Mood Disorders Association of Ontario (MDAO) and other organizations in a high profile public awareness initiative in the GTA called Check-Up From the Neck-UP. Dr. Doug Saunders and Dr. Ruth Berman co-led this collaboration with MDAO. The Check-Up website had about 500,000 "hits." About 70 OPA members responded to the opportunity to have their practices listed on the Check-Up website. At present, an evaluation of the initiative is underway and consideration is being given to expanding the project outside of the GTA. This initiative is part of a long-term strategy of collaborating with mental health consumer organizations to increase public awareness and advocate for greater accessibility to psychological services in Ontario. Further discussions are now underway with

MDAO about future joint advocacy initiatives to increase accessibility to talk therapy provided by psychologists.

PSYCHOLOGICALLY HEALTHY AWARDS PROGRAM (2006-2007)

Over the past year the OPA's Psychologically Healthy Workplace (PHW) Awards Committee (Connie Kushnir, Christina Lee, Doug Saunders, Jeremy Yip and Natasha Teoli (part-time staff)), in collaboration with I/O psychologists at the Universities of Waterloo, Western Ontario, McMaster, and Guelph, the U of T's Rotman School of Management and the Psychology Foundation of Canada have been developing Ontario's first PHW program, following the leads of the BC, Alberta, and Nova Scotia Psychology Associations. The OPA initiative will begin just prior to the 2007 National Mental Health Awareness week in early May with a PHW Conference for Ontario Human Resources Professionals May 3&4 at the University of Toronto's Rotman School of Management. The conference will kick-off a year-long PHW Awards competition, culminating with a PHW Awards Banquet to be held during the 2008 National Mental Health Awareness Week.

DIRECT SERVICE

A number of psychologists offered direct service by providing workshops, seminars, and talks. Dr. Deborah Azoulay presented to a small women's group on anger in the GTA. (12 people).

Dr. Lynne Beal consulted to a Sheridan College student project, video documentary about the Dawson College shootings. She also provided six seminars at the Running Room on goal setting and mental skills preparation for athletes in various clinics, including Learn to Run, Beginners, 5K, 10K, half-marathon, and marathon.

Dr. Ester Cole is on the board of the Psychology Foundation of Canada and contributes to the Parenting for Life committee. Activities include the development of parenting materials and educational resources for community based networks. She was a trustee on the board of the Speers Society, and consulted about their educational programs in school. The Society, which terminated its activities at the end of 2006, focused on positive youth relationships, and preventing "youth relationship abuse".

Dr. Gloria Grace was invited to present on brain function and helmet usage to Senior Kindergarten students and later to Grade 5 students at Byron Northview Public School in London. The presentation was entitled "The Brain Rules."

Dr. Nina Josefowits was a judge for the annual University of Toronto Law School Client Counseling Competition. She is on the board of World Literacy of Canada, JVS, and the Psychology Foundation of Canada.

Dr. Kate Hays presented to runners at the Running Room Marathon Clinic about Mental Preparation. (25 runners). She presented twice to the Canadian Opera Company Ensemble about

Mental Preparation for Optimal Performance. (12 professional opera singers). She presented to staff at the University of Waterloo about Mental benefits of physical activity. (80 staff). She presented three sessions at the School of Toronto Dance Theatre about Mental Preparation for Optimal Performance. (60 dance students). She also presented to the Canadian Personal Trainer Network about Ethical Issues in Personal Training. (13 runners)

Dr. Andrea Lazosky did a presentation on protecting your brain to Junior and Senior Kindergarten students at St. Patrick's Catholic School in Lucan, Ontario. She used materials from an education site on the internet for the kids to make crafts such as a cutout of the brain made into a hat and brain cutting and colouring sheets.

Dr. Karen Leitner presented two hospital wide presentations on bullying at Southlake Hospital in Newmarket. (There were approximately 50 people at each presentation.)

Dr. Patricia McGarry-Roberts presented "Addictions and Relationship Violence", at the Algoma Council for Domestic Violence 2 day Regional conference in Sault Ste. Marie.

