

# **SHARING OUR SKILLS**

## **Modernizing professional practice in mental health and human relations**

### **SUMMARY**

### **REPORT OF THE EXPERT COMMITTEE**

**December 2005**

Quebec

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### TRANSLATION NOTE

This translation of the December 2005 Summary of the Report of the Quebec Expert Committee on Modernizing Professional Practice in Mental Health and Human Relations is based on a translation of the Committee's Summary Report which apparently originated from within the Ontario Ministry of Health. I have modified the Ontario translation where, based on my reading of the original text, it was apparent that the first translation did not accurately describe the social policy or legal principle that was being articulated by the Committee. I have also modified some formatting and tables. References in brackets and italic font are to the pages of the original, full report. Any errors or omissions that have thus resulted are, therefore, ones that I alone remain responsible for.

If you find any glaring errors in this translation, please bring them to my attention.

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# Introduction

Modernizing professional practice in mental health and human relations was initially an approach as essential as it was complex - a challenge taken up with competence and rigour by the Expert Committee appointed by the *Office des professions du Québec* (Office of Professions of Quebec).<sup>1</sup>

The Committee's work is the outcome of a vast operation launched in 2000 by the Office to update the fields of practice of professions related to health and human relations. The expected modernization for public sector stakeholders in physical health first became a reality in 2002 with the passing of the Law modifying Quebec's *Code des professions* (Professional Code) and other legal provisions in the health field ("the Law"). The same process was then initiated for mental health professions and human relations, and entrusted to a Ministerial Working Group headed by Dr. Roch Bernier. A report was produced recommending the redefinition of fields of practice and the implementation of activities to be performed exclusively by the following professions: psychologist, social worker, marital and family therapist, vocational counsellor, psychoeducator, occupational therapist, nurse, and physician.

In January 2004, the creation of the Expert Committee, headed by Dr. Jean-Bernard Trudeau, made it possible to continue the effort in the line of Ministerial Working Group, focusing on:

- updated suggestions about the fields of practice of these professions;
- consensual solutions about exclusive and shared activities in these professions;
- integration of specific groups outside of the professional system;
- supervision of the practice of psychotherapy.

The report - whose suggestions are indicated in the present summary - accounts for this second stage of work in order to shape the modernization considered.

To fulfill their mandate, the experts of the committee had to base themselves on various parameters of action, including:

- the theoretical approach already elaborated by the Ministerial Working Group, and the resulting findings;
- the existing legislative structure;
- governmental orientations in mental health (*Plan d'action en santé mentale 2005-2010: La force des liens - Action plan in mental health 2005-2010: The Strength of Links*).

The Expert Committee's approach was also based on various principles, especially the following:

- **the protection of the public** was constantly present throughout the discussions;
- **competent accessibility**, with the aim of ensuring that the patient receive the appropriate service, provided by the right person, at the right time, at the right place and for the right duration;
- **focusing on the patient**, in parallel with the protection of the public, as a

- principle reiterating the patient's right to quality care and services;
- **inter-disciplinarity** refers to discussion, collaboration and the sharing of various expertise in order to deliver the best care and services possible;
  - **an approach that is mindful of the impacts of the recommendations** has been followed throughout the process. The requirements and imperatives of public protection were taken into account, while measuring the effects of the reservation of an activity on the maintenance of accessibility to care and services;
  - **a promising vision at the time of shaping the evolution of professional roles** allowing for maximal use of knowledge and skills to the advantage of the people and facilities providing care and services.

Finally, relative to the elements elaborated by the Ministerial Working Group, the Expert Committee performed a detailed analysis of the notions of scopes of practice, of reserved activities, of articulation of the same according to the definition and objective of the scope of practice, from the point of view of promoting continuity in care and services.

The Expert Committee performed its mandate with the constant concern of collecting the input of the involved professional orders and of reporting about the advancement of its work. Contributors participated efficiently and openly. Finally, the Expert Committee was mindful to inform groups outside the professional system about the proposals relevant to them. The Expert Committee also verified the feasibility of implementing its proposals contained in its report with relevant departmental authorities<sup>2</sup> and associations of employers of the health and social services network.<sup>3</sup> While the Expert Committee is aware of the impact of its proposals on the organization of work, it considers that it has reached the right balance between the need to protect the public and the maintenance of accessible services and care. From these fruitful encounters emerged promising results giving the proposals listed hereafter the best chances to correspond to the need of the users, the health system and society.

# Modernizing Professional Scopes of Practice

## (Chapter 1)

The effort for the modernization of the professions of the mental health sector and human relations sector is based on the definition of non-exclusive scopes of practice which must:

- be sufficiently precise;
- be concise;
- indicate the objective of the intervention;
- avoid detailed lists;
- leave out any mention to goods or services, or to the methods and techniques used.

