Section 26
Clinical Psychology
Newsletter

Volume one Number one
Canadian Psychological Association

Section Chair's Message

It is my extreme pleasure to be a part of the first executive of the Section on Clinical Psychology (Section 26) of the Canadian Psychological Association, and to be able as Chair to send the first Chair's Message to members of the Section. It is my belief that the creation of this Section represents a very healthy development in the history of Clinical Psychology in Canada. For the first time clinical psychologists have a national voice for their issues and concerns, and will be able to present their positions on various matters to CPA as an organization, as well as to the public. Based upon the number of members that the Section will attract (Section 26 is already the largest section of CPA, with over 300 members), I fully anticipate that the Section will become a positive force within the sectional structure of the Association. Even further, I anticipate that with the establishment of this section, and with the possibility of stronger presentation of clinical issues within CPA, psychologists who have not previously become members of CPA might now see some more direct benefit of membership, and increase the proportionate presentation of clinical psychologists within CPA.

Although there are still a number of basic organizational issues that your executive is examining, much of the groundwork for a viable and active Section 26 has been laid. As a fledgling organization, we now need to be considering the goals and aspirations for the Section. Many of these are laid out in the Section's bylaws, which state that the goals of the Section shall include, but not be limited to the following:

1. To create a strong forum for the participation of clinical psychologists and students of clinical psychology within CPA.
2. To represent matters of relevance to the field of clinical psychology to the Board of Directors and other groups within the CPA.
3. To foster communication among members of the Section, or between the Section and other interested or affected parties.
4. To advocate issues of relevance to members of the Section.
5. To support the training of future clinical psychologists through representation with training institutions and programs, and the formation of student membership in the Section.
6. To organize activities of interest at the CPA Annual Meeting.
7. To recognize the outstanding contributions of clinical psychologists to the development of the discipline through the creation of such awards as the Section deems appropriate.
8. To create and maintain bylaws and dues structures as necessary for the achievement of the purposes of the Section.

Some of the goals of the Section are lofty, and will obviously take some time to come close to fruition. No doubt, there are also other goals that have not even been anticipated at present, and that will only emerge with the passage of time and events. No doubt, members of the Section have particular interests that have not been included in the broad section missions. The Section must serve its members, however, and to the extent that any of us see a purpose not being served by the Section, or simply want to strengthen our collective resolve to pursue certain issues, members should make their desires known. Write to me or other executive committee members, and your concerns will be heard.

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Executive Officers

Chair Keith Dobson, University of Calgary, Calgary, Alberta
Chair Elect Michael Vallis, Camp Hill Medical Centre, Halifax, Nova Scotia
Secretary-Treasurer Kerry Mothersill, Holy Cross Hospital, Calgary, Alberta
Member at Large Rhona Steinberg, Simon Fraser University, Burnaby, B.C.
Member at Large Susan Hyde, Cape Breton Regional Hospital, Sydney, N.S.
In order to attain our goals and desires, the necessary counterpart to the initial idea for action is having the resources to act. With a large membership we have a richness of personnel that we will need to utilize to further aims of the Clinical Section. Members with the time and interest to volunteer for activities will be much appreciated, particularly as we being to do activities of the sectional advocacy type. Even such basic functions as organizing an involvement in the annual CPA convention, publishing a newsletter, maintaining membership, or determining section fellows or award recipients require a good deal of financial and personnel commitments. We will need to spend our Section monies wisely to meet our various goals.

The Canadian Register and the GST

As most of you know, the House of Commons passed Bill C-62 in Late April, establishing the framework for implementation of the Goods and Services Tax (GST). After a long and intricate lobbying process, organized psychology managed to secure an exemption for psychological health care services from this tax. The Act exempts those services provided by a practitioner under the meaning of the Act. In our case, a psychologist is identified as a practitioner if he/she "is licensed....to practise the profession of....psychology in the province in which the service is supplied" and "is registered in the Canadian Register of Health Service Providers in Psychology."