Dr. Linda McLean and her colleagues presented results of her pilot study of emotionally focused therapy for cancer patients at the World Congress of Psycho-Oncology in Italy, The Canadian Association of Psychosocial Oncology in Montreal, and at the Harvey Stancer Research Day at the University of Toronto. (About 50 people from multiple disciplines were present in Montreal.) She also presented about marital intervention for couples with advanced cancer at the University Health Network in Toronto. (40 multidisciplinary staff)

Dr. Rhonda Nemeth twice presented a lecture entitled Psychological Sequelae of Physical Injuries and Psychosocial Factors Affecting Rehabilitation for the Independent Chiropractor Evaluation (ICE) Course at the Canadian Memorial Chiropractic College. She also presented a lecture entitled Biopsychosocial Factors and Chronic Pain at the meeting of the Canadian Society of Chiropractic Evaluators and the Canadian Memorial Chiropractic College. Their joint meeting was entitled: Auto Insurance Reform: On a Collision Course or Road to Recovery?

Dr. Michael Oosterhoff presented to WSIB at the Toronto office regarding the role of Psychology in a multi-disciplinary specialty program. (About 40 Nurse Case Managers attended, administrators and Psychologists from other programs.)

Dr. Ed Pomeroy made a presentation to fourth year Brock University class on how to bring principles of community psychology to any kind of human services careers they might move into. He also conducted an in service for Youth Workers in Niagara.

Dr. J. Douglas Salmon was an invited speaker at St. John's Rehabilitation Hospital, Disability Claims Management Seminar Series in Toronto. The presentation was entitled Mental Health Claims Management Seminar I: An introduction and overview. (There were 25 people in rehab and insurance industries.) He also presented to Motors Insurance on "Post 104 Week Disability Determination and Benefit Exposure Minimization." (There were 20 people in rehab and insurance industries.)

Dr. Carlo Vigna spoke to two different groups on psychological assessment and treatment in the GTA. These were physicians or professionals in the health field. (12 and 30). He also did a presentation to a group of therapists running a rehabilitation agency. (6 physiotherapists and OTS)

Several OPA members were involved in mental health coaching the Toronto Marathon. Dr. Kate Hays' role was to recruit, organize, direct, and evaluate the functioning of the Psyching Team. There were 21 members, including the following OPA members: Drs. Lynne Beal, Laurisa Dill, Mario Faveri, Lih-Yea Guo, Kate Hays, Rhonda Nemeth, Michael Oosterhoff, Vicki Valley, Lanette Ward. These psychologists worked with approximately 500 runners directly and approximately 500 indirectly.

PRINT AND BROADCAST MEDIA

Dr. Lynn Beal did a CBC TV interview with Debra Smith regarding stress for kids returning to school. She also did an interview on coping with death with One/80 Online Magazine for Adolescents.

Dr. Ester Cole's media involvements included both consultation with reporters about background information, as well as interviews and presentations in print, radio, and television, including CBC radio and Global news. Some specific examples include panel discussions at TVO about inclusiveness, child and adolescent development, safe schools, and the enhancement of self esteem and study skills. Dr. Cole was also invited to become a member of the TVOParents.com advisory group. This new initiative pertains to a website aimed at supporting parents of elementary school children in Ontario's educational system.

Dr. Gloria Grace did an interview for "The Londoner", a news program on Rogers Television in London. She discussed memory problems in the Boomer Generation.

Dr. Kate Hays had interviews with the following newspapers: Hamilton Spectator, New York Times, National Post, Wall Street Journal, and the Toronto Star. She had interviews with the following radio and TV outlets and shows: Humber College Radio, Entertainment Tonight Canada, Global National, Global TV (twice), CBC Sunday Morning, and CBC TV. She also had interviews with the following magazines: MORE Magazine, Woman's Day, National Culinary Review, Ryerson Review of Journalism, Oxygen, bp, Because We Care, Canadian Living. DOSE, Spree, Glow, Ontario College Athletic Association Newsletter, Chatelaine online, Men's Health, Allure, Chatelaine, Women's Health, Runner's World.

