



New Zealand
PSYCHOLOGISTS BOARD

Te Poari Kaimātai Hinengaro
o Aotearoa



ANNUAL REPORT TO THE MINISTER OF HEALTH

For the Year 1 April 2014 to 31 March 2015

2015



Hon Dr Jonathan Coleman
Minister of Health
Parliament Buildings
Wellington

Dear Minister

In accordance with section 134(1) of the Health
Practitioners Competence Assurance Act 2003
I am pleased to provide the Psychologists Board's
Annual Report for the year ending 31 March 2015.

On behalf of the Board,

Ann Connell,
Chairperson



Acronyms used in this Report

APC	Annual Practising Certificate
ARUPS	ASEAN Regional Union of Psychological Societies
ASEAN	Association of Southeast Asian Nations
ASPPB	Association of State and Provincial Psychology Boards
CCP	Continuing Competence Programme
CUAP	Committee on University Academic Programmes
CRP	Competence Review Panel
HDC	Health and Disability Commissioner
HPCA	Health Practitioners Competence Assurance Act 2003
HPDT	Health Practitioners Disciplinary Tribunal
HRANZ	Health Regulatory Authorities of New Zealand
IAAP	International Association of Applied Psychology
IPCP	International Project on Competence in Psychology
IUPsyS	International Union of Psychological Science
NRAS	National Registration and Accreditation Scheme (Australia)
NZCCP	New Zealand College of Clinical Psychologists
NZPsS	New Zealand Psychological Society
PsyBA	Psychologists Board of Australia
PCC	Professional Conduct Committee
RA	Regulatory Authority
TTMRA	Trans-Tasman Mutual Recognition Act 1997

Contacting the Board

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Board Structure

The Psychologists Board operates very efficiently under the Policy Governance® model with one governance (Board) committee and three operational (Secretariat) committees. Working Parties are also established on a time-limited, as needed basis.

Psychologists Board Structure as at March 2015

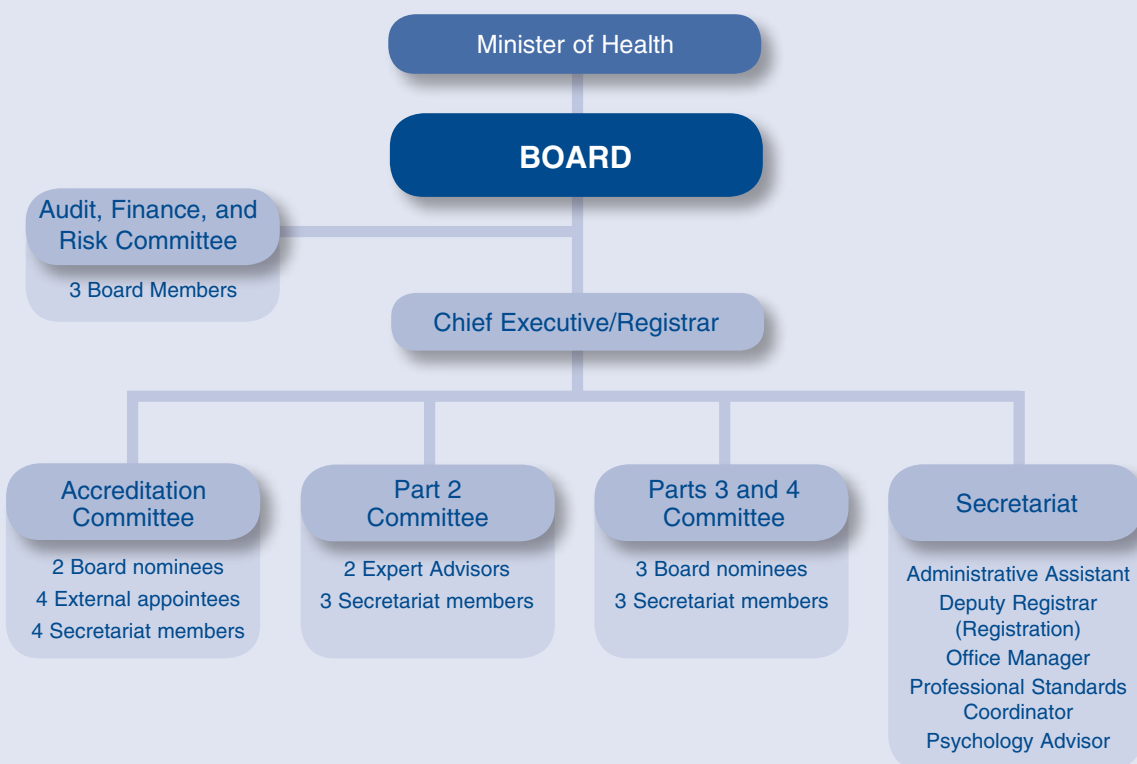


Figure 1: Psychologists Board structure 2015



Audit, Finance, and Risk Committee (Governance)

(Refer section 118 – HPCA Act 2003)

Ms Ann Connell (*Committee Chair*)

Ms Monica Davis

Dr Monique Faleafa

Mr Steve Osborne (*CE/Registrar*) (*non-voting*)

This advisory committee closely monitors financial and non-financial risks, organisational achievement of Ends policy, and the Chief Executive's adherence to Executive Limitations policy. It meets monthly by teleconference (approx. 30 minutes) and reports to the full Board at each Board meeting.

Accreditation Committee (Operational)

(Refer section 118 – (a) (e) (k) – HPCA Act 2003)

Mrs Anne Culver (*Deputy Registrar – Registration*)

Associate Professor Karyn France
(*External stakeholder nominee*)

Mr Jhan Gavala (*Board nominee*)

Ms Gina Giannios (*Professional Standards Coordinator*)
(*from 29 September 2014*)

Ms Stathia Golding (*Professional Standards Coordinator*)
(*to 05 September 2014*)

Dr Richard Linscott (*External Stakeholder nominee*)
(*from 23 December 2014*)

Ms Anne Goodhead (*Psychology Advisor*)

Dr Ian Miller (*Board nominee*)

Professor Mandy Morgan
(*External stakeholder nominee*) (*to 22 December 2014*)

Mr Steve Osborne (*Committee Chair, CE/Registrar*)

Associate Professor Devon Polaschek
(*External stakeholder nominee*)

Associate Professor Karen Salmon
(*External stakeholder nominee*)

This decision-making committee works under delegation to review, consider, and determine the accreditation of those university and agency training programmes that lead to registration as a psychologist in New Zealand. It also monitors New Zealand educational institutions, qualifications, courses of study, and programmes under the HPCA Act. It meets on an ad hoc basis at least three or four times per year, either by teleconference or face-to-face, and also conducts some business by email. A full list of Board-accredited training programmes and their current status can be viewed at <http://www.psychologistsboard.org.nz/accredited-training-programmes2>.

“Part 2” Committee (Operational)

(Refer section 118 – (b)(c) – HPCA Act 2003)

Mrs Anne Culver (*Deputy Registrar – Registration*)

Ms Anne Goodhead (*Psychology Advisor*)

Mr Steve Osborne (*Committee Chair, CE/Registrar*)

Ms Sue O'Shea (*Board-nominated expert adviser*)

Professor Fred Seymour (*Board-nominated expert adviser*)

This advisory committee assists with administration of Part 2 of the HPCA Act by, for example, considering and making recommendations to the Registrar regarding complex applications for registration and/or practising certificates. It conducts its business very efficiently, almost entirely by mail and email.

“Parts 3 and 4” Committee (Operational)

(Refer section 118 – (d)(f)(g)(h)(k) – HPCA Act 2003)

Mrs Beverley Burns (*Board nominee*)

Mrs Beverley Clark (*Board nominee*)

Ms Ann Connell (*Board nominee*)

Ms Gina Giannios (*Professional Standards Coordinator*)
(*from 29 September 2014*)

Ms Stathia Golding (*Professional Standards Coordinator*)
(*to 05 September 2014*)

Ms Anne Goodhead (*Psychology Advisor*)

Mr Steve Osborne (*Committee Chair, CE/Registrar*)

This decision-making committee works under delegation to provide efficient screening, consideration, and determination of conduct, competence, and fitness matters in accordance with Administrative Law, legislative requirements (especially Parts 3 and 4 of the HPCA Act), and Board policy. It conducts most of its business by email, and meets by teleconference or face-to-face only as and when needed.

From the Chairperson

This is the Board's fifteenth Annual Report to the Minister and my third as Chairperson.

In the year covered by this report the Board has made significant progress on two reviews - Accreditation Standards and Procedures, and the Continuing Competence Programme. All Board members attended the Health Regulatory Authorities of New Zealand (HRANZ) conference in May 2014 and valued the opportunity to work with our colleagues from other Regulatory Authorities to develop ideas about "right touch" regulation. This has helped us consider ways in which our processes might be streamlined to improve the experience of the public in their interactions with us and to reduce the cost of compliance, both for practitioners and for the Board in administering the processes.