*(Chapter 1, p. 15)*

A scope does not attempt to cover a whole discipline, but rather to spell out its main activities in order to capture its nature and objective. Scope content is limited to the following elements:

- description of the professional discipline;
- main activities of the profession;
- objective of the practice.

The phrase “the human being in interaction with his/her environment”, which was incorporated into the objective of the practice of the set of scopes of practice of the mental health and human relations sector, reflects the work of professionals with individuals, families, groups and organizations. Moreover, besides the foundations incorporated in the Law on activities of information, of health promotion, disease prevention, accident prevention and the social problems, this encompasses suicide prevention.

*(Chapter 1, p. 16)*

Regarding **the contents of the scopes of practice of the subject professions**, the Expert Committee proposes:

- to include these professions among common activities of information, promotion and prevention already contemplated in the Law;
- to introduce specifically suicide prevention within the ambit of prevention activities.

*(Chapter 1, p. 16)*

### PROPOSED UPDATED SCOPES OF PRACTICE FOR EACH ORDER

<p><b>Psychologist:</b> The practice of psychology consists in evaluating psychological and mental functioning, and to determine, recommend and perform interventions and treatments aiming at promoting psychological health and re-establishing</p>	<p><b>Social Worker:</b> The practice of social work consists in evaluating social functioning, determining an intervention plan and ensuring its implementation, supporting and re-establishing the social functioning of the person in reciprocity</p>
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<p>mental health of the human being in interaction with his/her environment. (pp. 17-18)</p>	<p>with her milieu in order to promote the optimal development of the human being in interaction with his/her environment. (pp. 19-21)</p>
<p><b>Marital and Family Therapist:</b> The practice of marital and family therapy consists evaluating the relational system dynamics of couples and families, determining a treatment and intervention plan, restoring and improving communication channels in order to promote better couple and family relations in the human being in interaction with his/her environment. (pp. 21-22)</p>	<p><b>Vocational Counsellor:</b> The practice of vocational counseling consists in evaluating the psychological functioning, personal resources and the conditions of the milieu, intervening on identity, developing and maintaining active adaptation strategies in order to make personal and professional choices at any point in life, re-establishing socio-professional autonomy and designing career projects in the human being in interaction with his/her environment. (pp. 23-24)</p>
<p><b>Psychoeducator:</b> The practice of psychoeducation consists in evaluating difficulties of adaptation and adaptive capacities, designing an intervention plan and ensuring its implementation, re-establishing and developing the person's adaptive capacities and contributing to the development of the conditions of the milieu in order to promote optimal adaptation of the human being in interaction with his/her environment. (pp. 24-26)</p>	<p><b>Occupational therapist :</b> The practice of ergotherapy (occupational therapy) consists in evaluating functional capacities, designing and implementing a treatment and intervention plan, developing, restoring or maintaining capacities, compensating for incapacities, reducing situations of handicap and adapting to the environment in order to promote optimal autonomy of the human being in interaction with his/her environment. (pp. 26-28)</p>
<p><b>Nurse:</b> The practice of the nursing profession consists in evaluating the state of health, determining and ensuring the implementation of the nursing care plan and of nursing treatments, delivering care and nursing and medical treatments in order to maintain and re-establish the health of the human being in interaction with his/her environment, preventing disease, and providing palliative care. (pp. 28-30)</p>	<p><b>Physician:</b> The practice of medicine consists in the following evaluating and diagnosing any health deficiency, preventing and treating diseases in order to maintain or re-establish health in the human being in interaction with his/her environment. (pp. 30-31)</p>
<p>Information, health promotion, and the prevention of suicide, disease, accidents and social problems, are also part of the practice of the profession towards individuals, families and communities.<sup>4</sup></p>	

# **Potentially Harmful Activities Which Should Be Reserved**

## **(Chapter 2)**

The Expert Committee relied on precise foundations, including the legislative framework implemented through the Law. It is important to mention that reserved activities already granted by the Law to physicians, nurses and occupational therapists remain so, and that the additional reserved actions proposed are additions to their practice.

Moreover, one of the fundamental principles of the Law emphasizes the necessary correlation between the activities reserved to the members of a professional order and the description of their scope of practice - which is not reserved.<sup>5</sup> The articulation between the scope of practice and reserved activities makes it possible to better understand the scope of an activity, in particular when it is shared between several professionals.

Eventually, two criteria guided the Expert Committee in its task of identifying the activities which should be reserved:

- risk of harm;
- training in its relation to the degree of complexity of the activities, which implies that only the persons possessing the skills necessary to perform an activity are eligible to perform it.