

Te Poari o ngā Kaihaumanu
Hinengaro o Aotearoa



The Psychotherapists Board
of Aotearoa New Zealand

Annual Report

Year ending 30 September 2020

He waka eke noa
We are all in the waka together

Te Poari o ngā Kaihaumanu Hinengaro o Aotearoa (the Board) is pleased to present this report to the Minister of Health for the year ended 30 September 2020. This report is presented in accordance with section 134(1) of the Health Practitioners Competence Assurance Act 2003.

Our purpose

To protect the health and safety of members of the public through effective mechanisms that ensure psychotherapists are competent and fit to practise their professions.

Duties and functions as set out in section 118 of the Health Practitioners Competence Assurance Act 2003

The functions of each authority appointed in respect of a health profession are as follows:

- (a) to prescribe the qualifications required for scopes of practice within the profession, and, for that purpose, to accredit and monitor educational institutions and degrees, courses of studies, or programmes
- (b) to authorise the registration of health practitioners under this Act, and to maintain registers:
- (c) to consider applications for annual practising certificates
- (d) to review and promote the competence of health practitioners
- (e) to recognise, accredit, and set programmes to ensure the ongoing competence of health practitioners
- (f) to receive information from any person about the practice, conduct, or competence of health practitioners and, if it is appropriate to do so, act on that information
- (g) to notify employers, the Accident Compensation Corporation, the Director-General of Health, and the Health and Disability Commissioner that the practice of a health practitioner may pose a risk of harm to the public
- (h) to consider the cases of health practitioners who may be unable to perform the functions required for the practice of the profession
- (i) to set standards of clinical competence, cultural competence (including competencies that will enable effective and respectful interaction with Māori), and ethical conduct to be observed by health practitioners of the profession
- (j) to liaise with other authorities appointed under this Act about matters of common interest:
- (ja) to promote and facilitate inter-disciplinary collaboration and co-operation in the delivery of health services
- (k) to promote education and training in the profession
- (l) to promote public awareness of the responsibilities of the authority
- (m) to exercise and perform any other functions, powers, and duties that are conferred or imposed on it by or under this Act or any other enactment.

Contents

Our purpose	2
Duties and functions as set out in section 118 of the Health Practitioners Competence Assurance Act 2003	2
1. Governance	5
Te Poari o ngā Kaihaumanu Hinengaro o Aotearoa	5
Chair report	5
Board member details	7
Board member fees	9
Board strategic plan	10
Amendments to the Health Practitioners Competence Assurance Act 2003 (HPCA Act)	10
2. Secretariat	11
Board meetings	11
Board employees	11
Collaboration and collocation	11
Board committees	11
Accreditation	12
Technology project	13
Acknowledgements	13
3. Registration of, and practising certificates for, health practitioners – Part 2 of the HPCA Act	14
Psychotherapist scopes of practice	14
Registration	14
Annual practising certificates	14
4. Competence, fitness to practise, and quality assurance – Part 3 of the HPCA Act	15
Competence	15
Health/fitness to practise	16

Recertification and recertification audit (ccontinuing professional development)	16
5. Complaints and discipline – Part 4 of the HPCA Act	17
Complaints from various sources and outcomes	17
Professional Conduct Committee	17
Health Practitioners Disciplinary Tribunal	17
6. Appeals and judicial reviews	18
7. Linking with stakeholders	18
8. Linking with responsible authorities	18
9. Contact details	18
10. Financial statements	19
Audited accounts	19

1. Governance

Te Poari o ngā Kaihaumanu Hinengaro o Aotearoa

The Board's role is to implement the Health Practitioners Competence Assurance Act 2003 (HPCA Act) by fulfilling the principal purpose as set out in section 3 and the functions as set out in section 118 of the HPCA Act.

The Board has made a commitment to ensure that issues of diversity and equality are upheld, promoted and underpin all aspects of the Board's work according to the following:

- Tiriti o Waitangi
- Health Practitioners Competence Assurance Act 2003
- Health and Disability Commissioner Act 1994 – Code of Health and Disability Services Consumers' Rights
- Health and Disability Services Act 1993
- Health and Safety at Work Act 2015
- Privacy Act 1993 – Health Information Privacy Code 1994
- Human Rights Act 1993
- Psychotherapist scopes of practice
- Psychotherapist Core Clinical Competencies
- Psychotherapist Cultural Competencies
- Psychotherapist Standards of Ethical Conduct.

Chair report

This report highlights the activities of the Board for the period 01 October 2019 to 30 September 2020.

Board membership

The Board continues to function effectively in achieving goals set in the strategic and annual mahi plan.

The Board met several times in 2020 via Zoom due to COVID-19 lockdowns and has been able to continue functioning without too much disruption to its mahi plan.

It is evident that the diverse experiences of practitioner and lay members contribute to the Board's work within the changing context of mental and social healthcare delivery. Maternal and infant health as well as tangata whenua, bicultural and multicultural approaches to psychotherapy are particularly relevant as these approaches inform and widen traditional European models and understanding of psychotherapy.

Employees

The Board continues to benefit from the experience, abilities and knowledge of our long-term employee Registrar Jacquelyn Manley who leads the Board's operational committees,

manages the Board's communication and administrative work and guides Board policy in relation to the HPCA Act.

Natasha Khouri, the Board's Registration Officer, assists the Registrar and is a valued and competent employee.

Accreditation of training programmes

The Board's major project currently is the development of accreditation criteria for psychotherapy training programmes and pathways.

Following the August 2020 meeting, the Board has completed in-depth consultation with training providers arriving at a meta-level accreditation standard. A consultation response document was issued to training providers in September 2020. The Board's consultation response highlights key areas where divergent feedback has been received. The consultation response presented Board reasoning and made transparent the dilemmas faced in settling on an inclusive open approach that takes all the major training providers into account.

The Board is now preparing to seek wider stakeholder feedback in 2021.