A further challenge from the conference was for regulators to be "agile", to foresee changes that are going to occur in our field of practice, and to anticipate the risks that will arise as a result of those changes. We have been interested in the work of the Allied Health, Science, and Technical Workforces Taskforce and look forward to contributing to their exploration of the added value that psychologists can have in achieving health targets, particularly for long-term conditions and mental health. Expanding psychology roles to include prescribing is one such possibility. Psychologists are experts in behaviour change and in understanding and working with beliefs, attitudes, perceptions, cognitive abilities, and other drivers of behaviour. A WHO report on adherence to long-term therapies estimated that between 30 and 50% of medicines prescribed for long-term illnesses are not taken as directed.

Psychologists can help with identifying the reasons individual patients make unhealthy choices and can provide strategies to improve compliance with prescribed treatment; they can work with other clinicians to improve ways in which treatments are delivered, from "talking therapies" to creating realistic treatment plans; they can also work at a population level to create more effective health strategies.

The Board is concerned by anecdotal reports that recent changes to student allowances are disproportionately affecting Māori and Pasifika students, making it more difficult for them to complete their training to qualify as psychologists. Māori and Pasifika are already under-represented in the psychology workforce so this is something that we will be monitoring.

There have been no changes of membership of the Board during this reporting period, but we are very pleased to note that the Minister responded favourably to our request to restore the Board to nine members. The two additional positions, one lay member and one health practitioner, will assist with the increased demand on the Board due to the steady increase in registrations, and will mitigate risks associated with the current small size of the Board and the conflicts of interest that subsequently arise. The Board is productive and collegial and anticipates that the new members will bring valuable skills and experience.

I would like to thank the Board's Chief Executive and his staff for their support of Board members and for the effort and professionalism they put into their roles. I would also like to thank all of the psychologists who have contributed to the Board's work over this year.



*L to R: Beverley Clark, Monica Davis, Ann Connell, Beverley Burns, Monique Faleafa, Jhan Gavala, Ian Miller.
As at 31 March 2015.*

Board members

Mrs Beverley Burns

- First appointed July 2008, current term expired July 2014.
- BEd (Waikato), MSocSci(Hons) (Waikato), PGDipClinPsych (Waikato).
- Registered in the Psychologist scope of practice.
- Fellow of the New Zealand Psychological Society.
- Member of NZPsS Institute of Clinical Psychology.
- Eighteen years' experience in mental health and education settings.
- Currently private consultancy specialising in training and development and professional supervision.
- Governance experience includes independent schools and not for profit arenas.

Mrs Beverley Clark (*Layperson*)

- First appointed September 2009, current term expires November 2015.
- Former consumer representative – College of GPs Division of Rural Hospital Medicine.
- Former Chairperson and Member of the Royal College of General Practitioner's Consumer Liaison Committee.
- Served for eight years as a Board member for Central Otago Health Services Limited (Chairperson for five years).
- Ten years' experience on Regional and National Ethics Committees.
- Past governance experience includes a Director role on the Health Funding Authority for New Zealand (HFA) and the Southern Regional Health Authority (SRHA).
- Registered Marriage and Civil Union Celebrant.

Ms Ann Connell (*Chairperson*)

- First appointed July 2011, current term expired July 2014.
- MSc (Otago), PGDipClinPsych (Otago).
- Registered in the Clinical Psychologist scope of practice.
- Fellow of the NZ College of Clinical Psychologists.
- Twenty-nine years' experience in public mental health settings.
- Management and senior leadership experience.

Ms Monica Davis (*Layperson*)

- First appointed November 2012, current term expires November 2015.
- BA/LLB (Auckland).
- Deputy Chair Avonside Girls High School.
- Fifteen years' executive experience in retail and transportation/infrastructure.
- Currently GM People and Performance Te Rūnanga o Ngāi Tahu.

Dr Monique Faleafa (*Deputy Chairperson*)

- First appointed September 2009, current term expires November 2015.
- Doctorate in Clinical Psychology (Auckland), BA (Hons) (Auckland) Registered in the Clinical Psychologist scope of practice.
- Member of the New Zealand Psychological Society.
- Member of Pasifikology (Pacific psychologists' network).
- Sixteen years' experience in non-government organisations and Pacific communities.
- CEO of Le Va, Pasifika national NGO.
- Board Member, Health Promotion Agency.
- Member of the New Zealand Rugby League Medical Council.

Mr Jhan Gavala

- First appointed February 2012, current term expired February 2015.
- PGDipEdPsych, (Massey), MSocSc (Waikato).
- Registered in the Psychologist scope of practice.
- Lecturer at Massey University's School of Psychology in Auckland, where he teaches Bicultural Perspectives in Psychology and Experimental Social Psychology.
- Fifteen years' experience working in the mental health sector as a practitioner and academic.
- Consultant Psychologist to the Ministry of Education.
- Consultant psychologist on Manus Island (MRPC), Papua New Guinea.
- Member of the Te Rau Puawai Board.
- Member of the NZPsS National Standing Committee on Bicultural Issues.
- Former executive member of the New Zealand Psychological Society.
- Former member of Massey University Ethics committee.

Dr Ian Miller

- First appointed September 2009, current term expires November 2015.
- PhD (Psychology) (Canterbury), BSc Hons (Canterbury).
- Registered in the Psychologist scope of practice.
- Former Member of the Alcohol Advisory Council.
- Consultant Psychologist with thirty-nine years' professional experience.
- Previously Manager of Police Psychological Services and Regional Senior Psychologist for Department of Justice Psychological Services.
- Specialist areas: behavioural regulatory change, behavioural risk mitigation, psycho-trauma, and forensic behavioural issues.

Board meetings

Agendas and supporting documents are prepared for each Board meeting and minutes record all formal proceedings. A quorum of four members, including at least one layperson, is required for the Board to transact business. All members are required during meetings to declare any conflicts of interest with agenda items, and a *Declaration of Interests Register* is maintained for all Board members and senior staff. The Board normally meets four times in each financial year, though brief teleconferences can be held where an urgent matter arises between meetings.

Board meeting dates during the 2014/2015 reporting period

- 27 & 29 May 2014 (2 days)
- 20 & 21 August 2014 (2 days)
- 19 & 20 November 2014 (2 days)
- 18 & 19 February 2015 (2 days)

Fees paid to Board Members

The Board Chairperson is paid \$120 per hour, and Board members \$100 per hour. These rates have been unchanged since 2002. The Board have, however, recently reviewed and voted to increase them. From 1 April 2015 the Board Chairperson will be paid \$140 per hour, the Deputy Chair \$130 per hour, and Board members \$120 per hour.



» Operations

From the Chief Executive and Registrar

The 2014/2015 year was, overall, a very positive and productive one for the Board and its Secretariat. Major progress was made toward the colocation of and shared service arrangements between ten Regulatory Authorities (RAs), a grand-parenting pathway to the new ‘Counselling Psychologist’ scope of practice was implemented, and our international links were expanded and strengthened.

Over the year four other RAs moved their offices next to ours and we began sharing reception, boardroom, and other common areas, thereby reducing our overall lease costs. Later in the year our plans for further consolidation and collaboration were crystallised with the signing of a Memorandum of Understanding between the Nursing Council and the nine other “Partner RAs” (including our board). The MoU lays a foundation for participation in a shared “corporate services” arrangement that will see all ten RAs colocate and the Nursing Council establish a business unit that will provide certain core services (property, facilities management, and support for IT and database, finance and payroll, and governance activities) to all of the RAs. At the end of the year the wording of the more detailed Service Level Agreements was agreed. By working together in this way the Partner RAs will benefit from improved business processes, greater resource efficiency, increased resource capacity, significant cost savings, and even more opportunities for cross-pollination and collaboration.

We have previously reported the establishment of a new scope of practice for “Counselling Psychologists”. This year, after extensive consultation based on a solid piece of foundation work by the NZPS’s Institute of Counselling Psychology, the Board adopted a set of core competencies for this scope. There is currently just one accredited training programme in New Zealand (at AUT) that leads to the scope, but we have also implemented a grand-parenting pathway to registration in the scope and have seen a small, but significant number of practitioners apply via that route. The Board have recently been contacted by practitioners who intend to make application for the establishment of another new scope of practice, this one for Neuropsychologists. The Board believe that this scope would serve to better inform and protect the public, and so would welcome such an application.

As reported in the “Linking with Stakeholders” section below, the Board continues to build more and better connections to regulators and professional organisations in North America, Europe, and (perhaps most importantly) in the Asia-Pacific region. We were particularly pleased to be able to meet with the ARUPS Executive Committee and the President of the International Union of Psychological Sciences (IUPsyS) late in the year. We have already begun planning for a larger meeting in Yokohama in 2016 to which all IUPsyS member countries in Asia and the South Pacific will be invited. The goal is to create connections that will enable those countries where the profession is currently under-developed to access information and support to ensure that the foundations for safe practice and “right touch” regulation are laid down early. It is also anticipated that this work will inform and improve all participants’ understanding and appreciation of and respect for the cultural considerations involved, and may facilitate the development of mutual recognition mechanisms that would support inter-jurisdictional practice and workforce mobility.

