

To Be or Not to Be: The Issues of Professional Regulation

Incorporated in 1970, the Canadian Association of Rehabilitation Professionals is relatively young in comparison to other professional associations such as social work or psychology. The Canadian Association of Social Workers has been in existence since 1926, and the Canadian Psychological Association since 1940. Both of these disciplines have had long historical struggles in the pursuit of regulation, licensure and certification. CARP needs to examine what regulation is and reflect on the questions as to what it may mean for our interdisciplinary profession.

Advantages – To Be:

Professionals argue that there are advantages to pursuing regulation, licensure and/or certification. Regulation supported by provincial legislative acts is aimed at protection “for the physical and psychological health and safety of the public from incompetent, unethical or impaired practice of the profession” (Health Professions Act, Alberta, p23). In other words, we declare the public is at risk by incompetent services in our profession and regulation is required to ensure competent practice. The public will only know who is competent to practice if the profession is regulated. With regulation the standards and guidelines established by the profession are legislated and are overseen by a Regulatory College who is answerable to the government authority.

Becoming regulated provides professionals with recognition and validation of their profession. An important assumption believed by many professionals. Another advantage is the professional nature created by the collective group, a body of like-minded individuals that allows for opportunities of networking and educational pursuits. Accountability is an important issue. Regulation will provide more accountability to the competence of practice and therefore “protect the public”. Regulation does mean though the government has the legal authority to be involved.

Licensure is another route that many professionals see advantages too. A governing body grants the right to practice in the activities of a given occupation by mandating standards and guidelines. The licensing process implies that all people using the “legal title of the profession or trade” have obtained the appropriate qualifications and license to practice. Typically, a professional association monitors the conduct of practice by providing the standards and guidelines to abide by. For example, the title Registered Nurse (R.N.) is licensed to practice nursing. This may mean though that individuals with out the title can be denied the right to practice. It does provide a sense of “legitimacy” that professionals are seeking and another safeguard for accountability.

Certification is another means of providing more stringent guidelines for practice. Individuals have met certain requirements established by an association and demonstrated standard competencies within the profession. A voluntary certification process can be an advantage for recognition of the profession and

can create a highly respected credential in public demand. Credentials indicate that individuals have met the requirements (i.e.: examination, experience) of the association, but they do not restrict the right of others who are not certified to practice. Each certification body has a discipline procedure and operates under specific rules and requirements designed to ensure objectivity of the program as well as the reliability and validity of the examination. Certified individuals will abide by the governing association's Code of Ethics.

Cautions & Concerns – Or Not to Be:

When a professional association begins to explore the concepts of regulation, licensure an/or certification issues arise. Regulation will mean an avenue for the public to appeal to an independent body, if an investigation of negligence is necessary, and consequently the ability to impose sanctions on a person's practice if found negligent. It also creates exclusivity in terms of who gets to practice. An individual may not meet the standards and criteria for admission into the regulated profession although has been practicing in the field for years. Another concern, shared by some professionals, is that a profession's pursuit of self-regulation is a means of advancing their own interests and creating an elitist group of practitioners. For example, government contracts are only available to a regulated professional. The motivation for regulation then, is self-preservation and not as a means of protecting the public from incompetent practice.

Another caution is the issue of eligibility versus accountability, who should be in and who should not, rather than accountability for practice. Do we seek control of title or do we seek control of practice? Each avenue has inherent difficulties. Evidenced in Quebec, where the title of Social Worker was regulated," the result was a systematic declassification of positions from social work to something else to circumvent the regulatory process and the change of title by social workers themselves for the same purpose" (Walsh, 1990, p15). Pursuing control of title would play havoc with an interdisciplinary profession such as ours. Control of practice, requires developing objective standards to measure practice competence to hold people accountable: not an easy task.

Although a certification process could be implemented at a national level, the power to license occupations or profession remains exclusively a provincial jurisdiction. Similar issues as already stated apply to both of these areas: difficulties with identifying objective standards and guidelines for an interdisciplinary profession and restricting the rights of persons to practice.