HPRAC WORKING GROUP

The current membership of the OPA's Health Profession Regulatory Advisory Committee (HPRAC) working group is Drs Ruth Berman, Jack Ferrari, Nina Josefowitz, Ian Nicholson (chair), and Doug Saunders.

HPRAC released its report to the Ontario Minister of Health and Long Term Care, "*Regulation of Health Professions in Ontario: New Directions*" in April 2006. This report was generated as a result of HPRAC's response to questions addressed to it by the Minister of Health in a letter from February 2005. The OPA's working group's members were actively involved on several occasions in a number of consultations with the health care community by HPRAC, as it sought to respond to the Minister, including a formal written submission focussing on the issues relating to the questions of the regulation of psychotherapy.

After the release of the report, the working group reviewed the potential impact on the profession of the various recommendations. A response to the report was submitted by OPA in June 2006 to the Ministry of Health's RHPA Review Project. Drs. Berman, Ferrari and Nicholson also met with Barbara Sullivan, the HPRAC chair, that summer to discuss the issue raised in the HPRAC report on the two titles for members of the profession in Ontario.

The Minister of Health tabled for first reading, on December 12, 2006, Bill 171 ("*The Health Systems Improvement Act*" – an act to improve health systems by amending or repealing various enactments and enacting certain Acts). The Working Group has been reviewing the materials presented up to this point. There will be a discussion of these issues at the convention. When the HSIA has second reading, it will likely announce opportunities for public comment and OPA will make arrangements to present at such hearings.

DISASTER RESPONSE NETWORK (DRN)

In 2006, the Disaster Response Network included the following OPA members: Drs. Ester Cole (chair), Anna Baranowsky, Karen Leitner, Gerald Goldberg, Douglas Saunders, Margaret Weiser and Ruth Berman. The Canadian Red Cross was represented by John Saunders, Manager, Disaster Services, International and Youth Programs. Building upon its four year history, the DRN Committee held regular meetings related to planning, goal setting, general education, data gathering, and consultation.

The ongoing partnership with the Canadian Red Cross continued to strengthen strategic planning, exchange of information, consultation about related documents, and the training of volunteer OPA members. Association members continue to be encouraged to annually update the central OPA office about their training, and local volunteer service needs and activities. The DRN goals remain:

- 1) The coordination and provision of pro bono services to communities impacted by disaster and/or crisis situation(s);

- 2) The dissemination of information and access to DRN mental health training for OPA members;
- 3) The support of members in their provision of disaster response services;
- 4) Upholding professional standards regarding disaster mental health care;
- 5) Collaboration with other organizations providing disaster relief services and short-term volunteer interventions.

OPA consults with provincial and national Red Cross and psychology organizations, in order to share relevant information and potentially coordinate training and volunteer efforts. Ontario is among few Canadian provinces forming and operationalizing DRN partnerships with the Canadian Red Cross.

OPA members have been notified through the central office, in SIP's newsletter, and on the listserv of the criteria to become a Red Cross mental health volunteer, and to identify their training requests. In order to become a volunteer, members are encouraged to:

- a) Complete the OPA-DRN information questionnaire;
- b) Contact the local branch of the Ontario Red Cross for training sessions; and
- c) Attend at a First Aid Course.

As in the past, members are encouraged to notify the OPA office about their local training. Copies of the Memorandum of Understanding between OPA and the Canadian Red Cross are available to members, together with a volunteer application questionnaire.

During the past year, the committee reviewed additional documents, and exchanged local information. It was decided that the DRN mandate include the specific goals set above, pertaining to partnership of volunteer services with the Canadian Red Cross. Other activities, however, are from time to time requested by the Emergency Management Unit of the Ministry of Health. These requests address OPA interventions in general. It is important for members and community organizations requesting OPA help, to differentiate between the committee's mandate as distinct from requests forwarded to the Association as a whole.