The annual financial audit conducted on behalf of the Office of the Auditor General (see appended report) has once again found that the Board has sound financial and risk-management systems in place and that the Minister, the public, and the practitioners whose fees fund our activities can all be confident that those funds are being managed responsibly. As a result we have been able to maintain all of our fees at their current levels for the 2015/2016 financial year (refer Table 10 below). The major changes to our operational costs resulting from the colocation and shared services reported above will have a significant impact on our budget for 2016/2017 and beyond. We will therefore be conducting a major review of all of our fees during the 2015/2016 year to ensure that each fee continues to be set purely on a cost-recovery basis, and reflects our new efficiencies and staffing structure.

In closing I would like to once again express my gratitude to the Board, to my staff, and to my Partner RA colleagues for their unwavering support and for all that each of them has done to make this another very successful and satisfying year.

Secretariat Staff



L to R: Anne Goodhead, Lesley Hanson, Steve Osborne, Gina Giannios, Anne Culver, Lynda Young.

The Secretariat

The Secretariat assists the Board by carrying out its day-to-day operational responsibilities including financial management, the organisation and oversight of competence reviews and programmes, the Continuing Competence Programme, health and fitness matters, complaints and discipline matters, accreditation processes, registration and practising certificate applications, supervision requirements, professional liaison, communications, and website maintenance. The (governance) Board has delegated these functions (and the requisite authority to carry them out) to the Registrar, the Accreditation Committee, and the Parts 3 and 4 Committee. This greatly facilitates robust, consistent, timely, and efficient decision-making processes in regard to registration, competence, health, and disciplinary matters.

The Psychologists Board is currently supported by six staff (5.75 FTE):

- Mrs Anne Culver is our Deputy Registrar – Registration.
- Ms Gina Giannios joined us as our new Professional Standards Coordinator on 29 September 2014.
- Ms Stathia Golding was our Professional Standards Coordinator until 5 September 2014.
- Ms Anne Goodhead (BSc Hon (Canterbury), MAAppClinCommPsy (Victoria), MPubPol (Victoria), Clinical Psychologist) is our Psychology Advisor.
- Ms Lesley Hanson is our Administrative Assistant.
- Mr Steve Osborne (BSc, BEd (Distinction), MSc (Calgary), MIPGA, MASPPB, Clinical Psychologist) is our Chief Executive and Registrar.
- Ms Lynda Young is our Office Manager.



» Part 2 of the HPCA Act: Registration and practising certificates

Scopes of practice

The Board has taken a very broad, flexible approach to defining scopes of practice for the profession, thereby minimising any workforce impediments. All psychologists hold the “Psychologist” scope, which includes the foundational, core competencies common to all branches of the profession. The Board has also established “vocational” scopes, but only where they are clearly required for public protection. In this way a psychologist is free to practise in any area in which he or she is personally competent, but the public are also able to readily identify those practitioners who have completed specialised training in Clinical, Counselling, or Educational Psychology. In accordance with section 11 of the HPCA Act, the Psychologists Board has prescribed the following scopes of practice and associated qualifications:

“Psychologist” – A psychologist within a general scope is defined as rendering or offering to render to individuals, groups, organisations, or the public any psychological service involving the application of psychological knowledge, principles, methods, and procedures of understanding, predicting, ameliorating, or influencing behaviour, affect, or cognition. Such practice is undertaken within an individual’s area and level of expertise and with due regard to ethical, legal, and Board-prescribed standards.

The following qualifications are prescribed for registration as a Psychologist in the general scope of practice;

A minimum of a Masters degree in Psychology from an accredited educational organisation, or an equivalent qualification. Eligibility for a general scope of practice requires a Board approved practicum or internship involving 1500 hours of supervised practice.

“Intern Psychologist” – The special purpose scope of practice for postgraduate psychology students comprises of psychology services undertaken as part of the postgraduate internship on which the application is based.

It does not extend to practice or any other activity outside that postgraduate study.

Registration within the special purpose scope of practice will be authorised for the duration of the postgraduate study and applies only to that postgraduate study.

An intern psychologist within a special purpose scope is defined as rendering or offering to render to individuals, groups, organisations or the public any psychological service involving the application of psychological knowledge, principles, methods and procedures of understanding, predicting, ameliorating, or influencing behaviour, affect, or cognition.

Such practice is undertaken within an individual’s area and level of expertise and with due regard to ethical, legal, and board-prescribed standards.

Standard Conditions – May only practise under close supervision while undertaking the internship requirements for the board-accredited post graduate diploma or doctoral course the intern is enrolled in.

An Intern Psychologist scope of practice may be granted to applicants:

- who have completed formal academic studies that have provided them with the foundation competencies required for safe practice in a supervised internship setting, and
- who are enrolled in a board-accredited post graduate diploma or doctoral course of studies.

“Trainee Psychologist” – The special purpose scope of practice for “supervision-to-registration” candidates comprises of psychology services undertaken as part of the board-approved supervision plan on which the application is based.

It does not extend to practice or any other activity outside the approved supervision plan.

Registration within the special purpose scope of practice will be authorised for the duration of the supervision plan and apply only to that supervised practise.

A trainee psychologist within a special purpose scope is defined as rendering or offering to render to individuals, groups, organisations or the public any psychological service involving the application of psychological knowledge, principles, methods and procedures of understanding, predicting, ameliorating, or influencing behaviour, affect, or cognition.

Such practice is undertaken within an individual's area and level of expertise and with due regard to ethical, legal, and board-prescribed standards.

Standard Conditions – May only practise under supervision at their place of employment while undertaking their board-approved supervision plan.

A Trainee Psychologist scope of practice may be granted to applicants:

- who have completed formal academic qualifications that have provided the foundation competencies required for safe practice in a supervised setting, and
- who are entering board-approved supervised practice for the purpose of achieving full registration.

“Clinical Psychologist” – Clinical Psychologists apply psychological knowledge and theory derived from research to the area of mental health and development, to assist children, young persons, adults and their families with emotional, mental, developmental or behavioural problems by using psychological assessment, formulation and diagnosis based on biological, social and psychological factors, and applying therapeutic interventions using a scientist-practitioner approach. Such practice is undertaken within an individual's area and level of expertise and with due regard to ethical, legal, and Board-prescribed standards.

The following qualifications have been prescribed for registration as a Psychologist in the Clinical Psychologist scope of practice;

A minimum of a Masters degree in Psychology from an accredited educational organisation and an accredited Postgraduate Diploma in Clinical Psychology, or equivalent qualification. Eligibility for the Clinical Psychologist scope of practice shall require a Board approved practicum or internship involving 1500 hours of supervised practice.

“Counselling Psychologist” – Counselling

Psychologists apply psychological knowledge and theory derived from research to the area of client empowerment and enhancement, to assist children, young persons, adults and their families with personal, social, educational, and vocational functioning by using psychological assessments and interventions, and preventative approaches that acknowledge ecological, developmental and phenomenological dimensions. Such practice is undertaken within an individual's area and level of expertise and with due regard to ethical, legal, and Board-prescribed standards.

The following qualifications have been prescribed for registration as a Psychologist in the Counselling Psychologist scope of practice;

A minimum of a Master's degree in Psychology from an accredited educational organisation and an accredited Postgraduate Diploma in Counselling Psychology, or equivalent qualification. Eligibility for the Counselling Psychologist scope of practice shall require a Board approved practicum or internship involving 1500 hours of supervised practice.

“Educational Psychologist” – Educational Psychologists apply psychological knowledge and theory derived from research to the area of learning and development, to assist children, young persons, adults and their families regarding their learning, academic performance, behavioural, social and emotional development, by using psychological and educational assessments and applying interventions using systemic, ecological and developmental approaches. Such practice is undertaken within an individual's area and level of expertise and with due regard to ethical, legal, and Board-prescribed standards.

The following qualifications have been prescribed for registration as a Psychologist in the Educational Psychologist scope of practice;

A minimum of a Masters degree in Psychology¹ from an accredited educational organisation and an accredited Postgraduate Diploma in Educational Psychology, or equivalent qualification. Eligibility for the Educational Psychologist scope of practice shall require a Board approved practicum or internship involving 1500 hours of supervised practice.

¹ A Masters degree in Education may be considered equivalent to a Masters degree in Psychology where its content is sufficiently educational psychology in nature.



Accreditation of training programmes

The HPCA Act requires the Board to prescribe the qualifications required for each scope of practice within the profession (see above) and, for that purpose, to accredit and monitor educational organisations and courses of studies. The Board, working in collaboration with the relevant university Heads of Departments, the New Zealand College of Clinical Psychologists, the New Zealand Psychological Society, and representatives of the “supervision-to-registration” schemes has therefore developed a comprehensive set of standards and procedures for accreditation of qualifications leading to registration as a psychologist. These standards (which are currently under review) ensure that, in accordance with the Board’s Global Ends policy, the training and practice of psychologists in Aotearoa/New Zealand reflect the paradigms and worldviews of both partners to the Treaty of Waitangi. Furthermore, in keeping with our obligations under the Treaty (which are also reflected in the Code of Ethics for Psychologists Working in Aotearoa New Zealand 2002), the accreditation standards and procedures require consideration of the adequacy of training programmes for meeting the needs and aspirations of both Treaty partners.

The Board wishes to foster the continuing growth and vitality of psychology as a science, as an academic discipline, and as a key component of New Zealand’s workforce. We therefore strive to implement the requirements of the HPCA Act without impeding the strength and diversity in the discipline, and while attending carefully to the competencies required for the safe and ethical practice of psychology.

