CPA PRACTICE DIRECTORATE

Council of Practice Directorate of CPA
Standing Committee of CPA

TERMS OF REFERENCE

Background

Following the re-organization of the Council of Professional Associations of Psychology (CPAP) in 2007 into a body that represented only the jurisdictional professional associations of psychology as distinct from Canada’s regulatory bodies of psychology, members acknowledged that CPAP did not have, but urgently needed, a stable and paid professional and administrative resource to move its advocacy agenda and activities forward.

At its June 2008 meeting where CPAP resource needs were discussed, the following was noted

- Corporate member fees paid to the CPAP went entirely to support meeting costs.
- A second revenue stream for CPAP has been the Committee for the Advancement of Professional Psychology (CAPP) grant that comes to CPAP from the American Psychological Association (APA) and represents a portion of the professional advocacy levy that APA charges its Canadian members. This revenue, which typically amounts to approximately $20,000 is also insufficient to fund a stable and substantive resource.
- Although CPA engages in professional advocacy and in so doing maintains parallel communications with the provincial and territorial associations when asked and when possible, there is a need for an infrastructure to support multi-directional collaboration and communication among Canada’s jurisdictions of psychology.
- Multi-directional collaboration and communication among provincial, territorial and national groups of psychology is essential for effective, relevant and responsive professional advocacy in Canada.
- The provincial, territorial and national associations of psychology in Canada need to think about how to secure a revenue stream to fund this needed advocacy infrastructure.
Following the June 2008 meeting, representatives of CPAP and CPA met to discuss how in partnership they might be able to better meet CPAP’s resource needs and, ultimately, advance advocacy for professional psychology across Canada’s jurisdictions. These meetings resulted in a proposal that the CPA launch a Practice Directorate whose directing Council would be constituted from the corporate members of CPAP. This proposal was approved in principle by CPA in November 2008 and by CPAP in January 2009. In February 2009, the Board of Directors of CPA voted to direct a portion of its 2008 year end surplus to launch the Practice Directorate. Further, the CPA Board agreed to seek a dues increase from its membership with which it could finance both a Practice Directorate and Science Directorate. The Practice Directorate, a partnership with the members of CPAP, would provide the infrastructure within which to support the practice of professional psychology across Canada’s jurisdictions.

**Mandate**

The mandate of the Practice Directorate is predicated upon a shared vision to meet the advocacy needs of the practice of psychology across Canada’s jurisdictions. Trust, good faith, and a collective commitment to the common good of psychology will be key ingredients to its success.

Advocacy and the practice of psychology take place at both the provincial/territorial and national levels and this reality will be reflected in the operation and activities of the Practice Directorate, its Council members and its staff.

The Practice Directorate is the vehicle through which organized psychology in Canada can promote the practice of psychology and the role of psychological factors in the health and wellbeing of Canadians across the sectors in which they live and from which they seek health service (e.g. communities, schools, workplace, correctional facilities, hospitals and clinics, private practices). As such, the Practice Directorate has both an advocacy and policy function: to promote the practice of psychology in Canada as well as to use the knowledge and expertise of the science and practice of psychology to contribute to the development of health and social policy in Canada.

The mandate of the Practice Directorate is the support of professional psychological practice through advocacy that targets the following activities:

- Legislative, regulatory and legal
- Public education
- Practice support

Examples of legislative activity would be advocacy for legislation that affords the fair treatment of persons with psychological problems under the law and which supports access to needs-based health care service. Regulatory activity would include advocacy for the scope of regulated psychological practice and the importance of the
regulation of mental health service in general. Legal activity could include advocacy or action in instances where the policy or practices of systems do not afford fair access, supports or treatment for persons with psychological problems.

Public education activities, for example, would include knowledge translation in the form of fact sheets about psychological problems and treatments. Practice support would include archiving and transferring tools and activities that support best professional practice.

All of these activities will be undertaken with a commitment to the practice of psychology across provincial/territorial and national jurisdictions and to the provision of an infrastructure which both supports jurisdictional activity as well as the forum through which such activity can be shared among jurisdictions.

Membership

The Council of the Practice Directorate will be made up of the corporate members of CPAP (i.e. provincial/territorial and national associations) as defined in CPAP’s By-Laws. Appointment of the delegates who represent the corporate members on the Council will be confirmed with the approval of the CPA Board of Directors. All delegates to the Council will be Members or Affiliate Members of the CPA in addition to members or staff of the jurisdictional association which they represent. In addition, delegates will have a reporting relationship to the jurisdictional association they represent and be empowered to participate and vote on Council on behalf of that association.

Though the Council of the Directorate mirrors the membership of CPAP, it is not CPAP. CPAP will continue to maintain its corporate identity as separate from the Council of the Directorate in order to fulfill its mandate as per its by-laws – a mandate which is more inclusive than the mandate of the Council of CPA’s Practice Directorate (e.g. relationship with APA and its Council of Representatives).

Organizational Structure

The Council of the Directorate is a standing committee of the corporate entity that is CPA and as such

- The members of the Council have a fiduciary responsibility to the associations they represent and the Council has a fiduciary responsibility to CPA.

- The Council functions as a functionally autonomous body that is accountable to the CPA Board of Directors.