In considering the possibility of such an exemption, representatives of the Finance Ministry were well aware that psychology is a diverse profession whose members practice in a variety of areas. The scopes of practice of the other exempt professions (e.g. medicine, dentistry, physiotherapy) are virtually coterminous with health care. No such claim was available for Psychology. The Finance Minister required a straightforward, rational and economical way of identifying health service providers in psychology. The Canadian Register of Health Service Providers in Psychology (CRHSPP) provided the response to that need.

Once the Act respecting the GST receives royal assent and becomes law, the GST itself is scheduled for implementation on January 1, 1991. At that time, psychologists who bill for their professional services will be required to begin collecting the tax unless they meet the conditions set out above: provincial registration and listing in the Canadian Register.

Details on the mechanics of implementation of the GST for psychologist practitioners are still scarce. Psychologists would be wise to monitor information from their professional associations, as well as to seek independent accounting advice about their obligations in planning for January 1.

The GST exemption for psychological health services has created much interest in CRHSPP. The Register formed in January 1985 with receipt of its letters patent and articles of incorporation from the federal Ministry of Consumer and Corporate Affairs. It was created to identify psychologists who met specific standards of advanced training and experience in the provision of psychological health services. We expected that it would come to be used by third-party payment agencies, governments, institutions and others who use, broker or fund psychological health services.

Its constitution has been ratified by the associations and regulatory boards of all ten provinces and the Northwest Territories, as well as the Canadian Psychological Association. These are the member bodies of CRHSPP. The Register publishes an annual directory of psychologists who have applied for listing and who have met the standards established by the Council of the Register.

Since its formation, users have found many other potential applications for the Register. CRHSPP has been offered as a way of identifying qualified psychological service providers in various pieces of provincial legislation affecting psychology. Listing in CRHSPP has also been recommended to the Canadian Council on Health Facilities Accreditation as one of the accreditation criteria for psychology services in hospitals and other health facilities. In these efforts, as well as in the GST campaign, the existence of the Register has opened opportunities for psychology which would not have been available without it.

Despite the above precautions, I am very optimistic about the long-term viability of the Section on Clinical Psychology. I can imagine a time in the near future where our section will regularly be consulted on issues related to clinical training, the science and practice of clinical psychology, professional issues in the organization and delivery of psychological services, and numerous other areas of expertise. I can imagine in the middle future a time when our section is intimately involved in, taking some leadership with regard to the broader Canadian Psychological Association. I can even imagine a time when we will reach out to, or be reached out from, sister organizations in other countries, and share international expertise and experiences with regard to clinical psychology. The job, as I see it, is to make that imagined future real.

Keith Dobson, Ph.D.
Chair, Section on Clinical Psychology
The basic eligibility criteria for list in CRHSPP comprise registration or certification for the independent practice of psychology in the jurisdiction where the individual practices, a doctoral degree in psychology acceptable to the regulatory body on the jurisdiction where the individual practices, and two years of supervised experience in health service. At least one of the supervised years must be post doctoral and one year must be in an organized health service setting.

A grandparent clause allows for the listing of individuals who may practice with the master's degree or who may not have acquired the ordinarily requisite supervised experience in an organized health service setting. The essential requirement for registration or certification for independent practice as a psychologist in the jurisdiction of practice remains the same for all applicant categories.

The Register is now accepting applications for listing. Each applicant's dossier receives thorough and rigorous scrutiny from experienced assessors in order to ensure that the applicant meets the eligibility criteria for listing. This process may take anywhere from a few weeks to several months, depending on how much additional work may be required to complete, clarify, or corroborate the information the applicant provides. Applying now and paying close attention to the comprehensiveness and accuracy of the information on your application is the best way of ensuring that you are listed in the Register on January 1, 1991.

If you would like to receive an application form or further information about the Register or its eligibility criteria, you may contact the Executive Director, Dr. David Belanger, or the Central Office Manager, Ms. Carmen Hotte at 577 Somerset West, Ottawa, K1R 5K1. The phone number is (613) 594-5126; the Fax number is (613) 235-4413.

