

The Psychotherapists Board
of Aotearoa New Zealand

Te Poari o nga Kaihaumanu Hinengaro o Aotearoa

Psychotherapists Board of Aotearoa New Zealand
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Annual Report

Year Ending 30 September 2019

The Psychotherapists Board of Aotearoa New Zealand (Board) is pleased to present this report to the Minister of Health for the year ended 30 September 2019. This report is presented in accordance with section 134(1) of the Health Practitioners Competence Assurance Act 2003 (HPCAA).

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.

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1. Governance

Psychotherapists Board of Aotearoa New Zealand (Board)

The Board's role is to implement the Health Practitioners Competence Assurance Act 2003 (HPCAA) by fulfilling 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 upheld, promoted and underpin all aspects of the Board's work according to the following:

- Tiriti o Waitangi/Treaty of 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 1 October 2018 to 30 September 2019.

Board membership

The Board continues to function effectively in achieving goals set in our strategic and annual plans.

The Board has had two new lay and two new practitioner members appointed who have replaced four experienced Board members. The new Board met in August, and new members have participated effectively, contributing to the Board's ongoing work and current projects.

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; Māori, 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 HPCAA.

Natasha Khouri, the Board's Registration Officer, assists the Registrar and has become 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.

This year the Board carried out further consultation with psychotherapy training providers and has made progress with the development of a single draft training standards document that takes into account the diversity of training pathways available in Aotearoa New Zealand and internationally. The Board is working toward standards based on the effective training and assessment process already provided by current trainers, and recognises that while some training is provided by tertiary institutions, training is also provided by small professional groups and organisations that are a branch of larger international organisations. This makes the creation of a single standards document complex, and stakeholder engagement via consultation continues.

The Board remains committed to finalising the standards, so these can be applied to Māori and non-Māori pathways, and we have participated in hui with Māori pathway providers. There remains relational work to be done to maintain engagement and to develop Māori training provider and practitioner trust in the Board's processes as a regulatory authority working under the HPCAA.

Engagement with professional stakeholders

Engagement with practitioners continues via the Board's monthly newsletter, consultation, face-to-face meetings, and 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 reticence and mistrust from others who were well established prior to the Boards inception. The Board continues to offer communication opportunities 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 HPCAA.

Board members, as part of our strategic plan, continue to remain informed about mental health concerns apparent in Aotearoa New Zealand currently. The Board is informed by the mental health priorities reviewed by the Ministry of Health, and by social and clinical discussion and research. The Board recognises we have a role within the wider health sector.

The Board continues to work on actualising our policy 'Te Tiriti o Waitangi in carrying out the Board's regulatory functions under the HPCAA'. We have engaged tikanga advisors who have

supported and guided our participation at a hui with Māori practitioners, and continue to assist us with developing bicultural practices in carrying out the Board's work.

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 premises and shared accounting and secretariat services are working well and provide a broad range of benefits including sharing of knowledge and resources.

Professional Advisors

Current Professional Advisors are making a significant contribution to Board Operational Committees. The Board has increased the number of Professional Advisors available to us and appreciate the work undertaken by these experienced psychotherapists.

Budget

Our budget review shows that the Board's income, mainly from practitioners' annual practising certification fees, supplies sufficient funds for ongoing projects, such as accreditation of training programmes and Board office technological upgrades.

Planned projects, such as new data management and accessible communication systems, are progressing with careful consideration being given to best cost-effective options that will be able to meet data collection requirements such as Health Workforce Development data.

The 2018/2019 financial year resulted in a budget surplus. This surplus is due to several factors including budget items allocated and not yet spent. The current surplus will be used in the development, consultation and implementation of accreditation processes, and for engagement in hui with Māori practitioners. The Board has sufficient reserves which in part have been allocated to projects that include upgrading the Board's IT systems i.e. database, website and document management systems.

Closing Comment

The Board continues to do its work effectively, and recent change in membership has brought some younger members whose contributions are already proving valuable.

The Board is aware that psychotherapists are an aging workforce and will continue to consider this alongside training providers in order to support future access to effective psychotherapy for the New Zealand public.

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 HPCAA.

The Chair and Deputy Chair are appointed by the Board at its first meeting of each year.