The Board remains committed to finalising the standards so that these can be applied to tangata whenua and non-tangata whenua training programmes and pathways, and Board representatives have participated in hui with tangata whenua pathway providers. There remains relational work to be done to maintain engagement and to develop tangata whenua training provider and practitioner trust in the Board's processes as a responsible authority working under the HPCA Act.

Engagement with professional stakeholders

Engagement with practitioners continues via the Board's regular newsletter, consultation, kanohi-ki-te-kanohi meetings, and via responses to individual enquiries and concerns. The Board also engages with stakeholder groups, such as professional associations, and continues to be available to clarify the Board's role in protecting the public without unduly inhibiting effective and diverse approaches to psychotherapy practice.

While some professional associations engage willingly, there remains some resistance and mistrust from others who were well established prior to the Board's inception. The Board continues to offer communication opportunities and seeks to improve these relationships and remains open to constructive participation in working through the changes that have come with the regulation of psychotherapists under the HPCA Act.

As part of our strategic plan, Board members continue to remain informed about mental health concerns apparent in Aotearoa New Zealand. The Board is informed by the mental health priorities, which are reviewed by the Ministry of Health, and by social and clinical discussion and research. The Board recognises its increasing role within the wider health sector as the current government attends thoughtfully to mental health provision.

The Board continues to work on actualising its policy Board Mahi and te Tiriti o Waitangi. Tikanga advisors supported and guided our participation at a hui with tangata whenua practitioners and continue to assist us with developing bicultural practices in carrying out the Board's mahi.

Collaboration with other responsible authorities

The Board's Partner Regulatory Group (PRG) service-level agreement was reviewed, and the Board continues to appreciate working within this agreement. Shared resources including premises, accounting, and secretariat services are working well and provide a broad range of benefits.

Professional advisors

Professional advisors continue to make a significant contribution to Board operational committees. The Board has increased the number of professional advisors available to us and appreciates the work undertaken by these experienced psychotherapists.

Budget

Board's income comes mainly from psychotherapists' annual practising certification fees. This creates sufficient funds for ongoing projects, such as accreditation of training programmes and technological upgrades. The Board's major technological upgrade project, the iMIS database and website, is now under way. Financial planning in preparation for this project has been carried out for several years.

In response to work disruption and loss of income due to the COVID-19 pandemic, the Board made a decision to reduce the annual practising certificate fee for the upcoming financial year (2020/2021). This cost will be covered by the general reserve and a deficit budget.

Closing comment

The Board continues to do its mahi effectively and flexibly given the unusual conditions created due to the COVID-19 pandemic this year.

The Board is aware that, generally, psychotherapists do not begin training until after the age of 30, and for this reason, most psychotherapists are in the second half of life. The Board will continue to consider this, alongside any feedback received, in order to support future access to effective psychotherapy for the Aotearoa public.

Hamish Brown

Te Poari o ngā Kaihaumanu Hinengaro o Aotearoa

[Board member details](#)

The Minister of Health appoints Board members for a term of up to 3 years in accordance with sections 120–122 of the HPCA Act. The Chair and Deputy Chair are appointed by the Board at the first meeting of each year.

Board membership at 01 October 2019 remains as follows:

Mr Gerry Te Kapa Coates (layperson)

Appointed July 2019 – current term expired July 2020

Gerry is a professional engineer of Ngāi Tahu descent with broad experience in many fields including forensic engineering and as an expert witness. In his engineering career, he was on the Board and became President of IPENZ (now Engineering NZ) in 2003–2004. His term included implementing the Chartered Professional Engineers Act 2002 and its ethical requirements, having already instigated a revision of its Code of Ethics in 1986 that

culminated in a 1995 values-based Code. He has been an accredited hearings commissioner on decision-making committees and boards of inquiry for the Environmental Protection Authority notably as a dissenting member on the Taranaki seabed mining application. He has worked with diverse community groups such as the Marriage Guidance (then Relationship Services) Council as a trained counsellor for 10 years (helping ensure it took Māori members' interests into account), the Wellington Civic Trust, Downstage Theatre Trust and Te Ana Whakairo Ltd – the Māori Rock Art Centre in Timaru. He has significant governance experience to chair level including 10 years on the leadership table of Ngāi Tahu and 3 years on the board of its holding company – now with assets over \$1 billion – during the 2008 Global Financial Crisis. He has also had posts in the government sector and not-for-profit boards and panels. Gerry was also a consultant to Ngāi Tahu during their claim settlement process in 1997–1998. He is a poet and published author with his 2011 book *The View From Up There*.

Mr Josiah Tulalamali'i (layperson)

Appointed July 2019 – current term expires July 2022

Josiah is a Samoan New Zealander working to give young people a voice and helping them to speak up on the decisions that shape their lives and advising government on how to connect with them. At 14, he was one of the founders of an NGO called the Pacific Youth Leadership and Transformation Trust to empower Pacific young people, which he chaired for 5 years. At 22, he was a voice for youth and Pacific peoples on the New Zealand Government inquiry that looked at how to make life better for people with mental health and addiction challenges. Josiah studied history and politics at the University of Canterbury and is also a member of the Le Va Board and Rātā Foundation Board.

Mr Hamish Brown (Chair)

Appointed December 2016 – current term expired December 2019

Hamish is a practitioner Board member. He was raised in the small country town of Kaikohe in the Far North of the North Island. For over 20 years, he has been living and working in Auckland. He has a Bachelor of Arts (Philosophy and Ethics) from Victoria University of Wellington and a Master of Business Administration (Dispute Resolution) from Massey University. He is certificated as a Psychodramatist by the Aotearoa New Zealand and Australian Psychodrama Association (AANZPA) and holds a Postgraduate Diploma in Health Science (Psychoanalytic Psychotherapy) from Auckland University of Technology (AUT). Hamish has worked as an organisational consultant for 20 years in the areas of leadership development and change, runs public programmes in group facilitation, and he co-founded Phoenix Facilitation Ltd in 2008. He has been in private practice as a psychotherapist since 2002 and is on the staff of the Auckland Training Centre for Psychodrama (ATCP). He is raising two school-aged daughters, and his practice is located in Te Atatū Peninsula in West Auckland.