The Board conducts its accreditation processes collaboratively with the training programmes in order to minimise duplication and redundancy with other review processes (e.g., CUAP). Further, accreditation review processes are conducted in a positive and constructive manner.

As at 31 March 2015, the Board have assessed and accredited (fully, provisionally, or conditionally) all but one of the training programmes that lead to registration as a psychologist in New Zealand. That programme will undergo assessment in the 2015/2016 year.

The Board wishes to thank the following members of the profession who have served on one or more Assessment Teams or who have volunteered their time as a member of the Board’s Accreditation Committee during the 2014/2015 year.

Clive Banks	Karen Salmon
Elizabeth Jones	Karyn France
Ian Miller	Richard Linscott
Jhan Gavala	John Bushnell
Joanne Walker	Lois Surgenor
Jack Austin	Keith McGregor
Roseanna Bourke	Oliver Mudford
Ros Pullen	

Figure 2: Current status of courses of study monitored by the Psychologists Board

Educational organisation / Course of study	Current Status	Next assessment due
AUT		
Postgraduate Diploma in Counselling Psychology PGDipCounsPsych	Accredited	2017
Massey University		
Doctor of Clinical Psychology DClinPsych	Accredited	2016
Masters in Clinical Psychology MClinPsych	Provisionally Accredited	2015
Postgraduate Diploma in Educational Psychology PGDipEdPsych	Deemed to be Accredited	(on hold)
Postgraduate Diploma in Industrial/Organisational Psychology PGDipI/OPsych	Accredited	2018
Postgraduate Diploma in Psychological Practice PGDipPsychPrac	Accredited	2017
University of Auckland		
Doctor of Clinical Psychology DClinPsych	Accredited	2018
Postgraduate Diploma in Applied Psychology (Applied Behaviour Analysis) PGDipAppPsych(ABA)	Accredited	2018
Postgraduate Diploma in Applied Psychology (Industrial, Work and Organisational) PGDipAppPsych(IWO)	Accredited	2017
Postgraduate Diploma in Clinical Psychology PGDipClinPsych	Accredited	2018
Postgraduate Diploma in Health Psychology PGDipHlthPsych	Accredited	2018
University of Canterbury		
Postgraduate Diploma in Child and Family Psychology PGDipChFamPsych	Accredited	2020
Postgraduate Diploma in Clinical Psychology PGDipClinPsysc	Accredited	2016
Postgraduate Diploma in Industrial and Organisational Psychology PGDipIndOrgPsysc	Not accepting enrolments	Deferred indefinitely
University of Otago		
Postgraduate Diploma in Clinical Psychology PGDipClinPsych	Accredited	2020
University of Waikato		
Postgraduate Diploma in Psychology (Clinical) PGDipPsych(Clin)	Accredited	2017
Postgraduate Diploma in the Practice of Psychology (Applied Behaviour Analysis) PGDipPracPsych(ABA)	Accredited	2018
Postgraduate Diploma in the Practice of Psychology (Community) PGDipPracPsych(Comm)	Accredited	2021
Postgraduate Diploma in the Practice of Psychology (Organisational) PGDipPracPsych(Org)	Accredited	2017
Victoria University		
Postgraduate Diploma in Clinical Psychology PGDipClinPsych	Accredited	2018
Postgraduate Diploma in Educational Psychology Practice PGDipEdPsychPrac	Accredited	2021



Figure 3: Current status of “Supervision-to-registration” programmes monitored by the Psychologists Board

Supervision-to-Registration Agency	Status at 31/03/2015	Next assessment due
New Zealand Department of Corrections	Accredited	2019
New Zealand Defence Force	Accredited	2019

Registration

Registration process

The Psychologists Board does not require applicants to sit any special assessment or examination beyond those completed as part of their academic (including practical) qualifications. The consideration of applications is done by the Registrar under delegation and as a result the application process is very quick, efficient, and consistent. The Board has prescribed and published a set of decision-making guidelines to facilitate the Registrar’s processing of applications for registration. These guidelines include mechanisms that further facilitate the assessment process for overseas applicants who have previously been registered by a competent authority recognised by the Board. However, even where such mechanisms do not come into play, overseas applications are normally fully processed within one or two weeks of receipt.

TTMRA applications and applications from New Zealand graduates are consistently processed within two days. Close monitoring has shown that our registration processes are effective, efficient, timely, and fair, and they have also proven to be very robust in the face of (infrequent) legal challenges.

The Board writes to new registrants to encourage them to undertake training in the Treaty of Waitangi and bi-cultural relations. They are also provided with a copy of the bilingual “*Code of Ethics for Psychologists Working in Aotearoa/New Zealand [2002]*” and copies of the most recent Board *Newsletter* and *Annual Report*.

Table 1: Applications for registration

	HPCAA Section	Number	Outcomes		
			Registered without conditions	Registered with conditions	Application declined
Total number of applications	s 15	202	59	140*	3
Reasons for declining an application					
Does not have prescribed qualifications	s 15(1)(b)	3	0	0	3
Is not competent to practise within scope	s 15(1)(c)	0	–	–	–
Does not meet communication (including English language) requirements	s 16(a,b)	0	–	–	0
Conviction by any court for 3 months or longer	s 16(c)	0	–	–	–
Mental or physical condition	s 16(d)	0	–	–	–
Professional disciplinary procedure in NZ or overseas, otherwise under investigation	s 16(e,f,g)	0	–	–	–
Other – danger to health and safety	s 16(h)	0	–	–	–

*All 140 were standard conditions for Interns/Trainees.

The Board registered 199 new practitioners in 2014/2015, including 59 overseas trained practitioners (9 via the TTMRA) and 140 NZ trained practitioners.

By scope*: Psychologist = 10
Clinical Psychologist = 40
Counselling Psychologist = 3
Educational Psychologist = 6
Intern Psychologist = 138
Trainee Psychologist = 2

The Board registered 9 practitioners via the Trans-Tasman Mutual Recognition Act 1997 this year, which is well below the long-term average of 16.

Annual practising certificates

In order to lawfully practise as a psychologist in New Zealand, a practitioner must be registered with the Psychologists Board and must hold a current practising certificate. Further, all psychologists on the Register must hold a current practising certificate at any and all times they are practising within the scope of psychology, even if they are practising under some other title. [Refer sections 7 & 8 of the HPCA Act 2003].

The Board asks that practitioners renew their APC and update their details online via our website. This is now the primary route for renewals, which helps reduce costs and increase efficiency. We conducted a major campaign during the APC renewal process this year to have practitioners update all of their details on the Register, which has filled in many gaps and given us much more confidence in the workforce data we rely on and that we continue to supply to Health Workforce New Zealand.

Table 2: Applications for an annual practising certificate

	HPCAA Section	Number	Outcomes			
			APC with no conditions	APC with conditions	Interim PC	Application declined
Total number of applications		2527	2518	9*	0	0
Reasons for declining an application						
Competence	s 27(1)(a)	0	–	–	–	–
Failed to comply with a condition	s 27(1)(b)	0	–	–	–	–
Not completed required competence programme satisfactorily	s 27(1)(c)	0	–	–	–	–
Recency of practice	s 27(1)(d)	0	–	–	–	–
Mental or physical condition	s 27(1)(e)	0	–	–	–	–
Not lawfully practising within 3 years	s 27(1)(f)	0	–	–	–	–
False or misleading application	s 27(3)	0	–	–	–	–

*Includes 4 Trainees with standard conditions.



Part 3 of the HPCA Act: Competence and fitness to practise

Overview

The Board has delegated almost all decision-making under Parts 3 and 4 of the HPCA Act to its “Parts 3 and 4” Committee (**“the Committee”**). The Committee provides efficient screening, consideration, and determination of complaint, competence, and fitness matters, in accordance with Administrative Law, legislative requirements, and Board policy. Its membership includes three Board members and three members of the Secretariat. Most of the Committee’s business is conducted by email, but a teleconference or face-to-face discussion may be held when decision-making is challenging.

Performance

The HPCA Act enables the Board to review the competence of a psychologist when there is reason to believe that the psychologist’s competence may be deficient and/or if the Board receives a notice of concerns as outlined in section 34 of the Act. In such circumstances the Board appoints two senior and respected psychologist colleagues to review the psychologist’s competence. Should this ‘Competence Review Panel’ find that the psychologist is not meeting the required standards of competence, then that information is considered by the Parts 3 and 4 Committee. Possible outcomes of a competence review include orders for a competence programme, conditions on the practitioner’s scope of practice, an examination or assessment, or that the practitioner be counselled. For example, there may be a requirement that the practitioner practise only under Board-approved supervision or only in a specified setting.

In the 2014/2015 year, the Board handled the following competence related matters:

Only one new notification was received under section 34 of the Act. Initial enquiries were made about the practitioner’s professional activities to discern whether immediate action should be taken to manage any potential risk to the public. The practitioner had resigned from employment where the concerns were raised and was subsequently practising in a more structured setting. At the end of the period pertaining to this report the competence review was still in process.