The committee developed related OPA website information, which is currently available to the membership. The website contains links to other North American and international websites on disaster response literature, helpful "hands-on" information, and services. The committee plans to consult about a Q & A format for members, as well as support future interests expressed by individuals concerning training. The committee welcomes additional members who are interested in volunteering their time and/or learning about DRN local and national services.

MINISTRY OF CHILDREN & YOUTH SERVICES

- 1) Represent OPA at the State Leadership Conference (SLC) in Washington DC – March 2006
 - Given my Community, Family, and Children’s Services portfolio, I attended the the symposium entitled: “Psychology and the School Community: School-Based Health Centers – Advancing the Health of Children”. This material was summarized and distributed to the Board.

2) The majority of my dedicated time, outside of scheduled Executive and Board meetings, consisted of working with the Ministry of Child and Youth Services in planning the pre-convention workshop entitled: *Stories from the Frontline; Applying CAFAS and BCFPI in Your Practice*. This full-day workshop is scheduled for February 21, 2007 and will include presentations by Dr. Ann Doucette, Dr. Kay Hodges, Dr. Chuck Cunningham, Dr. Melanie Barwick, senior members from MCYS, as well as representatives from Children’s Mental Health Organizations who will describe their innovative application and use of the BCFPI and CAFAS instruments.

This workshop represents the combined efforts of the Ontario Psychological Association (OPA), Ministry of Children and Youth Services (MCYS), Hospital for Sick Children (HSC), Children’s Mental Health Ontario (CMHO), and CAFAS in Ontario.

Respectfully submitted, by Dr. Jonathan Golden, Community, Family and Children Services

WSIB TASK FORCE

The Workplace Safety and Insurance Board (WSIB) continues in its ongoing reform of its healthcare delivery services; a process that is well into its fifth year. The reform process has been focused largely on the development and introduction of “Programs of Care”; essentially treatment protocols for various injury conditions supported by current scientific evidence. To date, six such “Programs” have been “rolled out”, with several others in various stages of development. The OPA has been an active participant throughout the length of this initiative, and has been involved in all development and implementation phases. Dr. Ruth Berman continues to sit on the Fee-Setting Advisory Committee, while other OPA members with specialized expertise have participated at the “Program” development level, either at the scientific literature stage or clinical translation stage. Service delivery issues, arising out of these “Programs”, remain problematic for psychology, however. Programs that might include a “psychological” intervention may not necessary be performed by psychologists. Such interventions are not named as being “psychological”, nor are psychologists specifically named as treatment providers.

In the absence of any intervention being designated a “controlled act” under the RHPA, any provider is free to deliver any service deemed to be within their scope of practice. Correspondingly, prescribed fees for “Programs” or “Program” components that include “psychological” interventions have been disadvantageous to psychology, tending to be far below recommended OPA or customary rates. The “roll out” this year of the Mild Traumatic Brain Injury (MTBI) Program was the best illustration of this, such that the OPA, in the end, refused to support the Program, despite our participation to that point.

In spite of this, the OPA believes that there is more to be gained by “remaining at the table” than by withdrawing. To that end, we continue to participate both on the Fee-Setting Advisory Committee, as well as at the “Program” development level, to ensure that clinical services remain appropriate and of high quality and that all and any opportunities for psychological intervention, where needed, are highlighted.

Beyond the focus on “Programs of Care”, the Fee-Setting Advisory Committee has this year also finally given attention to the issue of disparities in fees for services delivered outside of such “Programs”. Unfortunately, the WSIB refuses to enter into any bilateral negotiations to remedy the problem. Instead, it has undertaken a market survey of all professions’ fees, with the objective of confirming its current market position for each profession, and then adjusting fees “across the board”, in accordance with where it decides to position itself in the healthcare marketplace. In comparison to other professions, the fees paid to psychologists by WSIB, though below recommended rates, have been comparatively higher. Thus, it is anticipated that any increase in fees, should one even occur, would be minimal. Importantly, the WSIB is committed to the principal that no profession’s fees will be reduced from current levels.