Dr Lucie Zwimpfer (Deputy Chair)

Appointed July 2019 – current term expires July 2022

Lucie is a practitioner Board member. She grew up in Wellington but has strong family roots in the South Island. After living in Japan and London for a number of years, she and her husband Richard have returned to Wellington to raise their three young children. Lucie graduated with a Postgraduate Diploma in Child Psychotherapy Studies (Melbourne) in 2004 and a Diploma in Parent Infant Psychotherapy and Infant Mental Health (London) in 2008. In 2016, she completed her PhD, considering the use of psychoanalytic theory with premature

infants in the Neonatal Intensive Care Unit (University of Otago, Wellington). Lucie works both privately and in a maternal mental health service. She supervises parent infant mental health clinicians across four child and adolescent mental health services. She is currently the Vice President of the Infant Mental Health Association of Aotearoa New Zealand.

Ms Suzanne Johnson

Appointed May 2013 – current term expires May 2022

Suzanne identifies as Pākehā – a descendant of English and Irish settlers who arrived in Taranaki and Dunedin in the 1840s. Suzanne holds a Master of Science in Psychotherapy and was appointed as a practitioner member to the Board in 2013. Suzanne is a psychotherapist working in private practice in Wellington with adults and young adults. Suzanne has been a trainer in transactional analysis and continues to provide clinical supervision. Before private practice, Suzanne worked as a clinical nurse specialist in Wellington's Mental Health Service. Suzanne is interested in cultural theory and the development of language, thinking, ethics and identity within cultural contexts.

Ms Anna Hedley

Appointed May 2013 – current term expired August 2020

Anna is a practitioner Board member. She graduated with a Diploma in Psychotherapy (AIT) in 1996 and a Master of Health Science (First Class Honours) in 2003. She has worked as a psychotherapist at Auckland District Health Board (ADHB) for over 20 years. She is the clinical coordinator of the Regional Eating Disorders Service and was the Professional Leader for the ADHB psychotherapists for 6 years. She has a special interest in health law and completed a postgraduate paper in health law at AUT in 2013. Anna lives with her partner John in central Auckland and enjoys a busy family life. They have an adult family and two young grandchildren.

Mr Kyle MacDonald

Appointed July 2019 – current term expires July 2022

Kyle is a psychotherapist with 20 years' clinical experience including 10 years working for DHB Mental Health services in Auckland. For the last 4 years, he's written a mental health column for the *NZ Herald*, as well as co-hosting the mental health show *The Nutters Club* on Newstalk ZB. He has a proven track record of advocating for improved access to mental health care, including initiating the People's Mental Health Review, which directly led to the Government Inquiry into Mental Health and Addictions. He is also currently on the board of trustees of Balmoral School. He works in full-time private practice at the Robert Street Clinic in Ellerslie, Auckland.

Board member fees

Fees are paid to Board members for work undertaken on behalf of the Board. The Board Chair receives \$100 per hour, and Board members receive \$80 per hour.

Board member	Fees paid 2018/19	Fees paid 2019/20
Ms Suzanne Johnson	\$19,722.00	\$17,555.00
Mr Hamish Brown	\$10,680.00	\$15,150.00

Mr Gerry Te Kapa Coates	\$2,380.00	\$8,380.00
Ms Anna Hedley	\$8,520.00	\$7,820.00
Mr Kyle MacDonald	\$1,840.00	\$7,640.00
Dr Lucie Zwimpfer	\$2,240.00	\$7,560.00
Mr Josiah Tulalamali'i	\$1,920.00	\$4,260.00

Fees paid exclude expenses, are gross income before GST and including resident withholding tax.

Board strategic plan

Throughout its mahi, the Board aims to function as a right-touch¹ regulator. This means making decisions and taking actions proportionate to identified risk.

The Board reviewed and updated its three strategic objectives:

- Tiriti o Waitangi commitment: Board mahi reflects te Tiriti o Waitangi and responsiveness to tangata whenua.
- Stakeholder engagement: The purpose and functions of the Board are communicated through positive engagement with the public, psychotherapists and stakeholders.
- Technology trends: The Board seeks and monitors developments in technology as they are relevant to the practice, training, and supervision of psychotherapists to ensure safe practice in relation to technology.

In addition to the 5-year strategic plan, the Board has an annual plan that prioritises the annual strategic deliverables each year.

The Board reviews the annual plan progress at each Board meeting.

Amendments to the Health Practitioners Competence Assurance Act 2003 (HPCA Act)

The Board is moving forward with implementing the changes to the HPCA Act that came into effect in 2019.

By way of example, following collaboration with other responsible authorities, and consultation with psychotherapists and stakeholders, the Board developed and published a naming policy under section 157A of the HPCA Act.

Further to this the Board, has turned its mind to its Standards of Ethical Conduct, Cultural Competencies, Clinical Competencies, and the draft accreditation standards. It is important

¹ [Professional Standards Authority, UK](#). Right-touch principles: proportionate, consistent, targeted, transparent, accountable and agile.

that these standards remain current and fit for purpose and meet the requirements and amendments to the HPCA Act.

2. Secretariat

Board meetings

Agendas and supporting papers are prepared for each Board meeting, and formal minutes record the proceedings of each meeting. A quorum of four Board members, including at least one member who is a layperson, is required for the Board to transact Board work.

All members are required during meetings to declare any conflict of interest with agenda items.

There were five meetings held between 1 October 2019 and 30 September 2020:

- 22–23 November 2019
 - 13–14 March 2020
 - 24 May 2020 via Zoom
 - 21 June 2020
 - 14–15 August 2020 via Zoom
-

Board employees

The Board is currently supported by two staff (1.2 FTE). There have been no employee changes over the year. The Board continues to employ:

- Jacquelyn Manley, Registrar
 - Natasha Khouri, Registration Officer (part-time).
-

Collaboration and collocation

To support business process and collaboration on areas of common interest, the Board continues to be collocated with the Nursing Council of New Zealand (NCNZ) and 10 other responsible authorities.