A notification received under section 34 in an earlier period had been placed on hold when the practitioner left

the country. The notification was reactivated in this reporting period when she returned and applied for an APC. The subsequent review supported the initial competence concerns. This practitioner left the country again shortly after a competence programme was ordered. This order will be reactivated if and when the psychologist returns to New Zealand and re-applies for an APC.

The Parts 3 and 4 Committee accepted the recommendations of three Professional Conduct Committees (**PCCs**) made under section 80(2)(a) to review the competence of the health practitioners to practise. Of the reviews arising, one found that the psychologist did meet required standards of competence, one review is still in process, and one review has been placed on hold as that practitioner chose to not renew her APC.

In this reporting period the Committee ordered that five psychologists be referred for competence reviews under section 36(4) due to complaint allegations that raised competence concerns. Two of these psychologists withdrew from the competence reviews, stating they were choosing to retire instead. The other three reviews were still in process at the end of the reporting period.

At 1 April 2014, two competence reviews were underway which had been ordered in an earlier reporting period. Both reviews found that the psychologists concerned did not meet required standards and so the Committee proposed orders under section 38 of the Act. One of these psychologists chose to withdraw from the competence programme and subsequently removed herself from the Register. The other psychologist was making good progress in rehabilitating her practice with the help of a Board-appointed supervisor at the close of this reporting period.

The orders arising from another competence review were appealed by the psychologist concerned and were quashed by the court due to some process issues. That practitioner is currently inactive but will undergo a fresh review should she ever choose to apply for an APC again.

Four psychologists were in the process of completing competence programmes at the beginning of this reporting period. Three of those programmes were concluded during the reporting period, all with satisfactory outcomes. The fourth programme has been placed on hold while the psychologist concerned is on extended leave.

Table 3: Competence referrals

Source	HPCAA Section	Number
Health Practitioner	s 34(1)	0
Health and Disability Commissioner	s 34(2)	0
Employer	s 34(3)	1
Other – Parts 3 and 4 Committee	s 36(4)	5
Other – Professional Conduct Committee	s 80(2)	3
Total		9

Table 4: Outcomes of competence referrals

Outcomes	HPCAA Section	Number			
		Existing	New	Closed	Still active
No further action		0	0	0	0
Notification of possible risk of harm to public	s 35	1	2	1	2
Orders concerning competence	s 38	7	0	3	4
Interim suspension/conditions	s 39	0	0	0	0
Competence programme	s 40	7	0	3	4
Recertification programme	s 41	0	0	0	0
Unsatisfactory results of competence or recertification programme	s 43	0	0	0	0
On hold		4	3	na	4
Reviews still in process		0	6	na	6

Continuing competence

Consistent with the principal purpose of the HPCA Act, to “protect the health and safety of members of the public by providing for mechanisms to ensure that health professionals are competent and fit to practise their profession”, the Psychologists Board must be satisfied that a practitioner is competent to practise in New Zealand before being registered and, in accordance with sections 26 and 27, that he or she has maintained the required standard of competence before being issued an APC. Since 2009 the Board has prescribed a Continuing Competence Programme (CCP) as part of its endeavours to meet its obligations under the Act. The dual objectives of the CCP are to provide a framework to assist individual practitioners to address the ongoing challenge of maintaining competence while also giving the Board a mechanism to support and ensure that practitioners

maintain competence. With the exception of Intern and Trainee Psychologists and newly qualified psychologists in their first year of practice, all actively practising psychologists are required to participate in the CCP and to declare they have done so when applying to renew their APC each year.

A random audit of 20% of all APC applications is completed each year and has (to date) demonstrated high levels of compliance with the CCP. The Board has nevertheless initiated a review of the CCP with the objectives of reducing compliance costs while assisting practitioners to direct their learning to proactively maintain competence. It is intended that any proposed changes emerging from the review will be subject to robust consultation and, if adopted, implemented in 2016.



Fitness to practise

Fitness concerns: Inability to perform required functions

Two fitness notifications were received by the Board in the year 1 April 2014 to 31 March 2015. One of these notifications was in relation to a drink-driving charge which brought to attention a practitioner's long-standing issues with alcohol. This psychologist was referred for a fitness assessment as well as the mandatory referral to a PCC. The psychologist entered a treatment programme and voluntarily withdrew from practice for a period of time.

The second fitness notification was self-reported and related to the practitioner entering a treatment programme for mental health issues.

A third psychologist, who had been subject to a monitoring regime over an extended period due to difficulties arising from substance abuse, was discharged from the oversight of the treating physician. Given stable remission had been maintained for three years, the condition on the practitioner's scope of practice requiring oversight was lifted.

Table 5: Source and number of notifications of inability to perform required functions due to mental or physical condition

Source	HPCAA Section	Numbers			
		Existing	New	Closed	Still active
Health service	s 45(1)(a)	0	0	0	0
Health practitioner	s 45(1)(b)	0	2	0	2
Employer	s 45(1)(c)	0	0	0	0
Medical Officer of Health	s 45(1)(d)	1	0	1	0
Any other person	s 45(3)	0	0	0	0
Person involved with education	s 45(5)	0	0	0	0

Table 6 records the actions taken in regard to pre-existing and new fitness notifications over this reporting period.

Table 6: Outcomes of fitness notifications

Outcomes	HPCAA Section	Number of practitioners
No further action	—	0
Order medical examination	s 49	1
Interim suspension	s 48	0
Conditions on scope of practice	s 48	0
Restrictions imposed	s 50	0

Part 4 of the HPCA Act: Complaints and discipline

Overview

There has been a decrease in the number of new complaints received this year (38 new cases compared to 42 the previous year). In this reporting period a total of six complaints were referred to PCCs for a full investigation. Complaints against practitioners writing reports for third parties continue to dominate the statistics (refer Table 8 for a breakdown of new complaints within practice settings).

Complaints

Board decisions on complaints considered in 2014/2015

The outcome section of Table 7 refers to complaints that have been considered by the Board's Parts 3 and 4 Committee. Complaints are typically considered after the matter has been assessed by the Health and Disability Commissioner (where appropriate) and, in the case of a complaint against a Family Court Specialist Report Writer, the Family Court (in accordance with the Family Court's *Practice Note for Specialist Report Writers*³).

The Board managed a total of sixty-two complaints between 1 April 2014 and 31 March 2015, compared to fifty-seven in the previous year. Thirty-eight of these

were new complaints received in the reporting period, while twenty-four were complaints received previously but which were still active at the beginning of the period. Twenty of the twenty-four were closed during the year and four remained open as at 31 March 2015. Of the twenty that were closed, ten were assessed to require no further action, six complaints were referred to a PCC, two were referred for a competence review, and two were withdrawn. During the year three complaints were withdrawn, two of which were complaints in reference to a specialist report for a third party.

Complaints by practice setting

Table 8 below shows the representation of new complaints within the most common practice settings. As indicated above, the majority of complaints are against practitioners preparing reports for third parties. It should be noted that there has been a significant decrease in the number of complaints the Board received this year regarding ACC reports (5 cases compared to 10 the previous year), but that complaints regarding Family Court reports are still the most common type received. It should be noted, however, that most Family Court related complaints are assessed to warrant no further action.

Table 7: Complaints – sources and outcomes

Source	Total Number	Referred to HDC (new cases only)	Not yet considered as at 31 March 2015	Outcome			
				Withdrawn	No further action	Referred to PCC	Referred to CRC
Received prior to, but not yet considered by Parts 3 and 4, as at 1 April 2014	24	NA	4	2	10	6	2
New complaints: Consumers	8	7	1	1	6	0	0
New complaints: Subject of or in reference to a specialist report for a third party ²	23	21	13	0	7	2	1
New complaints: Other	7	4	0	0	3	3	1

² Third-party in this context means the Family Court, Dept. of Corrections, or ACC.

³ Sets out the requirements and recommended procedures agreed for specialist report writers to the Family Court. (Revised version formally came into operation on 24 March 2011).

**Table 8: New complaints by practice setting**

Setting	New complaints	% of total
Private Practice	5	13
Family Court	16	42
ACC	5	13
Department of Corrections	1	3
DHB	3	8
Other	8	21

Professional Conduct Committees

Table 9 shows all PCCs that were in operation at various stages during the 2014/2015 year. Six PCCs were appointed within the period and five were carried over from the previous year.

Table 9: Professional Conduct Committee cases

Nature of issue	Source	Number	Outcome
Concerns about standards of practice	Subject of or in reference to a specialist report for third party	0	
Conduct	Subject of or in reference to a specialist report for third party	1	Still in progress – referred to HPDT (1)
	Other	5	No further action (1) Counselling (1) Referred to competence review (1) Still in progress – referred to HPDT (2)
Concerns about standards of practice and conduct	Subject of or in reference to a specialist report for third party	3	Still in progress (2) No further action (1)
	Other	2	Still in progress (2)

The Board would like to thank the following psychologists and laypersons who assisted the Board by serving on PCCs in the 2014/2015 year:

Psychologists

Ruth Arcus	Renuka Wali
Hamish Dixon	Lois Surgenor
Kevin Garner	Wendy Tuck
Tom Marshall	Suzanne Blackwell
Fred Seymour	Geoffrey Ruthe

Laypersons

Ruth Helms	Pat Oettli
Sarah McNaughtan	Sarah Anderson
Marjorie Noble	

Health Practitioners Disciplinary Tribunal

Two psychologists faced charges before the HPDT in the 2014/2015 year.