AUTO INSURANCE TASK FORCE

A brief history

- The Auto Insurance Task Force was created in 1989 to represent the membership and to advocate with the Government of Ontario and the Insurance Bureau of Canada (IBC) for access to services of psychologists for crash victims.
- Auto Insurance continues to change frequently, and 2006 brought more fundamental changes.
- It was a year of great economic success for the property and casualty insurance industry, with record profits across Canada.
- Overall premiums for consumers are significantly reduced compared to 2004. According to the FSCO website, “Based on the entire market, the average rate change for the fourth quarter of 2006 was +0.05%. In 2004, rate changes approved for the entire market averaged -10.60%. For 2005, approved rates declined by 2.43% for the entire market, and for 2006, approved rates declined by 1.27%. The combined change in approved rates for 2004, 2005 and 2006 is -14.30%.
- Crash victims’ accident benefit applications were subject to a variety of new procedures resulting from the removal of the DAC system of neutral assessments that had been brought in under the NDP government in 1994.

- Those suing for the negligence of others in accidents after October 1, 2003, faced the October 2003 verbal threshold and a deductible from their settlements, which is the highest in North America. Along with this increased deductible is an enhanced right to sue for future care for those whose impairments/disability satisfy the three-page definition of “serious and permanent” impairment.
- The March 2006 regulations continue the framework brought in in October 2003 when crash victims lost the right to treatment planning and other assessments without insurer prior approval. Most assessments continue to require application to the insurer for prior approval. Prior to March 2006, these applications for approval of assessments were subject to paper review by a DAC professional.

Removal of the Designated Assessment Center System

- With the removal of the DAC system in March 2006, assessment for all types of benefit applications, with a few exceptions, continue to be subject to insurer prior approval. The insurer must obtain an Insurer Examination, paper review, if they are contemplating denial. The new system provides for Insurer Examinations, direct assessments, when the insurer has denied a treatment plan, disability claim, attendant care claim, or catastrophic application.
- After the Insurer Examination process, if the Insurer denies the application, the insured may proceed with Mediation, then Arbitration or Court.
- A new feature is the payment for a “rebuttal” examination and report for treatment plans and other denied applications. A set fee is paid for rebuttals with the exception for a rebuttal to denied catastrophic applications. In addition, most situations limit the “rebuttal” examination to a “paper review”.
- Access to accident benefits has become more adversarial with the removal of “neutral assessment”. Insurers are obtaining opinions from their own experts, the Insurer Examiner psychologist, to dispute the opinion of the patient’s own psychologist; and given the adversarial nature of the system it appears that legal representation may often be required not just for suing a negligent party but for negotiating with one’s own insurer.
- When the new system was proposed, we advocated for greater balance between insured and insurer, in particular we advocated for removing the requirement of insurer prior approval of assessments and for the idea of paid rebuttals. We advocated that there be no limit on the number or cost of assessments. In conjunction with other health professional associations, we advocated in 2006 for correction of the extreme fee cuts imposed by the Eves government and supported by the McGuinty government with the announcement of the Professional Services Guideline (PSG). While the hourly fee that the insurer is required to pay for psychology has maintained its position relative to the fees paid to other health professions, there has been no willingness on the part of government to reverse these extreme reductions in the overall fee levels. There have only been minor increases in the PSG to reflect cost of living increases.

Health Claims for Auto Insurance (HCAI)

- The OPA Auto Task Force has provided representation to the process chaired by FSCO for the development of HCAI. This process, which will require submission of all OCF 18s, OCF 21s, OCF 22s, and OCF 23s to a central processing agency by February 2008, has been the focus of a great deal of deliberation.

- HCAI holds the promise of providing an accessible and useful data base regarding auto accident injuries and costs. In turn this data base can contribute to policy development. Electronic forms submission also holds promise for greater efficiencies for the auto insurance industry.
- More details will be provided over the coming months so that psychologists can participate in the early stages of implementation and be well prepared for this change.

