

November 2006

Regulation of Health Professions in Ontario:

New Directions

A Report to the
Minister of Health
and Long-Term Care
on the use of Titles
in the profession of
Psychology



Submitted by the
Health Professions
Regulatory Advisory Council
(HPRAC)



November 1, 2006

Honourable George Smitherman
Minister of Health and Long-Term Care
10th Floor Hepburn Block
80 Grosvenor Street
Toronto ON M7A 2C4

Dear Minister,

HPRAC is pleased to submit to you its recommendations concerning the use of titles in the regulated profession of psychology in Ontario, as indicated in the New Directions report to you of April 2006.

The issue came to HPRAC's attention on numerous occasions during our consideration of legislative framework matters in response to your referral letter of February, 2005. It is a long-standing matter, having been brought forward initially at the inception of the *Regulated Health Professions Act, 1991*. In preparing this report for you, HPRAC traced activities that have occurred within the profession in Ontario since the introduction of the *RHPA*, reviewed impacts on members of the public, and conducted a review to ascertain what titles in the psychology profession are authorized in other jurisdictions.

We trust you will find this report informative and helpful.

Yours truly,



Barbara Sullivan, Chair



Peter Sadlier-Brown, Vice-Chair



Barry Brown



Kevin Doyle



Ennis Fiddler



Mary Mordue

Use of Professional Title Designation Issues in the Regulated Profession of Psychology

The Request to HPRAC

In its April 2006 *New Directions* report to the Minister, HPRAC indicated that, in response to the request by the Ontario Association of Psychological Associates (OAPA) that it examine the use of the titles “psychologist” and “psychological associate” by members of the College of Psychologists of Ontario, it would conduct a review and consultations on the issue, and present recommendations to the Minister.

HPRAC’s Central Response

Having considered the perspectives of those with an interest in the matter, the public interest and requirements in other jurisdictions, HPRAC recommends that the Minister take no initiative at this time to amend the legislation or regulations respecting the use of titles in the profession of psychology.

Background

As of September 2006, there were 473 practicing members of the College of Psychologists of Ontario (CPO) with a masters degree. They are authorized by the *Psychology Act, 1991* to use the title “psychological associate”. Doctoral degree holders who are practising members of the CPO, currently numbering 2,338, are permitted to use the title “psychologist”. To qualify for entry to practise as a psychological associate, masters degree holders must engage in at least four years of post-graduate supervised practice. All members of the CPO, whether psychologist or psychological associate, are required to pass a national examination for entry to practise in Ontario. The scope of practice for all members of the profession is identical.

The issue of title use by masters degree holders was raised by the Ontario Association of Psychological Associates (OAPA) during HPRAC’s consultations in 2005/06 on matters relating to the *Regulated Health Professions Act, 1991*, and in particular, the *Psychologists Act, 1991*. Masters degree holders in the profession of psychology contend they should be permitted to use the title “psychologist”, since they share the same scope of practice and controlled acts as those with an earned doctorate, and are equivalent in practice skills. Their professional association raised the concern that their status as full members of the CPO is not recognized by third party organizations, such as insurers, and that this significantly affects their patients and clients. Further, HPRAC heard, the title “psychological associate” causes confusion within the public about the skills of psychological associates and psychologists.

This issue predates proclamation of the *RHPA* in 1993. It has persisted to this day with resultant tensions between masters degree holders and doctoral degree holders who are members of the College of Psychologists of Ontario. The issue was considered by the College Council in 2000, which decided that there should be no change to the titles as they are described in the legislation. The OAPA requested HPRAC to review the matter in 2005.

Jurisdictional Review

Following submission of its *New Directions* report to the Minister, HPRAC conducted a jurisdictional review of academic requirements and use of titles in the psychology profession. HPRAC found that these vary considerably. A brief summary of the use in other jurisdictions follows below.

Canada

In Canada, the provinces of British Columbia, Manitoba and Ontario require a doctoral degree in psychology for registration as a “psychologist”. In British Columbia and Manitoba, there are exemptions in the restricted use of the title for those employed by school boards, hospitals, community agencies and other publicly-funded organizations. In Ontario, an exemption for the restricted use of the title “psychologist” exists for university faculty.