Board membership at 1 October 2018 was as follows:

- Ms Suzanne Johnson (Chair, Wellington)
- Mr Hamish Brown (Deputy Chair, Auckland)
- Ms Anna Hedley (Auckland)

- Mr Bill Grant (Wellington)
- Ms Miriana Stephens (layperson, Motueka)
- Ms Megan Campbell (layperson, Hamilton)
- Mr Simon Hall (Christchurch)

In July 2019, Board membership changed with the appointment of:

- Mr Kyle MacDonald (Auckland)
- Dr Lucie Zwimpfer (Wellington)
- Mr Gerry Te Kapa Coates (layperson, Wellington)
- Mr Josiah Tulalamali'i (layperson, Christchurch)

Following the above appointments, the Board farewelled:

- Mr Bill Grant
- Mr Simon Hall
- Ms Miriana Stephens
- Ms Megan Campbell

Ms Suzanne Johnson (Chair) – Board member since May 2013

Suzanne identifies as Pākehā, descendent from English and Irish settlers who arrived in Taranaki and Dunedin in the 1840s. Suzanne holds a Master of Science degree 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.

Mr Hamish Brown (Deputy Chair) – Board member since December 2016

Hamish Brown is a practitioner Board member appointed 2016. 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 in Wellington, a Master's degree in 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 Post Graduate Diploma in Health Science (Psychoanalytic Psychotherapy) from Auckland University of Technology.

Hamish has worked as an organisational consultant for 20 years working in the areas of leadership development and change and 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 Atatu Peninsula in West Auckland.

Ms Anna Hedley – Board member since May 2013

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 Bill Grant – Board member since February 2011

Bill was raised and educated in Clyde and Dunedin. He has degrees in German and English, and spent 10 years teaching in the Cook Islands, New Zealand and Germany before starting an apprenticeship in psychotherapy under the New Zealand Association of Psychotherapists programme. He undertook this while working at an adolescent inpatient psychiatric training unit in Dunedin attached to the Department of Psychological Medicine at the university. This led to work as a visiting guidance counsellor, clinic manager in the University of Otago, private practitioner, trainer of clinicians in several disciplines and programmes and clinical advisor in the ACC Sensitive Claims Unit and in an advisory role for the Health and Disability Commissioner. He has also served as Ethics Secretary for the New Zealand Association of Counsellors, managing its complaints service, and as a lay member of a New Zealand Law Society Standards Committee providing advice on complaints. In October 2019 Bill retired as a psychotherapist.

Ms Miriana Stephens (layperson) – Board member since August 2014

Miriana was born and raised in Motueka by her grandparents. She has a Bachelor of Arts majoring in New Zealand history from Canterbury University and a law degree from Waikato University majoring in commercial law and Māori land law. Miriana is currently a director of Aotahi Ltd, a Māori-owned and managed business based in Te Kuiti that specialises in developing and managing educational programmes and resources for entrepreneurs and small business owners throughout Aotearoa. She is also a director for Wakatū Incorporation – a family business whose owners descend from the original Māori landowners of the Nelson, Tasman and Golden Bay region. She is a director on the property division, is a member of the Audit and Risk Committee and also holds horticultural directorships on behalf of Wakatū and Kono NZ (the Food and Beverage business of Wakatū). Miriana is also trustee for Te Āwhina Marae and Motueka High School and currently resides in Motueka with her children.

Ms Megan Campbell (layperson) – Board member since August 2014

Megan has qualifications in arts, commerce and policy. She has worked in advocacy, policy and communications roles within central government, Parliament and the not-for-profit sector and has also provided government relations advice to many New Zealand companies and not-for-profits. Megan has extensive governance experience and serves on several boards across New Zealand, particularly within the health, education and sport sectors.

Mr Simon Hall – Board member since August 2015

Simon served as a practitioner member of the Board with the Psychotherapists Board of Aotearoa New Zealand (PBANZ), and continue to act as professional advisor to the Board. He is a Child and Adolescent Psychotherapist working in private practice, with over 20 years' experience working with children and their families in District Health Board mental health

services, charitable and private settings in New Zealand and the UK. He has experience as a clinical manager and supervisor, and has worked with families affected by parental substance use. He has acted on the Executive of the New Zealand Association of Child and Adolescent Psychotherapists for 9 years, and have been an expert advisor for the Health and Disability Commission.

Mr Kyle MacDonald – Board member since July 2019

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.

Dr Lucie Zwimpfer – Board member since July 2019

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.

Mr Gerry Te Kapa Coates (layperson) – Board member since July 2019

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. Also 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) – Board member since July 2019

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.

Board member fees

Fees are paid to Board members for work undertaken on behalf of the Board. The Board Chair receives \$100 per hour (an increase of \$10 per hour from August 2018), and Board members receive \$80 per hour (unchanged since 2008).