The Board has a memorandum of understanding and service-level agreement (SLA) with NCNZ. The SLA covers core services such as property, facilities management, IT support, finance and payroll. The SLA is reviewed and renewed annually.

The Board and the secretariat continue to value the benefits provided by collocation such as shared services and collaboration.

Board committees

Board committees undertake various functions in line with matters that fall within their respective terms of reference. Work is undertaken via email, a 'Board only site' (a website accessible only to Board members), teleconferencing, and kanohi-ki-te-kanohi meetings.

Committees often use a combination of communication methods. Some committees have delegated decision-making powers, and all committees report to the Board and provide regular updates on progress.

The Board has the following committees:

- Accreditation Committee
- Finance and Risk Committee
- Personnel Committee
- Fitness to Practise Operational Committee
- Notifications and Complaints Operational Committee
- Recertification and Audit Operational Committee
- Qualifications Operational Committee

Accreditation

Under sections 12(2) and 118(a) of the HPCA Act, the Board is required to prescribe the qualifications needed for scopes of practice and, for that purpose, to accredit and monitor educational institutions and degrees and courses or programmes of study.

As psychotherapist training is complex and diverse, the Board has drafted a meta-level accreditation standard designed to incorporate the different types of psychotherapy training available in Aotearoa New Zealand:

- Psychotherapy professional development pathways are focused on the supervisory relationship that occurs between a trainee and their training clinical supervisor. This relationship is contracted within an organisation offering an assessment that leads to the achievement of the organisation's qualification. In the professional development pathway, training and education are understood to be regular and ongoing as part of a trainee's professional development.
- Psychotherapy educational programmes will have a prescribed programme that trainees attend. Programme criteria are defined and stipulated at the beginning of the programme. Education-based pathways include theoretical learning and practice in training groups. Listed supervised clinical practice may begin during or after the theoretical part of any programme.
- Psychotherapy modality-specific programmes can situate themselves within the definition that best describes their programme.

The Board has consulted extensively with training providers, and mahi over the last year has refined this draft accreditation standard. To date, there have been five consultations (2011, 2015, 2016, 2018 and 2019), and the Board has received approximately 50 written responses. To support the written consultation process, multiple kanohi-ki-te-kanohi meetings have taken place.

The Board has taken the time necessary to consult extensively with training providers and to hear from those who are teaching, training, supervising and supporting students of psychotherapy to become qualified, competent, safe and effective psychotherapists. In doing

so, the Board acknowledges the high levels of interest and engagement and the quality of feedback received from training providers who have contributed to the ongoing development of accreditation standards.

Wider consultation is now expected to take place early 2021 and will involve programme providers, practitioners, stakeholders and the public.

Accreditation Committee²

The Board would like to acknowledge and thank the Accreditation Committee for its ongoing mahi. The Committee is made up of six members, four training providers and two Board members.

The purpose of this Committee is to advise the Board on accreditation criteria, processes and policy. The Committee works to terms of reference.

Committee members are Ms Suzanne Johnson, Mr Hamish Brown, Mr Peter Hubbard, Ms Mary Cubitt, Ms Brenda Levien and Ms Josie Goulding.

Technology project

During 2020, the Board agreed to and commenced mahi on the development of a new database and website.

The current database and website were implemented in 2008 on a minimal budget.

The website and database will feature a new look and feel and will be easier to navigate, which is expected to improve and enhance the user experience. In addition, it will provide psychotherapists with improved access to information through an online personal portal and help automate some manual regulatory processes such as the ability to renew annual practising certificates online.

As many people access websites on their phones, the Board will ensure the new site will be easy to view and use in this way.

The new database and website will enable the Board to collect workforce data as required by amendments to the HPCA Act.

Acknowledgements

Board mahi is supported by a variety of people. The Board continues to appreciate those who assist and/or support the Board in fulfilling its purpose and regulatory functions. This includes professional advisors, Accreditation Committee members, Competence Review Committee members, Professional Conduct Committee members, clinical supervisors, psychotherapists, training providers and psychotherapy associations.

Fulfilling the purpose and functions of the Board involves collaboration, consultation and engagement with a wide range of stakeholders. The Board values this engagement and appreciates the support it receives.

² Committee members were sought via expressions of interest, and all who applied were appointed.

The Board looks forward to continuing to develop and strengthen its relationships with all interested parties.

3. Registration of, and practising certificates for, health practitioners – Part 2 of the HPCA Act

Psychotherapist scopes of practice

Under section 11 of the HPCA Act, the Board has authorised three psychotherapist scopes of practice:

- Psychotherapist Scope of Practice.
- Psychotherapist Scope of Practice with Child and Adolescent Psychotherapist Specialism.
- Interim Psychotherapist Scope of Practice.

There were no amendments made to scopes of practice during the year.

Registration

Registration provides an assurance to the public that psychotherapists are fit to practise, hold the qualification(s) prescribed by the Board and are competent to practise within the scope for which they are registered.

The Board maintains a public register that includes the name, the qualification used for registration and the registration date of all psychotherapists. The public register is available for viewing on the Board's website.

Applications for registration within the reported year

HPCA Act section	Scope	Number registered	Registered with conditions	Not registered
15	Interim Psychotherapist Scope of Practice	22	0	-
15	Psychotherapist Scope of Practice	19	2	-
15	Psychotherapist Scope of Practice with Child and Adolescent Psychotherapist Specialism	0	0	

Annual practising certificates

An annual practising certificate (APC) provides assurance to the public that a psychotherapist has maintained their professional competence and is fit to practise. Each year, psychotherapists are required to declare that they have maintained their competence and fitness to practise. The cost of the APC (\$850.00 including GST) remains unchanged.