In other Canadian provinces and territories, masters level graduates are permitted to use the title “psychologist” and to practise independently, with some caveats. In January, 2006, Alberta masters degree holders were permitted to use the title “psychologist”. In Prince Edward Island there are restrictions on use of titles depending on the practise setting. While all members are permitted to practise independently using the title “psychologist”, doctoral level graduates are permitted to work in private practice and masters level graduates are authorized to practise only in institutions and agencies operated by the provincial or federal government, including a hospital, a school or similar organizations.

In Quebec, until recently, all members of the *Ordre des Psychologues* were permitted to use the title “psychologist”, regardless of whether they have a masters or a doctoral degree in psychology. In July 2006, the entry to practice requirement became a doctorate in psychology, and masters degree programs in psychology are to be replaced with professional doctoral programs. Graduates of three different types of doctoral programs will qualify for registration as a psychologist: 1. those who complete a four-year PhD with a thesis with the likelihood of a career in research or teaching; 2. those who complete a four-year professional PsyD and expect to pursue a career in clinical practice, and 3. a six-year combined PhD and PsyD program for those wanting a career in applied research and clinical practice. Current masters degree holders as well as those currently

enrolled in masters degree psychology programs will have their credentials recognized and may use the title “psychologist” upon registration with the Ordre. Eventually all new members of the Ordre will have a doctorate designation.

United States

In the United States, there is little consistency in the use of titles. Many states require psychologists to have a doctoral degree in psychology but there are also exceptions and exemptions.

West Virginia permits masters degree holders to practise using the title “psychologist”. Several states, including Indiana, Wisconsin, Virginia and Ohio, which require a doctoral degree to practise as a psychologist and to use the “psychologist” title, have exemptions which permit masters degree holders to practise independently using the title “school psychologist”.

Some states, including Alaska, Kansas, Kentucky, Oklahoma, Oregon, Tennessee, Texas, Wyoming and Vermont permit masters degree holders to practise independently but require them to use various titles such as psychological associate, psychological examiner, licensed psychological practitioner, licensed clinical psychotherapist, licensed behavioural practitioner, licensed specialist in school psychology and psychologist-master.

Yet other states, including Alabama, California, Maine, Minnesota, New Mexico and North Carolina, permit masters degree holders to practise under the supervision of a psychologist. They may use titles such as psychological technician, psychological assistant, psychological examiner, licensed psychological practitioner, psychologist associate and licensed psychological associate.

United Kingdom

In the United Kingdom, the profession of psychology and related professions are currently being considered for statutory regulation as the Psychological Professions Council, and consultations are now proceeding. At present, qualifications for the 43,000 psychologists are set by the British Psychological Society, the professional self-regulatory association for academic, clinical and chartered psychologists, which identifies several types of psychologists, depending on their postgraduate qualifications or training: Clinical, Counselling, Educational, Forensic, Health, Occupational, Neuropsychologist, and Teaching & Research.

The Society grants the legally recognized titles of “Psychologist” to those who have a recognized first degree in Psychology and “Chartered Psychologist” to those who also have recognized postgraduate qualifications, or have undergone approved postgraduate training and supervision; have been judged fit to practise independently, and have agreed

to follow a strict Code of Conduct and be answerable to a disciplinary system in which non-psychologists form the majority.

Findings from the jurisdictional review show significant variations in required academic qualifications and title use in the profession of psychology across Canada, the United States and the United Kingdom. Within Canada, required academic credentials vary for use of the title “psychologist”, with some provinces requiring a doctoral degree and others requiring a masters degree. Recently, Quebec decided to recognize the “psychologist” title and training at the doctoral level. Alberta recently recognized masters graduates as “psychologists”. In the United States, in those states where a doctoral degree is required to practise as a “psychologist”, there are generally exemptions so that this title may be used by masters degree graduates employed in organizations such as government agencies, schools and hospitals where there are internal accountability mechanisms. In jurisdictions within the United States where masters degree holders may practise independently or under supervision, there is much variation in the titles used. In the United Kingdom, where there is a single voluntary self-regulatory body that sets qualifications for the profession, the regulation of psychologists, including titles to be granted to members of the profession, is under consideration at present, with a consultative process now underway.