Pre Approved Frameworks (PAFs)

- The OPA Auto Task Force has provided representation to the process chaired by FSCO for the development of new PAFs with members participating in both the PAF Advisory Committee and the PAF Technical Working Group.
- At this time, the PAFs for Whiplash Associated Disorder I and II are the focus of review and renewal.
- While psychologists do not provide the physical treatment that is included in these PAFs, participation in the process has been important, as these PAFs will set the precedents for the models for future development of any PAFs that are mandated for other impairments.
- In the near future, a draft of the revised WAD PAFs will be circulated for public consultation. You are encouraged to let us know of your willingness to be part of this review process so that the OPA Task Force can provide meaningful feedback to the process.

Best Practices for Preferred Provider Networks (PPNs)

- The OPA Auto Task Force along with the representatives of the other health professional associations conveyed to FSCO and government concern regarding the ambiguity in the role of the health professional working in a Preferred Provider Network. Of particular concern was the potential for the health professional to be in a position of “conflict of interest” as well as concerns about issues of disclosure and consent.
- On Dec 11, 2006 a bulletin regarding Best Practices for Preferred Provider Networks was posted on the FSCO website which included the following statement,
 - *The health professional supplying a program of care through a PPN has a continued fiduciary duty to their patient and must disclose any conflict of interest to the claimant, including ensuring that the claimant is aware that participation in the program is voluntary.*

Fall 2007 Election and Ongoing Reform of Auto Insurance

The upcoming election is an opportunity to voice our views to the political parties on auto insurance as well as other policy issues, which affect our patients. Please provide the Task Force feedback on what is working well and what needs to be addressed.

APA COUNCIL OF REPRESENTATIVES

During 2006, the APA Council of Representatives met twice: in Washington DC in February, at its mid-winter meeting, and in New Orleans in August, during the APA Convention. In addition to its many oversight functions for the organization, including the budget and the

development of Bylaws amendments for voting by the entire membership, Council also established a new Division of Trauma Studies and a new Continuing Committee on Socioeconomic Status. The Committee on Accreditation was reorganized to a Commission on Accreditation and the Membership Committee was reorganized into a Membership Board.

Council voted for the creation or renewal of Task Forces and funding with regard to: Review the APA Psychopharmacology Curricula and Related Policies, Revise the APA Model Act for State Licensure for Psychologists, Increasing the Number of Quantitative Psychologists, Sexualization of Girls, Socioeconomic Status, Guidelines for Assessment and Treatment of Persons with Disabilities, Training Issues for Graduate Students with Disabilities in Psychological Testing and Assessment, Gender Identity, Gender Variance, and Intersex Conditions, Multicultural Organizational Leadership Workshop, Mental Health and Abortion.

Council developed resolutions regarding: Drug Abuse Treatment to Prevent HIV Among Injecting Drug Users and with regard to Prejudice, Stereotypes, and Discrimination.

Extensive discussions were held at both meetings with regard to the ethics of psychologists' involvement in national security interrogations. Council adopted a resolution affirming APA's absolute opposition to all forms of torture and abuse.

Council adopted the reports of: the APA Working Group on Psychotropic Medications for Children and Adolescents, the APA Zero Tolerance Task Force, and the APA Task Force on Socioeconomic Status.

Council voted to support Observer status for four ethnic minority psychological associations for three years: Asian American Psychological Association, Association of Black Psychologists, Society of Indian Psychologists, and National Latina/o Psychological Association.

If you are interested in details of any of the above, please do not hesitate to contact me.

In addition to my tasks in representing Ontario at the Council meetings, I envision the Council Representative as offering a link between OPA and APA, in relation to both services and governance. To that end, I continue to make extensive use of the OPA members' email list to keep members informed of APA activities, opportunities, and information; have provided information, linkage, and support to those OPA members seeking information about APA; and informed APA of relevant OPA activities and participants. I appreciate the opportunity, through your election of me to a new three year term (2007-2009), to continue in this role, and would be glad to be of assistance. I can be reached most easily @ drhays@theperformingedge.com.

Respectfully submitted, **Dr. Kate F. Hays**, APA Council Representative from Ontario.