CARP Provinces/Region Overview

Each province has their own set of rules when it comes to regulation of health care professions, another inherent difficulty of the process. Each society/region will explore their options to what their particular membership wants in regards to regulation, licensure and/or certification. For example, a significant proportion of CARP Ontario's membership practices in the domain of rehabilitation counselling (private for profit sector) and so is pursuing regulation of "Rehabilitation

Counselors” as defined by the Commission on Rehabilitation Counselor Certification (CRCC). In Alberta, the Association of Registered Social Workers has been declared a potential regulated profession under Alberta’s new Health Professions Act, 1999. Spokespersons with the Department of Health and Wellness, Alberta Government indicated that our chances of having the Act amended to include a proposal for the profession of rehabilitation is very slim. We would need to identify why rehabilitation would not be included under the auspices of the Alberta Association of Registered Social Workers and how and why we impose a public risk. British Columbia CARP membership attempted the regulation process and was not able to satisfy the government that they should be considered different from social workers/psychologists and that they presented a “public risk”. Recently, CARP BC has been pursuing more the option of licensure.

CARP National – What have we achieved?

Presently, CARP has achieved a voluntary registration process that issues a certificate of registration to those members who have met the criteria of the identified core academic competencies and qualifying work experience. Voluntary standards and guidelines can stand independently and guide professional practice, somewhat like a blue print. These standards are descriptions of what the association members have agreed in consensus of what individuals have to know and be able to do in order to practice effectively. Standards may define what competencies are needed to practice, without regard to how the competencies are acquired, although CARP has agreed to a minimum undergraduate degree as an academic knowledge base. Belonging to the CARP Registry implies that ethical standards will be adhered to but an individual’s competence to practice becomes their responsibility. There is no automatic progression from voluntary standards/guidelines to regulation, licensing or certification.

Our certification processes are specific to areas of specialization such as Certified Rehabilitation Counselor (CCRC) and Certified Vocational Evaluators (CVE). Certifications in these two examples are a voluntary process. These certification programs cannot restrict the rights of others to practice in the profession. It is anticipated that CARP as a federation of alliances will have additional societies join under the CARP umbrella, and bring other specialized certification processes. The Registry will remain as the minimum standard for recognition of rehabilitation professionals within our association.

Exploring Alberta’s provincial regulation procedures, it is interesting to note that at a National level, the Association has achieved two major milestones.

- a. Evidence of competence. Fulfilling **one or more** of the following: education requirements, experience requirements, successful completion of examinations or holding certificates or diplomas
- b. Continuing Competence program – to maintain competence and to enhance the provision of professional services

Should provincial societies pursue regulation then another step is the development of a college and council. The provincial society's structure could potentially form these two.

Where do we go from here?

There are no easy answers and lots of questions. Our voluntary Registration standards and guidelines becomes a blueprint to guide our practice. The Registry process demonstrates the interdisciplinary nature of rehabilitation and provides a foundation for our profession. Thinking about the future and the direction to proceed is important. CARP members are still adapting to the Registry standards and the Continuing Education Competence program. Too much change too quickly can be disastrous for our membership. Caution is recommended to the Provincial societies and region to clearly understand what their membership wants to strive for. Maybe this is the time to increase public awareness by becoming more visible and to increase the attention towards our profession by the introducing the standards and guidelines adopted and the new Code of Ethics? The discussion has only begun.

Professional regulation: refers to public or private mechanisms by which professions are mandated to assure provision of quality service and thereby public protection. Self –regulation is an overseeing of these mechanisms of the governing body by its members.

- **Registration:** is granting a certificate of registration by a public or private governing body. Registration attests to persons meeting objective criteria or qualifications to carry out an occupational activity. Registered practitioners pledge to adhere to ethical standards, however their competence in the provision of service is their own responsibility.
- **Certification:** refers to granting a certificate by a public or private governing body. Certification attests to a person's attainment of specific knowledge and skills agreed to by consensus of an authorized body. Must adhere to ethical and competence standards and there is an avenue for consumer complaint. Allows for a more finite judgement of individual competency than does registration. Certification can be voluntary.
- **Competence:** means the combined knowledge, skills, attitudes and judgment required to provide professional services.
- **Licensure:** refers to the issuance of a licence by a publicly mandated governing body granting right to engage in the activities of a given occupation. Licensure attests to a person's attainment of degree of competency required to ensure protection of the public's health/welfare or safety. Must adhere to ethical and competency standards and there is an avenue for consumer complaints.
- **Restriction of title:** refers to public or private prescribed designations which facilitate consumers distinguishing regulated professions from unregulated care providers and to distinguish among regulated professions.

(Roderick, 1990)