The Consultation Process

HPRAC synthesized and analysed input from public hearings, and conducted interviews with several key informants to obtain information on this issue: the College of Psychologists of Ontario; the Ontario Association of Psychologists; Canadian Life and Health Insurance Association; Insurance Bureau of Canada; Chief Psychologist, Durham Catholic District School Board; and the Ontario Association of Psychological Associates. HPRAC also received written submissions from numerous individual psychological associates and psychologists.

The Ontario Association of Psychological Associates (OAPA)

The OAPA and its members who made written submissions highlighted several issues regarding use of the title “psychological associate”. HPRAC heard that psychological associates must pass the same national examination as psychologists for entry to practice in Ontario, and that all members of the College of Psychologists have an identical scope of practice and controlled acts. Psychological associates believe that the term “associate” conveys the impression to many outside the profession that psychological associates are not fully autonomous regulated professionals and may even be assistants.

The OAPA presented examples of specific situations where the use of the title “psychological associate” has posed a problem for their members and their clients. For instance, under the federal *Income Tax Act*, persons with disabilities or their family caregiver may claim a disability tax credit. Recently, disability tax credit claims of some

clients of psychological associates reportedly have been rejected by income tax assessors as Form T2201, “Disability Tax Credit Certificate” lists a “psychologist” as an acceptable health care professional who can attest to the disability but does not list “psychological associate”. Assessors do not interpret the term “psychologist” to include all members of the CPO, including psychological associates. This situation may change as HPRAC has lately heard from the CPO that, in a recent communication from the Canada Revenue Agency (CRA) to the College, the CRA has determined that psychological associates may certify the Disability Tax Credit Certificate.

HPRAC was told that there is a similar problem for clients who have been in a traffic accident and are applying for accident benefits. Applications to the Financial Services Commission of Ontario for approval of an assessment have been rejected as adjusters consider that a psychological associate is not a regulated health professional with the same standing as a psychologist. The OAPA argued that although the Commission’s Professional Services Guideline No. 01/05 lists psychologists and psychological associates as acceptable health care professionals, this is not reflected in the forms of the Financial Services Commission, such as the OCF-3: Disability Certificate, that clients and their health professional are required to complete.

HPRAC found that the Commission’s most recent guideline, Professional Services Guideline No. 06/06, continues to give recognition to both psychologists and psychological associates and sets the same fee for their services. The recognition given to psychological associates is highlighted by Bob Christie, CEO and Superintendent of Financial Services, in Bulletin No. A-06/06 as follows:

Insurers are reminded that psychological associates are members of a health profession governed by the College of Psychologists of Ontario. Psychological associates may sign and submit an OCF-22 Application for Approval of Assessment or Examination pursuant to the SABS [Statutory Accident Benefits] in accordance with their scope of practice.¹

The OAPA, along with the CPO, has attempted to educate such organizations on the status of psychological associates within the CPO and on their scope of practice. By raising this issue with HPRAC, the OAPA has promoted the need for greater recognition of the scope of practice of psychological associates.

The Ontario Psychological Association (OPA)

The OPA and the majority of its members who made written submissions to HPRAC are of the opinion that, in Ontario, a doctoral degree in psychology has been the educational standard for psychologists, since well before passage of the *Psychology Act, 1991*, and this should not change. The OPA holds that the trend in Canadian and American

¹ Website of the Financial Services Commission of Ontario
http://www.fSCO.gov.on.ca/english/pubs/bulletins/autobulletins/2006/a-06_06.asp

jurisdictions is to require doctoral level training for the practice of psychology. According to the OPA, to grant masters degree holders use of the title “psychologist” would be to challenge this trend. HPRAC heard from OPA members that doctoral degree holders have a broader knowledge base and have undergone more structured training covering the full breadth of skills of the profession. In HPRAC’s discussions with the OPA, the Association indicated that it could support masters degree holders using a title such as “school psychologist” for those working in the education system.

The College of Psychologists of Ontario (CPO)

The CPO has previously attempted to address the title issue during the time of the review of the *Regulated Health Professions Act, 1991 (RHPA)* in 1999-2000. The College considered changing the title “psychological associate” to “associate psychologist”, and consulted with its members on an appropriate title for the masters level graduate. However, the members were divided and the College determined to maintain the statutory titles, and not seek changes to them.