APC applications

Total applications	APCs with conditions	No APC
574	4	-

54 psychotherapists held a non-practising status and 20 psychotherapists were removed from the register.

Removal can occur due to:

- a voluntary request, for example, retirement or moved overseas
- registration cancellation under sections 142 or 144(3) of the HPCA Act because the Board was unable to contact the psychotherapist
- notification of death.

4. Competence, fitness to practise, and quality assurance – Part 3 of the HPCA Act

Competence

Under the HPCA Act, the Board may review the competence of a psychotherapist at any time or in response to a concern regarding their practice. Competence reviews are not punitive and are designed to review, remediate, and educate.

Competence concerns can be raised by a colleague, patient, employer, the Ministry of Health, Accident Compensation Corporation (ACC) and/or the Health and Disability Commissioner.

The Board will undertake initial inquiries into a psychotherapist's competence following a notification or expression of concern regarding competence.³ Following consideration, possible outcomes could be no further action, an individual recertification programme is established, or a review of a psychotherapist's competence is undertaken.

The purpose of a competence review is to assess a psychotherapist's competence and, if necessary, to put in place appropriate training, education and safeguards to support the psychotherapist in meeting the required standard of competence. The Board will order a competence review if it believes a psychotherapist may be practising below the required standard of competence.

A Competence Review Committee (CRC) comprises of a layperson and at least two psychotherapists. The psychotherapist's competence is assessed against the Board's standards. A CRC will provide a formal report to the Board.

The Board referred three people for a competence review during the year covered by this report. Two competence reviews were completed. The third person is no longer a psychotherapist.

³ Reviews also ensure that notifications are not frivolous or vexatious.

Competence programme

If the Board believes a psychotherapist does not meet the required standard of competence after a competence review, it can order the psychotherapist to undertake a competence programme.

This is an educational programme designed to address the psychotherapist's specific competence issues. The aim of a competence programme, and any other orders made, is to produce the best possible outcome for the psychotherapist while keeping the public safe.

During the timeframe covered by this report, there were no competence programmes set.

Health/fitness to practise

A physical or mental health problem may impair a psychotherapist's ability to practise safely and therefore endanger clients and the public.

Health practitioners and employers have a legal obligation to notify the Board if there is any reason to be concerned about a psychotherapist's health or fitness to practise.

During this reporting period, one psychotherapist voluntarily made a health-related notification. Following the completion of Board processes, the psychotherapist was deemed fit to practise.

Recertification and recertification audit (continuing professional development)

The Board considers engagement in ongoing professional development an important factor in maintained competence.

The Board requires psychotherapists to complete a self-reflective process each year, which requires them to reflect on how they meet the Board's Standards of Ethical Conduct, Cultural Competencies and Clinical Competencies through their practice.

The Board continues to audit approximately 100 psychotherapists annually.

Feedback continues to indicate that psychotherapists find the self-reflective process beneficial and useful to their practice. The Board continues to receive positive feedback about its exemplar and updates its recertification plan tips. The audit exemplar and tips are available on the Board's website.

5. Complaints and discipline – Part 4 of the HPCA Act

Complaints fall into two broad categories:

- Those that allege the practitioner or conduct of a practitioner has affected a health consumer.
- Those that do not directly involve a health consumer.

Under section 64(1) of the HPCA Act, the Board must promptly forward to the Health and Disability Commissioner (HDC) any complaint alleging that the practice or conduct of a health practitioner has affected a health consumer. The HDC may or may not investigate the complaint. The Board is unable to act on a conduct issue while the HDC is investigating. However, the Board can investigate competence or health concurrently.

Notifications or complaints that do not allege that a health consumer has been affected are reviewed on a case-by-case basis. Each notification or complaint is investigated, and the Board decides whether it should be managed as a competence, conduct or health issue.

Complaints from various sources and outcomes

The Board received two new complaints during the period covered in this report. The Board also had one ongoing complaint opened during the previous year. All three complaints are now closed.

Professional Conduct Committee

A Professional Conduct Committee (PCC) is a statutory committee appointed to investigate complaints that relate to a practitioner's conduct. A PCC is independent of the Board.

The Board will refer a case to a PCC in two situations. The first is when the Board is notified that a practitioner has been convicted of an offence in court. Under the HPCA Act, certain offences automatically require a PCC investigation. The second situation is where the Board considers that information it holds raises one or more questions about a practitioner's conduct or the safety of the practitioner's practice.

A PCC comprises two psychotherapists and one layperson. A PCC may make determinations or recommendations to the Board or lay charges against the psychotherapist before the Health Practitioners Disciplinary Tribunal (HPDT).

During the timeframe covered by this report, one ongoing PCC investigation was completed. The practitioner is no longer a psychotherapist.

Health Practitioners Disciplinary Tribunal

The HPDT is a statutory disciplinary organisation separate from the Board. It hears and determines charges brought by PCCs or the Director of Proceedings against health practitioners registered under the HPCA Act. Members of the HPDT are appointed by the Minister of Health for each profession and include practitioners, laypersons, a chairperson and two deputy chairpersons. For each hearing, the HPDT consists of a chairperson or deputy chairperson, three psychotherapists and a layperson.

The Board had no cases before the HPDT during the timeframe covered by this report.

6. Appeals and judicial reviews

Decisions of the Board may be appealed to the District Court, or in some cases, judicial review may be sought in the High Court.

There were no judicial reviews or appeals during the timeframe covered by this report.

7. Linking with stakeholders

The Board is responsible for communicating with psychotherapists and liaising with health regulatory authorities, the Ministry of Health, and other stakeholders over matters of common interest and to promote public awareness of the Board's role.

The Board does this by regularly communicating via the Board's website, newsletters, consultation documents, consultation feedback documents, SurveyMonkey, teleconference, kanohi-ki-te-kanohi meetings, annual reports and attendance at conferences and meetings.

The Board values and appreciates all communication and engagement with stakeholders and remains committed to meeting stakeholders, psychotherapy associations, training providers, responsible authorities and Ministry agencies to discuss and mahi on matters of common interest.