Summary of decision of the Health Practitioners Disciplinary Tribunal: Mr Paora Joseph Psy14/291P

At a hearing held on Tuesday 25 to Friday 28 November 2014 inclusive, the Health Practitioners Disciplinary Tribunal (the Tribunal) considered two charges of professional misconduct laid by a Professional Conduct Committee against Mr Paora Joseph, psychologist of New Plymouth (the Psychologist).

The first charge alleged that the Psychologist's conduct amounted to malpractice or negligence in relation to the psychologist scope of practice.

There were two categories of Particulars, the first relating to the provision of psychological services to the Psychologist's client in that he failed to consult, advising his client on aspects of Attention-

Deficit/Hyperactivity Disorder when he was not competent to provide psychological or other services or associated medication in that area, not providing his patient with a reasonable standard of care in certain respects, and not carrying out his professional practice in a manner required of a psychologist.

The second category of Particulars related to the carrying out of his professional practice which did not comply with requirements for development of a Continuing Competence Plan for the years 2009 to 2012 or any of them.

The second charge alleged that the above conduct amounted to the bringing of or likely bringing of discredit to the profession of psychology. The Particulars of the second charge being the same as the first charge.

Finding: The Tribunal found that the Psychologist had not complied with his obligations concerning adequate note taking and certain aspects of professional supervision and proper recording thereof, but also found that these were not, of themselves, sufficient to warrant disciplinary sanction.

The Tribunal found that the Psychologist failed to develop his Continuing Competence Programme for the years in question and that this failure amounted to negligence but did not bring discredit to the profession of psychology.

Those Particulars relating to a failure to consult, inappropriate communication, and inappropriate treatment were found not to be established.

Penalty: The Tribunal ordered that the Psychologist be censured and imposed conditions on his practice for 12 months from the date he recommences practice.

Had the Psychologist not been in receipt of legal aid, the Tribunal would have ordered a payment of \$10,000 towards the costs of the PCC and the Tribunal. The Tribunal also directed that its decision and a summary be published.

(A full decision of the Tribunal can be viewed at www.hpdt.org.nz. Reference No: Psy14/291P.)



Summary of decision of the Health Practitioners Disciplinary Tribunal for publication **Ms Andrea Kathryn Tracey Schubert Psy14/288P**

At a hearing held from 29 October to 31 October 2014 inclusive, the Health Practitioners Disciplinary Tribunal (the Tribunal) considered two charges of professional misconduct laid by a Professional Conduct Committee against Ms Andrea (Tracey) Schubert, psychologist of Nelson (the Psychologist).

The first charge alleged that the Psychologist's conduct amounted to malpractice or negligence in the provision of psychological services to two clients. While undertaking sessions and joint "couples counselling" sessions the Psychologist acted inappropriately and/or failed to maintain appropriate professional boundaries.

The second charge alleged that the Psychologist's conduct brought discredit to the profession. The Particulars of the second charge being the same as the first charge.

Finding: The Tribunal found that in respect of the first charge that the Psychologist continued to act as a psychologist but was also engaging in another role in the nature of a friendship. The Tribunal also considered that the exchanging of gifts and entering into a business transaction with her clients blurred the professional boundaries and were intentional breaches of these boundaries and amounted to malpractice and negligence.

In regard to the second charge the Tribunal found the breach of professional boundaries by the Psychologist to be extensive and over a period of several months and such behaviour could only bring discredit to the profession.

The Tribunal commented that it is the Psychologist's responsibility to maintain appropriate professional boundaries, not the client's. The public must have confidence that they can consult a psychologist and trust that he or she will not intrude into their personal lives and relationships in the way this one did.

Penalty: The Tribunal considered a Consent Memorandum as to penalty filed by both parties in which they sought an agreed penalty from the Tribunal. The Tribunal ordered that the Psychologist be suspended from practice for 18 months, be censured, and imposed conditions on her practice for 18 months from the date she recommences practice. Had the Psychologist not been in receipt of legal aid, the Tribunal would have ordered the Psychologist to pay 45% of the costs of the PCC and the Tribunal. The Tribunal also directed that its decision and a summary be published.

An application for permanent name suppression on behalf of the Psychologist was declined.

(A full decision of the Tribunal can be viewed at www.hpdt.org.nz. Reference No: Psy14/288P.)

» Appeals and reviews

Overview

In the 2014/2015 year the Board was not involved with any appeals to the courts.

During the year the Board received and considered (in accordance with section 18 of Schedule 3 of the Act) three requests to review decisions made under delegation. In each case the Board confirmed its delegate's decision. The decisions included one by the

Parts 3 and 4 Committee (not to take any further action in regard to a particular complaint against a psychologist) and two by the Registrar (to decline an application for registration as a psychologist and to decline an application for the Clinical Psychologist scope of practice).

» Linking with stakeholders

Overview

In 2014/2015 the Board continued to guide the profession through its newsletters and the development of “Best Practice Guidelines”. Seven sets of guidelines have been published on our website:

Guidelines on Unprofessional Behaviour and its Management in the Workplace

Supervision Guidelines

What to do when you have Concerns about another Psychologist

Keeping Records of Psychological Services

The Practice of Telepsychology

The Use of Psychometric Tests

Maintaining professionalism when Using Social Media Networking

One other guideline is currently in development:

Guidelines on Informed Consent

Psychology workforce

Workforce development continues to be a major strategic focus for the Board, and we have invested a significant amount of time in meeting with key stakeholders (including quarterly meetings with the Psychology Workforce Group) and considering policy options in this regard. We continue to facilitate the entry to the workforce of applicants who have adequate academic qualifications but who lack the necessary practical training experience. Through the “supervision to registration” scheme two government employers (the Defence Force and the Department of Corrections) employ “Trainee Psychologists” and support them to complete the necessary practical training to become fully registered.

Linking with owners and stakeholders

The Psychologists Board regularly communicates with the public and with members of the profession via our website, twice-yearly newsletters, the Annual Report, and meetings with stakeholder groups.

The Board’s website is the first port of call for both New Zealand and overseas-trained practitioners seeking information about registering as a psychologist in New Zealand, and includes substantial information on accredited training programmes, the CCP, and returning to practice. It also provides information for current practitioners on current consultations, recent news and developments, Board processes, and upcoming events (e.g., public meetings). Feedback on the website has consistently been very positive.

The Board sends its Annual Report to the NZPsS, the NZCCP, the HDC, various government departments/agencies, other RAs, District Health Boards, universities, all financially current psychologists, and the Psychology Board of Australia. The most recent report is also supplied to all new registrants at the time of registration.

Psychologists Board representatives routinely attend the annual conferences of the NZPsS and NZCCP to inform and consult with practitioners regarding topical issues such as the development of best practice guidelines, the colocation of secretariats and the development of shared business services, the ongoing review of the HPCA Act, the CCP, and lessons to be learned from recent competence and complaint notifications. The Board also meets at least quarterly with representatives of the NZPsS, the NZCCP, Heads of Department of the various psychology training programmes, and DHB Professional Leaders to provide a forum for discussion of matters of mutual concern (e.g., workforce development).

The Board continues to place particular emphasis on linking with stakeholders and owners, and toward that end has met this year with representatives from the NZPsS Institute of Counselling Psychology, the NZ Special Interest Group in Neuropsychology, and the



HWNZ Allied Health, Science, and Technical Taskforce Governance Group. We also met with Mr Robert Elms from Staples Rodway, who audit the Board each year on behalf of the Auditor General.

Promoting the safe practice of psychology in the Asia-Pacific and beyond

The Board continues its close and mutually beneficial relationship with the Psychology Board of Australia (**PsyBA**) and the Association of State and Provincial Psychology Boards (**ASPPB**), and has further developed its ties to regulators in Europe and in the Asia-Pacific region. These links help inform our policies and practices and enhance our understanding of international standards and trends in accreditation, regulation, and workforce matters that can improve our systems and (especially) our consideration of overseas applications for registration.

Representatives of the NZPB and the PsyBA met three times this year, once in Wellington in conjunction with the inaugural HRANZ Conference, once in Melbourne in conjunction with the annual meetings of the National Registration and Accreditation Scheme, and once in Singapore in conjunction with the 5th ASEAN Regional Union of Psychological Societies (**ARUPS**) Congress.

In Singapore we also met with the ARUPS Executive Committee and Dr Saths Cooper (President, International Union of Psychological Sciences (**IUPsyS**)). The agenda included round-table updates on regulation and professional organisation of psychology in each country represented, specific issues in the Asia-Pacific region, cross-border mobility and recognition of qualifications, an update on the International Project on Competence in Psychology (**IPCP**), and initial planning for a larger, more inclusive meeting in Yokohama in 2016. The IUPsyS has agreed to invite all of their member countries from around Asia and the South Pacific to the meeting in Yokohama.