The College has been supporting the efforts of the OAPA in providing information to external organizations to clarify the scope of practice of psychological associates.

The Insurance Sector

The Insurance Bureau of Canada is an association of private companies that provide property and casualty insurance in Canada. The Canadian Life and Health Insurance Association represents the interests of its member companies that provide life and health insurance and administer roughly two-thirds of pension plans in Canada.

HPRAC met with these industry associations to be apprised of their current practices, their understanding of the role of psychological associates and how their members recognize their credentials. Both associations indicated that they had attempted to inform their membership of the scope of practice of masters degree level members of the CPO.

The Insurance Bureau of Canada’s position is that both psychologists and psychological associates may deliver treatment but that only psychologists, as one of eight professions authorized by regulation in Ontario, may authorize treatment plans -- although in Part 1 of the Statutory Benefits Schedule of the *Insurance Act* a psychologist “means a person authorized by law to practise psychology”. Thus, psychological associates may submit the OCF-22 form for approval of assessment but they are not authorized by insurance companies to sign the OCF-3 form regarding disability nor the OCF-18 form, part 5, regarding the treatment plan.

In its discussions with these two organizations, HPRAC received assurances from them that if there was evidence of continuing problems with their members recognizing the status of psychological associates within the CPO, they would provide additional

information to their members to clarify the situation. HPRAC has since learned of such problems, and conveyed that information to the associations.

Chief Psychologist, Durham Catholic District School Board

HPRAC conducted informal interviews to gather information concerning roles of psychological associates in the public school system. HPRAC heard that among parents, teachers and principals, there is little confusion about the title “psychological associate” and there is a general understanding that the job function of psychological associates in the school setting is comparable to that of psychologists. In some school boards, psychological associates and psychologists have different roles: clinical, supervision, policy, research and system-wide issues may be assigned to doctoral degree holders due to the extra breadth and depth of their training. In recognition of their higher education, doctoral degree holders are paid a higher salary by most school boards.

With respect to training, HPRAC heard the opinion that there is a qualitative difference in the skills obtained through doctoral degree education and masters degree education. Doctoral degree holders receive significantly more training in differential diagnosis covering a broad range of disorders affecting children and adolescents. They also undergo supervised clinical internships.

To qualify for registration with the CPO, the masters degree applicant must have completed four or more years of relevant, post-masters degree, full time (minimum 1500 hours/year), or equivalent part time work experience. At least two years must be completed under the supervision of a regulated member of the profession. Relevant work experience includes the provision of psychological services under supervision and the provision of mental health services that are related to the practice of psychology.

According to some stakeholders, in contrast to the internships required of doctoral level graduates, this experience can often be characterized as “one year of experience repeated four times” since there may be little variance in client profiles and practice requirements during the four-year period.

There was support expressed for changes to CPO entry to practice requirements, including immediate eligibility for registration with the CPO after receiving the masters degree. It was suggested that the four-year work experience waiting period requirement following the completion of the academic program is a disincentive for some masters degree holders to register with the CPO. Masters graduates may choose instead to work in school boards under the supervision of psychologists as unregulated practitioners using titles such as “psychometrist” and “educational consultant”. However, it was noted that being a member of a regulated professional college is an important public protection and accountability measure. It was also suggested that the College should introduce

increased rigour into the work experience requirements for masters graduates to ensure that their competencies and experience are similar to those of the doctoral applicant.

Background to the Request

1991 Memorandum of Agreement

HPRAC's understanding from key informants is that the title provisions in the *Psychology Act*, 1991 were based on a Memorandum of Agreement signed in 1991 by the Ontario Board of Examiners in Psychology, the Ontario Psychological Association and the Ontario Association of Consultants, Counsellors, Psychometrists and Psychotherapists which represented masters degree holders in psychology.²

The agreement allowed membership in the CPO to those providers of psychological services who had a masters level degree. In the agreement, masters degree holders were to have the full scope of practice permitted to doctoral degree holders with the exception of the controlled act of communicating a diagnosis. It was agreed at the time that masters degree holders could have access to the psychologist title through a specialty designation system that would be developed subsequent to the passage of the legislation. The agreement allowed the possibility that masters degree holders could use the title "psychologist" if the specialty designation required the controlled act of communicating a diagnosis.

