



Registered Nurses' Association of Ontario
L'Association des infirmières et infirmiers
autorisés de l'Ontario

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College of Nurses of Ontario
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January 30, 2017

RE: Request that CNO pursue a regulation to enable RN initiation of psychotherapy

Dear Anne,

Thanks for the excellent meeting at the Registered Nurses' Association of Ontario's (RNAO) home office on Jan. 25, 2017. Amongst the items we discussed was RNs' ability to initiate psychotherapy. As we have expressed on several occasions in the past,^{1 2 3} RNAO is requesting the College of Nurses of Ontario (CNO) reconsider its approach to the initiation of psychotherapy.

If psychotherapy is proclaimed as a controlled act in the near future, RNs will be authorized to perform psychotherapy, and yet be excluded from initiating treatment. At our meeting, as in the past, the CNO could not provide a compelling rationale for its decision to allow treatment and not initiation. Instead, CNO has refused to pursue an initiation regulation for psychotherapy as a controlled act as specified under Part Three of the *General* regulation under the *Nursing Act*. This forces RNs who have been safely performing psychotherapy for years, and sometimes decades, to obtain an order from a physician or nurse practitioner. Requiring such an order will delay access to mental health services across the province, especially in rural and remote communities with limited access to NPs and MDs.

CNO is the only regulatory body to take this approach, unlike regulatory bodies for occupational therapists, registered psychotherapists, social workers, psychologists, and physicians. Thus, RNAO strongly argues that CNO is abdicating responsibility for an element of nursing practice that a subset of nurses already have the competency to perform. Nurses who meet the conditions for initiating a controlled act, as with others who have the authority to practice psychotherapy, are best situated to assess their own knowledge, skill, and judgment, a specific client's condition, the appropriateness of intervention, and accept sole responsibility for initiation. Clearly established direct accountability for initiating and performing psychotherapy as a controlled act will best protect the public.

There is a real danger in disrupting and threatening continuity of care for clients already in a psychotherapeutic relationship. Preventing RNs from initiating psychotherapy undermines confidence in the RN, who has expertise in psychotherapy, and encourages them to leave nursing to join the College of Registered Psychotherapists of Ontario.

Too many Ontarians struggle daily to access high quality mental health and addiction care. We urge CNO to act on RNAO's request.

We look forward to your action on this critical matter.

Warm regards,



Doris Grinspun, RN, MSN, PhD, LLD(hon), O.ONT
Chief Executive Officer, RNAO

CC: CNO Council
RNAO Board of Directors
Hon. Dr. Eric Hoskins, Minister of Health and Long-Term Care
John Fraser, Parliamentary Assistant to the Minister of Health and Long-Term Care
Dr. Bob Bell, Deputy Minister of Health and Long-Term Care
Denise Cole, ADM, Health Workforce Planning & Regulatory Affairs Division

References

¹ Registered Nurses' Association of Ontario (2014). Letter to CNO: Requiring an order to perform psychotherapy. Toronto: Author. <http://rnao.ca/policy/letters/cno-re-requiring-order-perform-psychotherapy>

² Registered Nurses' Association of Ontario (2015). Letter to CNO: Initiation of RN psychotherapy. Toronto: Author. <http://rnao.ca/policy/letters/cno-initiation-rn-psychotherapy>

³ Registered Nurses' Association of Ontario (2016). Letter to John Fraser: Follow up on meeting and RN psychotherapy. Toronto: Author. <http://rnao.ca/fr/policy/letters/RN-psychotherapy>