The Board's Chief Executive and Registrar continues as a member of the Working Group for the IPCP. This global project, which is supported by the IUPsyS and the International Association of Applied Psychology (**IAAP**), has recently published the penultimate draft "International Declaration on Core Competences in Professional Psychology". The declaration will be finalised in February 2016, adopted by the IAAP and IUPsyS in Yokohama, and then used as a reference point to assist with matters such as the development and accreditation of training programmes, international workforce mobility, and fostering the safe growth of the profession in developing nations.

HRANZ collaborations

Overview

The Psychologists Board continues to support and encourage the Health Regulatory Authorities New Zealand (**HRANZ**) collective. All Board members attended the inaugural HRANZ Conference in May 2014 and, as detailed in the Chairperson's report above, found it very educational and worthwhile.

Finance

Prescribed Fees and Levies

With the Board's discipline reserve being brought back within policy limits and several significant disciplinary cases on the horizon, a Disciplinary Levy was reinstituted (at a modest and sustainable level) for the 2014/2015 financial year. As noted elsewhere in this report, the expected HPDT hearings were held and this has further reduced the discipline reserve. The Disciplinary Levy has, however, been able to be maintained at its current level for the 2015/2016 financial year.

The Board's non-disciplinary reserves are also now within policy limits following an earlier reduction of all

APC fees for the 2013/2014 and 2014/2015 financial years. APC fees will again be held at current levels for the coming (2015/2016) financial year.

The year ahead will see many changes to the Board's servicing arrangements, staffing, and property costs. In anticipation, a major review of all fees will be conducted in mid-2015 to inform the budget and the setting of fees and the disciplinary levy for 2016/2017. It is expected that the significant savings resulting from colocation and shared business services with nine other Regulatory Authorities will largely offset any need for an increase in APC fees.



Table 10: Psychologists Board Fees

Fee Payable (NZ\$, incl GST)	As at 31/03/14	2014/ 2015	Change	2015/ 2016	Change
Application for registration by a practitioner trained in New Zealand	441.50	441.50	–	441.50	–
Application for registration under the Trans-Tasman Mutual Recognition Act	441.50	441.50	–	441.50	–
Application for registration by a practitioner trained overseas	764.50	764.50	–	764.50	–
Application for (optional) non-binding assessment of qualifications for registration	102.00	102.00	–	102.00	–
Application by a registered psychologist for a current practising certificate (<i>shown without Disciplinary Levy component</i>)	375.00	375.00	–	375.00	–
Application by a registered psychologist applying prior to 1 April for a practising certificate for the subsequent financial year (<i>shown without Disciplinary Levy component</i>)	375.00	375.00	–	375.00	–
Application by a registered psychologist who held a practising certificate in the previous financial year, who has continued to practise, and who is applying for a practising certificate for the current financial year after 1 April (<i>shown without Disciplinary Levy component</i>)	477.00	477.00	–	477.00	–
Application by a registered psychologist for a practising certificate for a period of three months (or less) and who has not been practising at any other time during that financial year (<i>shown without Disciplinary Levy component</i>)	187.50	187.50	–	187.50	–
Disciplinary Levy (Payable each financial year by all registered psychologists except: – those who have not held and will not hold a current practising certificate at any time during that financial year, and – practitioners currently registered in the Intern Psychologist scope of practice)	0.00	170.00	(new)	170.00	–
Annual maintenance of registration and communication for non-practising registrants	45.00	45.00	–	45.00	–
Certificate of registration (optional)	87.00	87.00	–	87.00	–
The supply to any psychologist of any documents, other than a certificate of registration, required for the purpose of seeking registration overseas (optional)	51.00	51.00	–	51.00	–
Copy of the Register of Psychologists (optional)	53.00	53.00	–	53.00	–
Fee for conducting an accreditation review of a degree, course of study, or programme leading to registration as a psychologist in New Zealand	9,140.00	9,140.00	–	9,140.00	–

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**INDEPENDENT AUDITOR'S REPORT
TO THE READERS OF
NZ PSYCHOLOGISTS BOARD'S FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2015**

The Auditor-General is the auditor of NZ Psychologists Board. The Auditor-General has appointed me, Robert Elms, using the staff and resources of Staples Rodway Wellington, to carry out the audit of the financial statements of the Board on her behalf.

We have audited the financial statements of the Board on pages 30 to 36 that comprise the statement of financial position as at 31 March 2015, the statement of financial performance, statement of movements in equity and statement of cash flows for the year ended on that date and the notes to the financial statements that include accounting policies and other explanatory information.

Opinion

In our opinion the financial statements of the Board on pages 30 to 36:

- comply with Public Benefit Entity Simple Format Reporting - Accrual (Public Sector) Standards (PBE-SFR-A (PS)); and
- fairly reflect the Board's:
 - financial position as at 31 March 2015; and
 - financial performance and cash flows for the year ended on that date.

Our audit was completed on 17 July 2015. This is the date at which our opinion is expressed.

The basis of our opinion is explained below. In addition, we outline the responsibilities of the Board and our responsibilities, and we explain our independence.

Basis of opinion

We carried out our audit in accordance with the Auditor-General's Auditing Standards, which incorporate the International Standards on Auditing (New Zealand). Those standards require that we comply with ethical requirements and plan and carry out our audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

Material misstatements are differences or omissions of amounts and disclosures that, in our judgement, are likely to influence readers' overall understanding of the financial statements. If we had found material misstatements that were not corrected, we would have referred to them in our opinion.

An audit involves carrying out procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on our judgement, including our assessment of risks of material misstatement of the financial statements whether due to fraud or error. In making those risk assessments, we consider internal control relevant to the preparation of the Board's financial statements that fairly reflect the matters to which they relate. We consider internal control in order to design audit procedures that are appropriate in the circumstances but not for the purpose of expressing an opinion on the effectiveness of the Board's internal control.



An audit also involves evaluating:

- the appropriateness of accounting policies used and whether they have been consistently applied;
- the reasonableness of the significant accounting estimates and judgements made by the Board;
- the adequacy of all disclosures in the financial statements; and
- the overall presentation of the financial statements.

We did not examine every transaction, nor do we guarantee complete accuracy of the financial statements. Also we did not evaluate the security and controls over the electronic publication of the financial statements.

We have obtained all the information and explanations we have required and we believe we have obtained sufficient and appropriate audit evidence to provide a basis for our audit opinion.

Responsibilities of the Board

The Board is responsible for preparing financial statements that:

- comply with Public Benefit Entity Simple Format Reporting - Accrual (Public Sector) Standards (PBE-SFR-A (PS)); and
- fairly reflect the Board's financial position, financial performance and cash flows.

The Board is also responsible for such internal control as it determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error. The Board is also responsible for the publication of the financial statements, whether in printed or electronic form.

The Board's responsibilities arise from the Health Practitioners Competence Assurance Act 2003.

Responsibilities of the Auditor

We are responsible for expressing an independent opinion on the financial statements and reporting that opinion to you based on our audit. Our responsibility arises from section 15 of the Public Audit Act 2001 and section 134(1) of the Health Practitioners Competence Assurance Act 2003.

Independence

When carrying out the audit, we followed the independence requirements of the Auditor-General, which incorporate the independence requirements of the External Reporting Board.

Other than the audit, we have no relationship with or interests in the Board.

Robert Elms
Staples Rodway Wellington
On behalf of the Auditor-General
Wellington, New Zealand

NZ PSYCHOLOGISTS BOARD

STATEMENT OF FINANCIAL PERFORMANCE

FOR THE YEAR ENDED 31 MARCH 2015

	Note	2015 \$	2014 \$
REVENUE			
Fees for registration and practicing certificates		899,379	873,475
Discipline Levy		369,430	–
Fees for provision of services	1	138,373	34,328
Interest		59,465	55,944
Total Revenue		1,466,647	963,747
EXPENDITURE			
Employees	2	540,282	512,980
Governance	3	156,784	132,168
Provision of services	4	471,909	209,129
Secretariat administration	5	424,945	318,781
Sponsorship and grants		5,003	3,000
Total Expenditure		1,598,923	1,176,058
NET SURPLUS / (DEFICIT)		(132,276)	(212,311)

NZ PSYCHOLOGISTS BOARD

STATEMENT OF MOVEMENTS IN EQUITY

FOR THE YEAR ENDED 31 MARCH 2015

	Note	2015 \$	2014 \$
Equity at beginning of period		866,439	1,078,750
Net surplus / (deficit) for the period		(132,276)	(212,311)
Total recognised Revenues and Expenses for the period		(132,276)	(212,311)
EQUITY AT END OF PERIOD	6	734,163	866,439

The accompanying notes form part of these financial statements



NZ PSYCHOLOGISTS BOARD

STATEMENT OF FINANCIAL POSITION

AS AT 31 MARCH 2015

	Note	2015 \$	2014 \$
EQUITY	6	734,163	866,439
CURRENT ASSETS			
Cash, Bank & Bank deposits		1,279,682	1,060,198
Accounts Receivable		14,161	44,864
Prepayments		14,765	13,153
Investments	7	735,888	1,025,048
Total Current Assets		2,044,496	2,143,264
NON-CURRENT ASSETS			
Accounts Receivable		14,470	–
Property, plant & equipment	8	32,084	42,682
Total Non-Current Assets		46,554	42,682
TOTAL ASSETS		2,091,050	2,185,946
CURRENT LIABILITIES			
Goods and Services Tax		138,775	148,075
Accounts payable and provisions	9	77,109	64,660
Employee costs payable		69,733	62,408
Income in Advance	10	1,071,270	1,044,363
Total Current Liabilities		1,356,887	1,319,506
TOTAL LIABILITIES		1,356,887	1,319,506
NET ASSETS		734,163	866,439

For and on behalf of the Board.