HPRAC's understanding is that, in the process of drafting amendments to the Bill (when the Bill was being considered by the Legislative Committee following second reading) to reflect the signed accord, the agreement to restrict the controlled act of communicating a diagnosis to doctoral level professionals was not incorporated. As a result, the legislation permitted masters degree holders the controlled act of communicating a diagnosis without their first undergoing examinations and testing that may be required for the specialty designation system that was being contemplated.

August 1999 HPARB ruling

In August 1999, the Health Professions Appeal and Review Board (HPARB) ruled on a registration appeal by a psychological associate that asserted masters degree holders were not restricted from communicating a diagnosis.³ HPARB's order in this matter between Glenn G. Webster and the CPO stated the following:

² Taskforce on the extension of regulation to suitably qualified providers of psychological services (November 4, 1991). *Interim Progress Report and Memorandum of Agreement*.

³ Health Professions Appeal and Review Board (August 18, 1999). *Order in the Matter of a Registration Review under section 21(1) of Schedule 2 to the Regulated Health Professions Act, 1991, the Health Professions Procedural Code, Statutes of Ontario, 1991, c.18, as amended between Glenn G. Webster (Applicant) and College of Psychologists of Ontario (Respondent)*.

The *Psychology Act* authorizes any member of the College to communicate diagnoses. It makes no distinction between members with different academic credentials. The *Code* authorizes the College to prescribe classes of certificates of registration and to impose limits upon those classes. Ontario regulation 533/98 establishes a class of certificate for psychological associates authorizing autonomous practice. Nowhere does the regulation identify psychological associates, or applicants with master's degrees, as a class subject to a limitation on the right to communicate diagnoses to clients.

The College introduced the additional step in the registration process for autonomous practice by psychological associates without the benefit of a regulation...the College has, in effect, purported to establish by resolution, two classes of member within the College, one of which may not communicate diagnoses unless they have completed a newly introduced application and passed a newly created oral examination. By doing so, the College has purported to establish a new class of member that is not in accord with the existing statutes and regulations (pp.11-12).

College Decisions and Consultation

Following the HPARB ruling, there were several College Council motions passed and noted in the minutes regarding the title issue. At a College Council meeting on December 3 and 4, 1999, the following motion was passed:

That the title Psychological Associate be changed to Associate Psychologist.

Subsequently, a special College Council meeting on December 22, 1999 reconsidered and rescinded this motion, and decided to consult with CPO members with respect to the title for psychological associates.

At the same meeting, the Council also decided

That the following wording respecting access to the controlled act be submitted to HPRAC:

Subject to any term, condition or limitation on the member's certificate of registration,

1. Psychologists will be permitted to perform the controlled act;
2. Psychological associates may perform the controlled act under supervision;
3. Psychological associates who have met the College's requirements for performing the controlled act will be permitted to do so autonomously.

Thereafter, the CPO canvassed its members on an appropriate title for masters degree holders. A subcommittee was established to review feedback from members.⁴ It found that while psychological associates favoured a change in title, psychologists generally did not.

The consultation generated a number of suggested alternatives to the title “psychological associate”, ranging from “Psychological Assistant” to “Registered Psychometrist”.

There was common ground on three issues but some divergence in the details. Firstly, members wanted their own title, but the PhD holders wanted a distinction made between doctoral and masters degree holders while the master degree holders wanted a title that expressed autonomous practice, practice in psychology and distinction from those who are unregulated. Secondly, members agreed on reserving the “Doctor” title for the PhDs. Thirdly, most members agreed on a distinction in title between members indicating their academic degree but with PhDs wanting the title “psychologist” for doctoral degree holders and the master degree holders wanting the title “psychologist” as a generic term indicating registration in the CPO.

Following review of the subcommittee’s report, the College Council, at its March 31 – April 1, 2000 meeting decided

That the College communicate in its submission to HPRAC that it is in the public interest that the title psychologist be reserved for doctoral level practitioners and that the title psychological associate be reserved for masters level practitioners.