COUNCIL OF PROVINCIAL ASSOCIATIONS OF PSYCHOLOGISTS (CPAP)

The Council of Provincial Associations of Psychologists (CPAP) has been a national forum for provincial associations and regulators to discuss the development of professional psychology in Canada. Its membership has included provincial membership associations (eg. Ontario Psychological Association) and regulatory organizations (eg. College of Psychologists of Ontario). All provinces and territories across the country, including the Canadian Psychological

Association (CPA) and the Canadian Register of Health Service Providers in Psychology (CRHSPP), have taken part. In 2006, the OPA delegate to CPAP was OPA Past-President, Doug Saunders.

Historically, CPAP has been involved in a number of initiatives of relevance to OPA members and the practice of psychology in Ontario. For example, CPAP was instrumental in the development of the Labour Mobility Chapter of the Agreement on Internal Trade (AIT) that resulted in the signing of a Mutual Recognition Agreement (MRA), which facilitates the mobility of professional psychological practitioners across the country.

This year (2006) to ensure more effective collaboration among the membership associations and among the regulators, CPAP delegates approved in principle a proposal to split into two organizations: one for the regulators, and one for the associations; with continuing regular contact between them. In the Fall, a small task group of Pierre Berube (PA Alberta), Jennifer Frain (Manitoba PS), and Doug Saunders (Ontario PA) developed revisions to the CPAP bylaws to reflect a new organization of provincial membership associations to be called the Council of Professional Associations of Psychology. In January 2007, CPAP delegates approved these revisions.

The goals of the new CPAP will be to maintain regular contact with the regulators' organization on important professional issues of national scope, while focusing its organizational efforts on national education, promotion and advocacy for the profession. Specific initiatives are the National Psychology Month campaign started in February 2005 and the National Leadership Conference now in its fourth year. The new CPAP by-laws and structure are scheduled to be approved at its semi-annual meeting in June, prior to the CPA Convention. Please monitor the OPA website for more detailed information on the 2007 Psychology Month, the National Leadership Conference, and the new CPAP.

OPA STUDENT ASSESSMENT PROJECT

In June 2006, the Ministry of Education announced a grant of \$20 million for the OPA to work with district school boards and school authorities to reduce the current waiting times for students requiring professional assessments. Professional assessments include psychological, speech language and occupational therapy assessments.

The OPA sent memos to the school board Directors of Education in June and July, describing the grant and its purpose. In September, the school boards received an initial allocation of funding to begin work on their Assessment Capacity Building Plans and to fund assessments completed over the summer.

Also in September, the OPA hired Marg Pepler as Project Manager to plan and manage the project and to recruit a project team. The Project Manager reports to the Core Committee which includes representatives of the OPA Board of Directors, school psychology, and the Ministry of Education. The Core Committee meets regularly with the Project Manager to provide advice and project governance on behalf of the OPA Board of Directors. A provincial Advisory Group workshop was held in September to better understand the needs and expectations of key stakeholders across the province.

By the end of November, the school boards were notified of their available funding, and were provided with a template for the development of their Assessment Capacity Building Plans, to achieve project objectives:

- reduce wait times for students in junior kindergarten to Grade IV requiring professional assessments
- enhance teacher capacity to provide effective programming for students provided with professional assessments
- improve literacy / numeracy for students provided with professional assessments
- sustain assessment process improvements for the long term

In December 2006, all school boards had provided the OPA with a report on plans for their initial funding allocation, and a project team was in place to work with the school boards on Assessment Capacity Building Plan development and implementation.

Project team members include two former Chief Psychologists of school boards. Dr. Beverley Deutsch will lead the monitoring of school board plans, and Dr. Ed Blackstock will provide psychology consulting to the project. Other team members include Enide Emond who will provide bilingual / special education consulting, and Bob Spall who is an Education Officer from the Ministry of Education. The project team has been coaching school boards in the development of their plans and providing support and information to contribute to their success. School board teams are enthusiastic about the opportunity provided by the OPA project to enhance their assessment processes and practices, and to better assist young students with their learning challenges.