8. Linking with responsible authorities

The Board is required under section 118(j) of the HPCA Act to liaise with other authorities appointed under the HPCA Act about matters of common interest.

The Board and the Registrar continue to support and encourage working with other responsible authorities. This has included collaborating in the development of documentation and policy and consultation as appropriate.

9. Contact details

Correspondence should be addressed to:

The Registrar

The Psychotherapists Board of Aotearoa New Zealand

Te Poari o ngā Kaihaumanu Hinengaro o Aotearoa

PO Box 9644

Wellington 6141

The Board's physical address is:

Level 5

22 Willeston Street

Wellington 6011

Telephone: +64 4 918 4727

Email: registrar@pbanz.org.nz

Website: www.pbanz.org.nz

Mai i te kōpae ki te urupā, tātou ako tonu ai
From the cradle to the grave, we are forever learning

10. Financial statements

Audited accounts

**PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
PERFORMANCE REPORT
FOR THE YEAR ENDED 30 SEPTEMBER 2020**

CONTENTS

Non-Financial Information:	PAGE
Entity Information	1
Financial Information:	
Statement of Financial Performance	2
Statement of Movement in Equity	2
Statement of Financial Position	3
Statement of Cash Flows	4
Statement of Accounting Policies	5 - 6
Notes to the Performance Report	7 - 10

PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND

Entity Information

"Who are we?", "Why do we exist?"

FOR THE YEAR ENDED 30 SEPTEMBER 2020

Legal Name of Entity:

PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND

Type of Entity and Legal Basis :

The Psychotherapists Board of Aotearoa New Zealand (the Board) is a body corporate established by the Health Practitioners Competence Assurance Act 2003 (HPCAA) and is a Responsible Authority under that Act. The board is a registered charity, Charity number CC44697.

Entity's Purpose or Mission:

The Board's role is to ensure the implementation of the HPCAA and fulfil the principal purpose as set out in Section 3 and the functions as set out in Section 118 of the HPCAA. The Board has made a commitment to ensure that issues of diversity and equality are valued, upheld and promoted, and underpin all aspects of the Board's work and therefore to being familiar with, and operating according to the principles of natural justice and administrative law: Te Tiriti o Waitangi; Health and Disability Commissioner Act 1994 - Code of Health and Disability Services Consumers' Rights; Health and Disability Services Act 1993; Trans-Tasman Mutual Recognition Act 1997; Health and Safety Work Act 2016; Privacy Act 1993 - Health Information Privacy Code 1994; Human Rights Act 1993.

The Board has been set up to protect the health and safety of members of the public by providing for mechanisms to ensure that health practitioners are competent and fit to practise their professions. The functions of the Board are to:

1. Prescribe the qualifications required for scopes of practice within the profession, and, for that purpose, to accredit and monitor educational institutions and degrees, courses of studies, or programmes;
2. Authorise the registration of health practitioners under this Act, and to maintain a register;
3. Consider applications for Annual Practising Certificates (APCs);
4. Review and promote the competence of health practitioners;
5. Recognise, accredit, and set programmes to ensure the ongoing competence of health practitioners;
6. Consider the cases of health practitioners who may be unable to perform the functions required for the practice of the profession;
7. Promote education and training in the profession;
8. Promote public awareness of the responsibilities of the authority; and
9. Exercise and perform any other functions, powers, and duties that are conferred or imposed on it by or under this Act or any other enactment.

Entity Structure:

The Board has seven (7) members. Five (5) psychotherapists and two (2) lay members to represent public interests. Board members are appointed by the Minister of Health.

Main Sources of the Entity's Cash and Resources:

The Board receives its main income from APC Fees paid by registered psychotherapists.

Additional Information:

To protect the public, the Board is also responsible for making sure that psychotherapists continue to maintain their competence once they have entered the workforce.

General Description of the Entity's Outputs:

To protect the health and safety of members of the public by providing for mechanisms to ensure that psychotherapists are competent and fit to practise.

Contact Details:

Physical Address: Level 5, 22 Willeston Street, Wellington 6011

Phone: (04) 918 4727

Email: registrar@pbanz.org.nz

Website: www.pbanz.org.nz

PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
STATEMENT OF FINANCIAL PERFORMANCE
"How was it funded?" and "What did it cost?"
FOR THE YEAR ENDED 30 SEPTEMBER 2020

		2020	2019
Revenue	NOTE	\$	\$
APC fees		414,809	399,070
Non-practising fees		3,583	3,409
Registration fees		22,870	12,957
Other revenue		5,670	2,600
Interest		23,967	29,632
Total Revenue		470,897	447,666
Expenditure			
Board & committees	1	148,130	125,258
Secretariat	2	266,538	241,180
Total Expenditure		414,668	366,438
Net Surplus		56,229	81,228

PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
STATEMENT OF MOVEMENT IN EQUITY
FOR THE YEAR ENDED 30 SEPTEMBER 2020

	2020	2019
	\$	\$
Accumulated funds at the beginning of period	716,605	635,377
Net surplus for the period	56,229	81,228
Accumulated funds at the end of period	772,835	716,605

The accompanying notes form part of these financial statements

PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
STATEMENT OF FINANCIAL POSITION

"What the entity owns?" and "What the entity owes?"