I will also be pleased to talk with you about any matters related to the Register. You may write to me in care of the Department of Psychology at the Calgary General Hospital, Calgary, T2E 0A1, or call me at (403) 268-9207.

Michael C. King, Ph.D.
President
Canadian Register of Health Service Providers in Psychology

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**Call for Nominations for Section 26 Student Award**

An award for outstanding student presentation in clinical psychology will be made at the forthcoming annual CPA meeting. This will be an annual award and the recipient will be chosen based on his/her paper submission to CPA. In the case of multiple author papers, the student must be the senior author. Interested students or their faculty advisors are encouraged to submit abstracts for consideration of the Award to the Chair of the Awards Committee. Up to five outstanding presentations will be selected and these students will be asked to submit their complete papers. The Award will then be selected from this group. This Award will consist of a $250 cash award plus a certificate of recognition.

Please forward submissions to:

Dr. T. M. Vallis
Chair, Awards Committee
Department of Psychology
Camp Hill Medical Centre
1763 Robie Street
Halifax, Nova Scotia
B3H 3G2

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**Call for Nomination of Fellows**

In accordance with the by-laws for CPA sections, Section 26 is calling for nominations from its members for Fellows in Clinical Psychology. Criteria for fellowship are outstanding contribution to the development, maintenance and growth of excellence in the science or profession of clinical psychology.

In order for nominees to be considered for Fellow status by the executive council, nominations must be endorsed by at least three members or Fellows of the Section, and supportive evidence of the nominee's contribution to clinical psychology must accompany the nomination.

Nominations should be forwarded to:

Dr. Michael Vallis
Chair, Fellows and Awards Committee,
c/o Department of Psychology
Camp Hill Medical Centre
1763 Robie Street
Halifax, Nova Scotia
B3H 3G2
Message from the Editor

Welcome to the inaugural newsletter of the Clinical Psychology Section 26. We hope to accomplish many things with this publication.

The success of the newsletter and the benefits to the Section depend upon its members. The newsletter is a vehicle with which to network and to share information about research interests and clinical issues.

Any information about ongoing research and treatment programs could be published in this newsletter. All that is needed is a short description about the project. This way, practising psychologists and clinical students with similar interests and concerns will be able to contact each other.

If you have recently read a good reference book, why not write a short review of it so that other psychologists can be informed about these resources. Announcements of conferences, internships and employment opportunities can all be announced here, too.

Remember that this is your newsletter. Do not expect others to contribute, thereby eliminating your responsibility to participate.

The annual report of the nomination committee stated that more practitioners and applied psychologists should be nominated to fellow status of CPA. At the last board of directors meeting a motion was passed to set up criteria for the evaluation of fellow status (which is applicable to practitioners). Examples of criteria which have been put forward:

1. creation and documentation of innovative programs
2. creation and documentation of new therapy models; or using traditional models in an innovative manner or with a new population
3. clinical supervision should be equated with research supervision
4. expanding clinical influence beyond one's own geographical location
5. service to professional organizations, i.e., national, provincial and local organizations
6. service outside one's own place of work
7. leadership on clinical issues that relate to broad social issues
8. media contributions – bringing psychological issues and concerns to the public with radio and television appearances, as well as being quoted in the newspaper, magazines, etc.

Other ideas for criteria for fellow status of CPA should be forwarded to me and I will pass them on to the chair of the nominating committee.

At the same time if you know of any practitioner and/or researcher, send their name with their resume and a letter of support to:

Dr. Michel Sabourin
Chair, CPA Committee on Fellows
Canadian Psychological Association
Vincent Road
Old Chelsea, Quebec JOX 2N0

Be certain that your letter uses some of the criteria mentioned above.

Finally, the Clinical Section is looking for a logo. Here are three choices which are numbered one, two and three. Please forward your choices to me and the insignia with the most votes will become our new logo.

Rhona Steinberg, Ph.D.
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