Ann Connell
Board Chair

Dated: 17/07/2015

Steve Osborne
CEO/Registrar

Dated: 17/07/2015

The accompanying notes form part of these financial statements

NZ PSYCHOLOGISTS BOARD
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 MARCH 2015

	2015 \$	2014 \$
CASHFLOWS FROM OPERATING ACTIVITIES		
<i>Cash was received from:</i>		
Fees from applications, Levies & APCs	1,289,456	1,297,011
Providing services	138,373	34,328
Interest received	81,959	41,986
	1,509,788	1,373,324
<i>Cash was applied to:</i>		
Payments to Suppliers	1,035,852	607,408
Payments to Employees	532,957	500,434
Sponsorship and grants	5,003	3,000
	1,573,812	1,110,843
NET CASH FLOWS FROM OPERATING ACTIVITIES	(64,024)	262,482
<i>Cashflows from Investing and Financing Activities</i>		
<i>Cash was received from:</i>		
Maturity of bank term deposits	289,160	–
<i>Cash was applied to:</i>		
Purchase of bank term deposits	–	1,025,048
Purchase of Property, Plant & Equipment	5,652	677
	5,652	1,025,725
NET CASH FLOWS FROM INVESTING AND FINANCING ACTIVITIES	283,508	(1,025,725)
NET INCREASE/(DECREASE) IN CASH HELD	219,484	(763,244)
Add Opening Cash Brought Forward	1,060,198	1,823,442
ENDING CASH CARRIED FORWARD	1,279,682	1,060,198

The accompanying notes form part of these financial statements



NZ PSYCHOLOGISTS BOARD

STATEMENT OF ACCOUNTING POLICIES

FOR THE YEAR ENDED 31 MARCH 2015

BASIS OF PREPARATION

The NZ Psychologists Board "The Board" is a body corporate established by the Health Practitioners Competency Assurance Act 2003 and is an Authority under that Act.

The Board has elected to apply PBE SFR-A (PS) Public Benefit Entity Simple Format Reporting - Accrual (Public Sector) on the basis that it does not have public accountability and has total annual expenses of equal to or less than \$2,000,000. All transactions in the Performance Report are reported using the accrual basis of accounting. The Performance Report is prepared under the assumption that the entity will continue to operate in the foreseeable future.

SPECIFIC ACCOUNTING POLICIES

Bank Accounts and Cash

Bank accounts and cash in the Statement of Cash Flows comprise cash balances and bank balances (including short term deposits) with original maturities of 90 days or less.

Accounts Receivables

Receivables are stated at estimated realisable values.

Property, plant & equipment

Initially stated at cost and depreciated as outlined below. Initial cost includes the purchase consideration plus any costs directly attributable to bringing the asset to the location and condition required for its intended use. Assets are written down immediately if any impairment in the value of the asset causes its recoverable amount to fall below its carrying value.

Depreciation & amortisation

Depreciation of property, plant & equipment is charged at rates permitted under the Income Tax Act 2007. The following rates have been used:

<i>Office furniture & equipment</i>	<i>18.0%–31.0% Diminishing value</i>
<i>Computer equipment</i>	<i>48.0% Diminishing value</i>

Alterations to leasehold premises are written off over the period of the lease as follows:

<i>Leasehold alterations</i>	<i>16.7% Straight line</i>
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Intangible assets are amortised over the period of benefit to the Board at the following rate:

<i>Database & website</i>	<i>5 years Straight line</i>
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Leases

Payments made under operating leases are recognised in the statement of financial performance on a basis representative of the pattern of benefits expected to be derived from the leased asset.

Employee entitlements

Provision is made in respect of the Board's liability for annual leave at balance date. Annual leave has been calculated on an actual entitlement basis at current rates of pay. No provision is made for sick leave entitlement as this does not accumulate.

Taxation

The Board is wholly exempt from New Zealand income tax having fully complied with all statutory conditions for these exemptions.

Income recognition

Fees received for the issue of annual practising certificates and the provision of services are recognised in the year to which the fees relate or the service performed. All other fees are recognised on receipt.

Goods & Services Tax

All amounts are stated exclusive of Goods & Services Tax (GST), except for receivables and payables that are stated inclusive of GST.

CHANGES IN ACCOUNTING POLICIES

In adopting new accounting standards, the Board has reclassified certain assets and liabilities as required by those standards. There have been no other changes in accounting policies which have been applied on a consistent basis with those of the previous period.

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2015

	Note	2015 \$	2014 \$
1. REVENUE FROM PROVISION OF SERVICES			
Non-practicing fees		22,656	20,426
Programme accreditation		29,791	2,000
Rent recoveries		78,316	–
Other income		7,610	11,902
		138,373	34,328
2. EMPLOYEES			
<i>Costs relating to Employees</i>			
Salaries		515,836	493,155
Staff development & training		6,622	2,933
Superannuation contribution		15,471	15,117
Other		2,353	1,775
		540,282	512,980
3. GOVERNANCE			
<i>Costs relating to Board meetings & other activities</i>			
Fees		6,135	86,638
Meeting expenses, conferences & travel		42,956	45,530
Legal		17,693	–
		156,784	132,168
4. PROVISION OF SERVICES			
<i>Costs relating to registration, competence & professional conduct</i>			
Fees		223,724	120,608
Meeting expenses & travel		63,255	6,480
Legal		166,032	54,663
Publications		18,898	27,378
		471,909	209,129
5. SECRETARIAT			
<i>Administration of the Board secretariat</i>			
Audit fees		7,464	7,226
Depreciation & amortisation	8	16,257	34,545
Telephone, Postage & courier		14,417	16,037
Occupancy costs		148,726	77,637
Other costs		104,200	77,429
Printing and Stationery		15,359	16,095
Professional fees		118,522	89,812
		424,945	318,781



NZ PSYCHOLOGISTS BOARD

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2015

	2015 \$	2014 \$
6. EQUITY		
General Reserve		
Accumulated surpluses with unrestricted use		
Balance at 1 April	377,473	424,101
Surplus for year	(83,586)	(46,628)
Balance at 31 March	293,887	377,473
Disciplinary Reserve		
Accumulated discipline levy less costs restricted under S131 of HPCA Act		
Balance at 1 April	488,966	654,649
Discipline levy	369,430	—
Discipline costs	(418,120)	(165,683)
Balance at 31 March	440,276	488,966
Total Reserves	734,163	866,439

7. INVESTMENTS

Investments represent bank term deposits with maturity dates within 1 year of balance date.

	OPENING CARRYING VALUE	CURRENT YEAR ADDITIONS	DEPRECIATION, AMORTISATION, & IMPAIRMENT	CLOSING CARRYING VALUE
8. PROPERTY, PLANT & EQUIPMENT				
At 31 March 2015				
Office furniture & equipment	18,481	5,095	4,227	19,349
Computer equipment	11,566	557	5,709	6,414
Leasehold alterations	—	—	—	—
Database & Website software	12,642	—	6,321	6,321
	42,689	5,652	16,257	32,084
At 31 March 2014				
Office furniture & equipment	22,450	677	4,647	18,481
Computer equipment	22,241	—	10,675	11,566
Leasehold alterations	12,902	—	12,902	—
Database & Website software	18,963	—	6,321	12,642
	76,556	677	34,545	42,689

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2015

	2015 \$	2014 \$
9. ACCOUNTS PAYABLE & PROVISIONS		
Accounts payable	40,219	24,463
Accruals & provisions	36,890	40,197
	77,109	64,660
10. INCOME IN ADVANCE		
Fees received for next year		
Annual Practicing Certificate (includes Discipline levy of \$333,061)	1,067,719	1,008,917
Short term Practicing Certificate (includes Discipline levy of \$1,183)	2,487	2,798
Non practicing	1,063	2,856
	1,071,269	1,014,572
Fees received from education providers for course accreditation	–	29,791
	1,071,269	1,044,363
11. COMMITMENTS		
Contractual commitments for operating leases of premises and equipment		
Not Later than one year	136,724	140,237
Later than one year	133,296	275,675
	270,020	415,912

The Board entered a new lease from 1 April 2014 for all of level 9 at 79 Boulcott Street, Wellington for a period of 3 years. Previously the Board leased approximately one half of level 9. The Board has sub-let approximately one half to existing and new tenants.

As at 31 March 2015 the Board has a credit card facility of \$8,000 held with Westpac New Zealand Limited of which \$3,199 has been utilised.

12. CAPITAL COMMITMENTS

There are no commitments for capital expenditure at balance date. (2014 \$Nil)

13. CONTINGENT LIABILITIES

There are no contingent liabilities at balance date. (2014 \$Nil)

14. RELATED PARTY TRANSACTIONS

There were no transactions involving related parties during the year.

15. EVENTS AFTER BALANCE DATE

There were no events that have occurred after balance date that would have a material impact on these financial statements.