Highlights upcoming for 2007 will include approval of school board plans in January, monitoring of school board plans in April and May, school board reports on plan implementation in June, and Assessment Capacity Building Plan updates in the fall.

By November 2007, approximately 70 % of the \$20 million grant will have been distributed to the school boards, with the remainder scheduled for distribution by August 31, 2008.

CONCLUDING REMARKS

I am now midway through a two year presidential term, and would like to take the opportunity to thank those with whom I have had the privilege and pleasure to work. The organization owes gratitude to the work of a dedicated staff, and of colleagues on the Board and Committees.

The Association is fortunate to have a dedicated office staff, who enjoy close and productive working relationships under the guidance of our Executive Director, **Dr. Ruth Berman**. I want to thank **Dr. Berman, Carla Mardonet, Anna DiDonato, and Jenna Barclay** for their immense contributions to the functioning and well-being of our association.

Many people work in voluntary capacities to forward the work of the Association, on the Board, on the various Committees, and in other special capacities. Our Executive Committee members, **Drs. Mary Broga, Cheryl Pohlman, Jonathan Golden, Joyce Isbitsky and Doug Saunders**, have continued to provide leadership and direction, and have met the challenges of an evolving organization.

We continue to be fortunate in recruiting talented membership to our Board of Directors; joining us in 2006 were **Drs. Amber Paterson, Andrew Matthew, and Margaret Weiser**. Their contributions have been considerable, and testify to the ongoing health and vigour of the organization.

Two Board Members, **Drs. Lewis Leiken and Keith McFarlane** have had to withdraw their participation; we thank them for their contributions while on the Board, and we wish them well in their future endeavours.

We also note the loss to the board in 2007 of **Dr. Cheryl Pohlman** (Director-at-Large), who has been an active and involved Board Member for many years, but whose term has now expired. She will be sorely missed, as her contributions, whether on the Executive Committee, as Chair of Governance, or in a number of other capacities, were prodigious,

Two issues dominated the Board's agenda this year: the HPRAC review of the Registered Health Professions Act, and the Ministry of Education Project. An active committee (consisting of the Presidential Officers and Executive Director, along with volunteers **Dr. Ian Nicholson and Dr. Nina Josefowitz**) have been working on the former.

The Ministry of Education Project has been steered by a core group, consisting of Board Members, as well as Ministry representatives and senior members of the profession working in Education. We were fortunate, in late summer, to obtain the services of our Project Director, **Ms. Marg Pepler**; her presence has expedited the task considerably, and has ensured ongoing good relationships with the Ministry.

The organization continues to concern itself with advocacy and membership issues. There are a number of important ongoing initiatives, including the work of the Auto-Insurance Task Force, and the work with the WSIB. As we develop and refine our advocacy efforts on behalf of the profession, we move away from taking a reactive stance, in which we expend our efforts responding to events that come to our attention, and more toward a proactive stance, characterized by ongoing relationships with government and with other professions, as well as other psychological organizations. The proactive approach allows us to be involved in issues as they arise, and to be at the table as they are discussed; it also allows us to take advantage of natural alliances with like-minded bodies, as we enter dialogue about the role of the various professions in furthering the public interest. Our recent work with the Ministry of Education, and, to a lesser extent, with HPRAC, have been examples of this.

As we position ourselves in a role of senior health profession, it will become important to attend to barriers to our full participation in the various societal systems in which we claim involvement. Two initiatives I would like to pursue more vigorously in the coming year, related to this, are Prescription Privileges and changes to the Public Hospitals Act (which affects our ability to perform to our full capacity in hospitals, and has ripple effects on our professional functioning). I believe these kinds of ongoing, protracted advocacy efforts, if pursued diligently and constantly, will enhance the presence of our profession in general, and will, as a happy side effect, attract new membership, while furthering the goals of our present membership.

I look forward to what the coming year will bring, and welcome the voices of all our profession in the ongoing conversation.

Dr. Jack Ferrari

