



**Advancing
Psychology
for All**

**L'avancement
de la
psychologie
pour la
collectivité**

20 April 2006

Mr. Michael Decter
Chair
Health Council of Canada
Suite 900, 90 Eglinton Avenue East
Toronto, ON M4P 2Y3

Dear Mr. Decter,

The Canadian Psychological Association (CPA), the Association of Newfoundland Psychologists (ANP) and our provincial/territorial partners are supporters of the work of the Health Council. We have for some time argued for a stronger pan-Canadian approach to health while respecting constitutionally defined jurisdictional responsibilities. In our view, depression, brain injury or stroke are similar regardless of where they occur in Canada.

Psychology associations are also pleased to support the Council's focus on interdisciplinary collaboration. As you know, CPA is the Chair organization of the Enhancing Interdisciplinary Collaboration in Primary Health Care Initiative funded by Health Canada through the Primary Health Care Transition Fund. The Initiative's Principles and Framework have been officially supported by ANP. Psychology, through CPA, is also on the Steering Committee of the Canadian Collaborative in Mental Health Initiative.

Psychologists have been engaged in collaborative practices for decades. Psychological services by definition involve a client or patient centered approach and cooperation with other health services and health care providers as well as professionals in education, criminal justice, social welfare and business and industry (employee assistance programs).

We want to bring to your attention an important matter that we believe does not support this broad view of health care. A recent Health Council report entitled *A Review of Scopes of Practice of Health Professions in Canada: A Balancing Act* by Dr Patricia M. Baranek focuses almost exclusively on medicine and nursing. This in and of itself is fine, if that was the intention. We would argue that the paper could and should have been broader.

However, the problem is the title of the report which gives the clear impression that the matter at hand is of relevance to health professionals in general. This is obviously not the case. We are

concerned how an oversight of this significance could slip by the Health Council.

Secondly, the definition of collaborative practice cited by the author is limited to nursing and medicine. More expansive and widely accepted definitions such as those used by the EICP Initiative would be more accurate and inclusive. They can be found at www.eicp.ca.

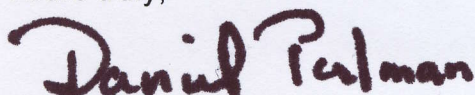
Finally, scopes of practice are an issue of importance for all regulated health professions, particularly in the context of collaborative care. The paper would have had much more currency if the author had reviewed the issues related to, for example, the ten professions represented in the EICP Initiative. They are psychology, medicine (CMA and CFPC), occupational therapy, audiology, pharmacy, nursing, social work, physiotherapy, dietetics and speech pathology.

If, on the other hand, the intention of the document was to examine primarily two professions, the title should have accurately reflected that reality.

The issues addressed above are important in and of themselves. They are also indicators of a profound cultural bias in health care and society in Canada, a bias we know you and the Council are intent on changing. We are pleased to work with you in this endeavour and trust that in the future Health Council publications will better reflect in language and content the issues discussed above.

I hope you will find these comments helpful. If you have any questions or concerns, please do not hesitate to contact either Dr. Heath or myself.

Yours truly,

A handwritten signature in dark ink that reads "Daniel Perlman". The signature is written in a cursive, flowing style.

Dan Perlman, Ph.D.
President
Canadian Psychological Association

also on behalf of

Olga Heath, Ph.D.
President
Association of Newfoundland Psychologists

cc: Council of Provincial Associations of Psychologists