AS AT 30 SEPTEMBER 2020

	NOTE	2020 \$	2019 \$
Equity	3	772,835	716,605
Current assets			
Cash, bank & bank deposits		314,919	214,341
Investments		731,387	954,972
Accrued income		7,452	14,513
Prepayments		8,131	8,360
Total current assets		1,061,890	1,192,186
Non-current assets			
Property, plant and equipment	4	6,696	10,463
Intangible Assets	4	33,336	0
Total non-current assets		40,033	10,463
Total assets		1,101,922	1,202,649
Current liabilities			
Goods and Services Tax		28,359	49,728
Accounts payable		16,183	18,759
Accrued expenses		7,846	7,504
Employee costs payable	5	24,985	15,246
Income in advance	6	246,330	384,944
Withholding tax payable		5,384	9,862
Total current liabilities		329,088	486,043
Total liabilities		329,088	486,043
Accumulated Funds		772,835	716,605

For and on behalf of the Board:

 Hamish Brown Board Chairperson Date: 11/12/2020	 Jacquelyn Manley Registrar Date: 11/12/2020
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The accompanying notes form part of these financial statements

PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
STATEMENT OF CASH FLOWS
"How the entity has received and used cash"
FOR THE YEAR ENDED 30 SEPTEMBER 2020

	2020	2019
	\$	\$
Cash flows from operating activities		
Cash was received from:		
APC fees	276,196	425,222
Non-practising & registration income	26,713	16,626
Other fees	5,409	2,339
Interest revenue	31,028	16,564
Cash was applied to:		
Board and committees expenditure	-155,184	-119,299
Secretariat expenses	-272,441	-242,062
Net cash flows from operating activities	<u>-88,280</u>	<u>99,390</u>
Cash flows from investing and financing activities		
Cash was applied to:		
Purchase of fixed assets	-34,727	-1,018
Short-term investments	223,585	-132,780
Net cash flows from investing and financing activities	<u>188,858</u>	<u>-133,798</u>
Net decrease in cash	<u>100,578</u>	<u>-34,408</u>
Opening cash brought forward	<u>214,341</u>	<u>248,749</u>
Closing cash carried forward	<u>314,919</u>	<u>214,341</u>
Represented by:		
Cash and cash equivalents	314,919	214,341

PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
STATEMENT OF ACCOUNTING POLICIES
"How did we do our accounting?"
FOR THE YEAR ENDED 30 SEPTEMBER 2020

STATEMENT OF ACCOUNTING POLICIES

BASIS OF PREPARATION

The Board is a body corporate established by the Health Practitioners Competence Assurance Act 2003 and is a Responsible Authority under that Act.

The financial statements have been prepared in accordance with New Zealand Generally Accepted Accounting Practice (NZ GAAP) and have been prepared on the basis of historical cost.

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

Cash, bank & bank deposits

Cash, bank and bank deposits includes petty cash, deposits at cheque account and saving account with banks.

Investments

Investments are recognised at cost. Investment income is recognised as an accrual basis where appropriate

Interest recognition

Interest revenue is recognised in the period in which it is earned, using the effective interest method.

Receivables

Receivables are stated at estimated realisable values.

Accrued Income

Accrued interest are recognised at cost from term deposits.

Prepayments

Prepayments made in advance for goods and services before their receipt or invoice date are recorded.

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. Property, plant & equipment are shown at original cost less accumulated depreciation.

Depreciation

Depreciation of property, plant & equipment have been assessed based on the useful lives of each asset class.

The following rates have been used:

Computer Equipment	20% Straight Line Method
Fixture and Fittings	20% Straight Line Method
Office Refit	20% Straight Line Method

PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
STATEMENT OF ACCOUNTING POLICIES
"How did we do our accounting?"
FOR THE YEAR ENDED 30 SEPTEMBER 2020

STATEMENT OF ACCOUNTING POLICIES (continued)

Intangible Assets

Intangible Assets comprise non-physical and non-financial assets which have a benefit to the Board for periods extending beyond the year the costs are incurred.

Amortisation

Intangible assets are amortised over the period of benefit to the Board at the following rate:

Website/Database 5 years Straight Line Method

Impairment

At balance date, the Council reviews the carrying amounts of its assets to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impaired loss.

Accounts Payable

Short term payables are recorded at the amount payable.

Accrued Expenses

Provisions are recorded for the accrued expenses.

APC Income and Income Received in Advance

Fees received for the issue of APCs and register maintenance are recognised in the year to which the fees relate. Receipts for APCs issued for future years are shown as Income Received in Advance.

Goods & Services Tax

The Board is registered for GST, and all amounts are stated exclusive of Goods & Services Tax (GST), except for receivables and payables that are stated inclusive of GST.

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 exempt from Income Tax. The Board is registered as a charitable entity under the Charities Act 2005

Comparatives

Some prior year comparative figures have been reclassified to match current year disclosure.

Changes in accounting policies

All policies have been applied on a consistent basis with those of the previous period.

PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
NOTES TO THE PERFORMANCE REPORT
FOR THE YEAR ENDED 30 SEPTEMBER 2020

		2020	2019
	NOTE	\$	\$
1. BOARD & COMMITTEES			
Fees		88,559	74,944
Meeting expenses, training, travel & others		34,686	39,285
Legal, investigation and hearing expenses		24,884	11,029
		148,130	125,258
		2020	2019
		\$	\$
2. SECRETARIAT			
Audit fees		6,739	6,892
Depreciation & amortisation	4	5,112	5,313
Occupancy		18,238	18,109
Other costs		35,449	36,834
Personnel & professional fees		199,078	171,849
Printing and stationery		1,923	2,183
		266,538	241,180
		2020	2019
		\$	\$
3. EQUITY			
General Reserve			
Balance at 1 October		618,458	526,201
Surplus for year		79,019	92,257
Balance at 30 September		697,477	618,458
Discipline Reserve			
Balance at 1 October		98,148	109,176
Deficit for year		-22,790	-11,029
Balance at 30 September		75,358	98,148
Total Reserves		772,835	716,605

General reserve is used for operating expenses; accumulated surpluses with unrestricted use.

Discipline reserve is used for the Professional Conduct Committees and Health Practitioners

Disciplinary Tribunal costs.

PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
NOTES TO THE PERFORMANCE REPORT
FOR THE YEAR ENDED 30 SEPTEMBER 2020

4. PROPERTY, PLANT & EQUIPMENT

	Opening Value	Current year additions	Current year Sales/ Disposals	Current Year Depreciation	Closing carrying Value
At 30 September 2020					
Computer Equipment	2,142	442	-45	-1,136	1,403
Fixture and Fittings	5,625	0	0	-1,125	4,500
Office Refit	2,696	0	0	-1,903	793
Total Property, Plant & Equipment	10,463	442	-45	-4,164	6,696

Intangible Assets

IMIS (Work in progress)	0	30,492	0	0	30,492
Business Central	0	3,792	0	-948	2,844
Total Intangible Assets	0	34,284	0	-948	33,336

At 30 September 2019

	Opening Value	Current year additions	Current year Sales/ Disposals	Current Year Depreciation	Closing carrying Value
Computer Equipment	4,285	0	0	-2,142	2,142
Fixture and Fittings	5,874	1,018	0	-1,268	5,625
Office Refit	4,599	0	0	-1,903	2,696
Total Property, Plant & Equipment	14,758	1,018	0	-5,313	10,463

5. EMPLOYEE COSTS PAYABLE

PAYE owing	3,199	3,114
Holiday pay accrual	18,935	11,115
Kiwisaver contributions owing	785	1,116
Accruals - Payroll	1,803	0
Student loan	263	430
	24,985	15,775

6. INCOME IN ADVANCE

Fees received relating to next year:

APC fees	243,652	381,787
Non-Practising fee	2,678	3,157
	246,330	384,944

7. SHARED SERVICES

In 2015/16, Nursing Council of New Zealand, Occupational Therapy Board of New Zealand, Podiatrists Board of New Zealand, Dietitians Board, Midwifery Council of New Zealand, Psychotherapists Board of Aotearoa New Zealand, Osteopathic Council of New Zealand, Chiropractic Board, Psychologist Board, and Optometrists and Dispensing Opticians Board entered into an agreement to co-locate to 22 Willeston Street, Wellington. The lease agreement for 22 Willeston Street (signed solely by Nursing council of New Zealand) is for five years taking effect from 1st February 2016 and expiring on 1st February 2021.

To facilitate the management of shared resources, including a joint lease agreement for office rental purposes and corporate supports, the ten RAs entered into an agreement for the provision of corporate services.

PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
NOTES TO THE PERFORMANCE REPORT
FOR THE YEAR ENDED 30 SEPTEMBER 2020

8. CREDIT CARD FACILITY

There is a visa credit card with \$7,000 limit, held with Westpac.

9. COMMITMENTS

The Board have an agreement with the Nursing Council of New Zealand for the provision of back office corporate services. The Service Level Agreement is for an initial period of five years. The future estimated commitments based on the expected costs included in this agreement as at future estimated commitments based on the expected costs included in this agreement as at 30 September 2020 are: property \$4,292; corporate services \$9,962; total \$14,253 per year.

	2020	2019
	\$	\$
Corporate services		
Due in 1 year	9,962	25,076
Due between 1-2 years	0	9,962
	<u>9,962</u>	<u>35,038</u>

Contractual commitments for operating leases of premises Level 5, 22 Willeston Street, Wellington.

	2020	2019
	\$	\$
Due in 1 year	4,292	10,803
Due between 1-2 years	0	4,292
	<u>4,292</u>	<u>15,095</u>

The figures disclosed above reflect the Board's rent, as currently payable. The lease agreement is in the name of Nursing Council of New Zealand.

10. CAPITAL COMMITMENTS

There were no capital commitments at balance date. (2019: \$Nil)

11. CONTINGENT LIABILITIES

There were no contingent liabilities at balance date. (2019: \$Nil)

12. RELATED PARTY TRANSACTIONS

There were no other related party transactions involving related parties during the financial year. (2019: \$Nil)

PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
NOTES TO THE PERFORMANCE REPORT
FOR THE YEAR ENDED 30 SEPTEMBER 2020

13. KEY MANAGEMENT PERSONNEL COMPENSATION

	2020	2019
	\$	\$
Board Members Remuneration		
Hamish Brown (Chairperson)	15,150	10,680
Lucie Zwimpfer (Deputy chairperson)	7,560	2,240
Suzanne Johnson (Board member)	17,555	19,722
Anna Hedley (Board member)	7,820	8,520
Kyle MacDonald (Appointed member July 2019)	7,640	1,840
Gerry Te Kapa Coates (Appointed layperson July 2019)	8,380	2,380
Josiah Tualamali'i (Appointed layperson July 2019)	4,260	1,920
Bill Grant (Term finished July 2019)	0	5,692
Megan Campbell (Term finished July 2019)	0	5,040
Simon Hall (Term finished July 2019)	0	7,600
	68,365	65,634
	2020	2019
	\$	\$
Secretariat Remuneration		
Remuneration	166,839	146,676
Number of full time staff	1	1
Number of part time staff	1	1

14. COVID-19 IMPACT

On 11 March 2020, the World Health Organisation declared the outbreak of COVID-19 (a novel Coronavirus) a pandemic. Two weeks later, on 26 March, New Zealand increased its COVID-19 alert level 4 and a nationwide lockdown commenced. As part of this lockdown all staff were required to work from home until level one which came into effect on 3 June 2020.

At the date of issuing the financial statement, the Board has been able to absorb the majority of the impact from the nationwide lockdown.

However, economic uncertainties have arisen which may have a financial impact on the Board:

- 1) The potential loss of income from registered practitioners not renewing their Annual Practising Certificate. This impact is currently low as most have already renewed for the 2020-2021 year.
- 2) The potential loss of income from new registrations caused by the delay of students not completing their qualification in this year. However, with the move to level 1 it appears that students should not be impacted. The situation will continue to be monitored.
- 3) Increased expenditure for the Board to develop and publish guidance plans for practitioners on how to work under the restrictions imposed by COVID-19 and plans to minimize the impact on staff.
- 4) Additional expenditure, however, has been offset due to less travel costs and cancellation of overseas conferences.

The Board considers that it will be able to continue as a going concern for the foreseeable future.

15. EVENTS AFTER BALANCE DATE

There were no events that have occurred after balance date that would have a material impact on the Performance Report. (2019: \$Nil)