- Issues related to policy and budget must be approved by the CPA Board

- Policy or position statements developed by the Council must be coordinated and accountable to the CPA Board through its Executive Director. Note that these refer to statements or positions that the Council makes, not statements or positions that CPAP might make as its own corporate entity. Note also that only the President and Executive Director of CPA and their designates may speak on
behalf of CPA [http://www.cpa.ca/aboutcpa/policystatements/](http://www.cpa.ca/aboutcpa/policystatements/) However, once the policy or position statement of a Standing Committee has met with the approval of the CPA Board, its Chairperson or senior staff person may be named a designate who can speak publicly to the policy or position.

- Representation and participation in practice-related activity in which CPA might otherwise be involved that is relevant or related to the Terms of Reference of the Council and the inter-jurisdictional practice of psychology in Canada will be shared with the Council whenever possible. Practice-related activity in which CPA is otherwise involved, and in which the Council might decline involvement, may also be organized or disseminated through the Practice Directorate.

**Chairperson and Steering Committee**

The Council will appoint a Chairperson and Steering Committee, typically in a manner consistent with the appointment of an Executive Committee under CPAP’s By-Laws. The Chairperson of CPAP (who is normally also the Chair of the Council) continues to have a designated seat on the CPA Board of Directors. This affords the opportunity for CPAP to bring issues to the Board related to CPAP as a corporate entity.

CPA’s Chair of Professional Practice will sit as a member of the Council Steering Committee and it is through CPA’s chair of Professional Practice that the Council will report to the CPA Board of Directors. The Steering Committee will be comprised of the Chairperson of the Council, CPA’s Director of Professional Affairs, and a representative of one other member association of Council.

**Staff**

The Practice Directorate will have a staff to carry out its Council-directed operations.

- The staff of the Practice Directorate will be responsible both to the Council and to CPA’s Executive Director as is the case for CPA’s other staffed standing committees (e.g. Accreditation).

- Job descriptions and recruitment of Practice Directorate staff will be a joint responsibility of CPA’s Executive Director, CPA’s Director of Administration and a representative appointed by the Council.

- Titles and job descriptions of Practice Directorate staff will be developed collaboratively by the Council and CPA’s Executive Director. These position titles and descriptions will then be recommended to the CPA Board for approval. Practice Directorate staff will be employees of CPA.

**Term of Office**

The Chair and CPAP members of the Steering Committee will each hold a three year, renewable term; staggered whenever possible so that only one seat turns over annually. CPA’s seat on the Steering Committee will be held by its Board Chair of Professional Affairs - a term that is normally held for three years and then turned over
to the newly elected Board member appointed to Chair Professional Affairs. The term of office for the remaining members of Council will also be three years and renewable.

**Roles and Responsibilities**

**Members**

- Membership of the Council will include representatives of the member associations of CPAP as defined in CPAP by-laws. All members of the Council must also be Members or Affiliate Members of the CPA.

- The activities of the Practice Directorate of CPA will be financed from three sources to include:
  - The provincial/territorial and national associations who are members of Council agree to fund all costs related to meeting attendance.
  - The CAPP grant remitted annually to CPAP from APA that is derived from a practice levy that APA collects from Canadian members of APA
  - CPA membership revenue

- Council members commit to regular meeting attendance which normally occurs twice annually and to participation in Council activity to the best of their ability.

**Chair**

- Provide leadership and oversight to Council members and staff and to the activities undertaken by Council
- Chair meetings of Council
- Maintain or delegate the maintenance of a roster of member representatives and their terms
- Ensure that notices of meetings, meeting agendas, minutes of meetings and any other relevant information is created and circulated among the membership of the Council
- Carry out any other duties or responsibilities directed by the Council

**Steering Committee**

- Consists of the Chair, CPA’s Chair of Professional Affairs, the member at large elected to the CPAP Executive Committee as representative of one of the member organizations, the Executive Director of CPA, and the Director of the Practice Directorate in an ex-officio capacity

- Acts on behalf of the Council between Council meetings and reports to the Council on any actions taken

- Carries out any other duties or responsibilities directed by the Council

- Will meet at the discretion of the Council and Steering Committee
Staff

- Staff will be recruited to carry out the activities in fulfillment of the Practice Directorate’s mandate.
- Titles and job description of the Practice Directorate staff will be developed collaboratively by the Council Chair or his or her delegate and CPA’s Executive Director. Practice Directorate staff will be employees of CPA.
- Recruitment of Practice Directorate staff will be a joint responsibility of CPA’s Executive Director, CPA’s Director of Administration and the Council Chair and his or her delegate.
- Staff will be responsible both to the Council and to CPA’s Executive Director as is the case for CPA’s other staffed standing committees.

Meetings

- Council will normally meet twice annually and at a time and place to be determined by Council
  
  Quorum will be a simple majority of the membership constituting the Council members

Decision-making

- Each Council member will have one vote when present
- Decisions will be carried by majority vote
- Decisions relating to policy or budget must be approved by the CPA Board of Directors

Agenda

- The Council Chair is responsible for the preparation and distribution of meeting agendas

Minutes

- All meetings will be minuted by a recorder assigned by the Chair.

Approved: CPA Board of Directors November, 2008
Approved: CPAP January, 2009