Specialty Designation

The CPO’s registration process requires applicants for registration to declare their areas of competence so that they may be examined and certified to practise in these areas. The College has specified eight practice areas: clinical neuropsychology, clinical psychology, counselling psychology, forensic/correctional psychology, health psychology, industrial/organizational psychology, rehabilitation psychology, and school psychology⁵. The CPO has also specified the minimum knowledge base, skill and training for each of the practice areas. The ability to communicate a differential diagnosis applies to any psychologist or psychological associate, with the exception of those practising exclusively within the area of industrial/organizational psychology.

However, the contemplated specialty designation system envisioned in the 1991 agreement has not been established. Prior to passage of the *RHPA*, a working group was formed with representatives from each of the groups that signed the agreement to examine different models of specialty designation and submitted its report to the transitional College Council. In December 1993, the transitional Council invited input on

⁴ *Report of the Subcommittee to Examine Titles in the College of Psychologists* (March 30, 2000)

⁵ The College of Psychologists of Ontario (August 1999). *The Bulletin* Volume 26, No 1, p.11.

the working group's report and the Council considered the final report in December, 1994.

In September 1995, the Executive of the Council put forward the following five points as working guidelines for the specialty designation for consideration by Council:

1. Specialty Designation is beyond entry level;
2. It must be open to both titles;
3. It requires more than just the passage of time; instead it will require additional examinations, courses and/or training;
4. There may be multiple routes for attaining specialty designation;
5. Specialty designation cannot be put in place overnight.⁶

In December 1995, after reviewing the report of the working group and considering specialty designation, the College Council decided that establishment of a specialty designation system was not feasible without similar recognition of specialties in other jurisdictions, but that it would support development of such a system at the national level. The following motion was passed by the College:

That, given

- the difficulty of determining the scope and definition of specialties;
- the relative youth of the profession, in comparison to other professions with established specialties;
- the availability of alternative ways of providing information to the public regarding practice areas in psychology;
- the prohibitive cost of establishing and maintaining valid and comprehensive procedures for certifying specialists; and
- the lack of sufficient numbers of members to develop and sustain a valid and reliable specialty designation established by regulatory bodies in North America,

The College not proceed with specialty designation at this time.⁷

In June 2001, the CPO signed a Mutual Recognition Agreement (MRA) with psychology regulatory bodies in other provinces and the Northwest Territories to enable mobility of psychologists and psychological associates. The MRA was updated in June 2004.⁸ It specifies the foundational knowledge base and core competencies in psychology. According to the provisions in the MRA, masters level psychologists from other Canadian jurisdictions would be required to practise as psychological associates when relocating to Ontario while psychological associates in Ontario would be permitted to

⁶ The College of Psychologists of Ontario (April 1996). *The Bulletin* Volume 22, No 4, p.1.

⁷ The College of Psychologists of Ontario (April 1996). *The Bulletin* Volume 22, No 4, p.3.

⁸ *Mutual Recognition Agreement of the Regulatory Bodies for Professional Psychologists in Canada*. As amended June, 2004.

practise as masters level psychologists when relocating to a Canadian jurisdiction where this category exists.

Recommendations

HPRAC has reviewed the information that it received, and acknowledges that the circumstances surrounding the debate concerning the use of titles in the profession of psychology are unusual and have a long and controversial history. HPRAC recognizes the current trend to requiring doctoral level academic credentials in the profession of psychology, and that there has been continuing confusion amongst third party insurers in the recognition of the credentials of psychological associates – though progress is being made in addressing this area.

After consideration, it is our recommendation that the Minister, in the absence of further recommendations from the College of Psychology of Ontario, take no steps to change the legislation or regulations respecting titles in the profession of psychology. It is HPRAC's view that this is a matter internal to the CPO, which should continue to attempt to resolve outstanding issues and concerns. HPRAC also suggests that additional steps should be taken to clarify the current role of psychological associates especially to third party insurers, and to those who rely on care or services provided by all members of the CPO.

HPRAC recommends:

1. That the Minister should take no initiative to amend the *Psychology Act, 1991* or regulations under the Act respecting use of the titles “psychological associate” and “psychologist”;
2. That the College of Psychologists of Ontario, the Ontario Psychological Association and the Ontario Association of Psychological Associates enhance their communications initiatives to ensure that patients, clients, third parties and members of the public are informed about the scope of practice of psychological associates as full members of the College of Psychologists of Ontario.

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