Board member	Fees paid 2017/2018	Fees paid 2018/2019
Ms Suzanne Johnson	\$20,189.07	\$19,722.00
Mr Hamish Brown	\$11,120.00	\$10,680.00
Ms Anna Hedley	\$8,760.00	\$8,520.00
Ms Megan Campbell**	\$4,960.00	\$7,360.00
Ms Miriana Stephens**	\$5,200.00	\$640.00
Mr Bill Grant**	\$9,356.00	\$8,517.00
Mr Simon Hall**	\$13,980.00	\$8,880.00
Mr Gerry Te Kapa Coates*		\$2,380.00
Mr Josiah Tulalamali'i*		\$1,920.00
Dr Lucie Zwimpfer*		\$2,240.00
Mr Kyle MacDonald*		\$1,840.00

Fees paid¹ are gross income before GST and including resident withholding tax.

* Board member until July 2019

** Board member from July 2019

¹ Excluding any expenses

Board strategic plan

Throughout its work, the Board aims to function as a 'right-touch²' regulator. This means making decisions and taking actions proportionate to the risk identified.

The Board had set the following strategic objectives for a 5-year period:

- Section 118 functions: to meet the statutory functions outlined in the HPCAA.
- Governance performance: to be accountable and operate effectively and efficiently within agreed policy.
- Finance and risk: the finance and risk strategy will support the Board to fulfil its functions.
- Communications and information management systems: to engage in active transparent engagement with stakeholders.
- Education and innovation: to provide relevant training opportunities and remain aware of relevant innovation.

During the Board's 2019 planning day, the Board agreed to a revised strategic plan that will focus on 3 areas:

1. Tiriti o Waitangi/Treaty of Waitangi Commitment; that Board work reflects the Tiriti o Waitangi/Treaty of Waitangi
2. Stakeholder engagement; that the purpose and functions of the Board are communicated through positive engagement with the public, psychotherapists and stakeholders
3. Technology trends; that 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 (HPCAA)

Amendments to the HPCAA came into effect earlier this year and include:

- Inclusion of cultural competence provisions with specific mention of cultural competencies that will enable effective and respectful interaction with Māori/tangata whenua.
- Wider use of electronic processes and communications (email) such as the issuing of Annual Practising Certificates (APC).
- Clarification to ensure complainants are kept informed about complaint processes and Board decisions.

² Professional Standards Authority UK

- Medical assessment may now be undertaken by a health practitioner. Previously, this assessment was required to be carried out by a medical practitioner.
- Clarification that the Board can receive and act on information from members of the public about the practice, conduct or competence of a psychotherapist.
- Responsible authorities (RAs) will be required to undergo a performance review every 5 years.
- The Board will be required to develop a naming policy under section 157 of the HPCAA.
- The Board will be required to collect workforce data such as name, date of birth, gender, ethnicity, employer, place of employment, hours of work and scope of practice.
- RAs will be able to revoke the accreditation of a psychotherapy programme.

The Board is now considering how it will operationalise the amendments. Following are examples.

Performance reviews

Effective from 2022, the amended Act requires 5-yearly independent performance reviews for RAs to ensure they are carrying out the functions as intended by the HPCAA. The results of the performance review must be posted on the Board's website.

The Board is currently working with the Ministry of Health and other RAs on this requirement. Once requirements are drafted, the Ministry will consult with stakeholders (including psychotherapists) regarding proposed Board performance review processes.

Naming policy

Within 1 year, RAs will be required to put in place a naming policy. This policy will determine situations where the Board may publish orders and directions made about individual practitioners under a new section 157A of the HPCAA. This requirement reflects a trend for greater transparency, ensuring the public can see that regulation is occurring.

The Board will be collaborating with other RAs in the development of a naming policy.

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 four meetings held between 1 October 2018 and 30 September 2019:

- 16–17 November 2018
- 15–16 March 2019
- 26–27 May 2019
- 16–17 August 2019

Employee changes

After 5 and half years as a valued employee, the Board's Registration Officer, Eva Petro, retired from paid work in January 2019.

The Board's new part-time Registration Officer is Natasha Khouri. Natasha has quickly become a valuable addition to the team and has a keen interest in psychotherapy, having completed a bachelor's degree in science, majoring in psychology.

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 nine other RAs. 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 collaboration such as networking, 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 through email, a website accessible only to Board members, teleconferencing and face-to-face meetings, and 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
-

Acknowledgements

The Board would like to thank the people who assist and/or support the Board in fulfilling its purpose and regulatory functions throughout the year. Those who support for the Board's work include professional advisors, Accreditation Committee members, clinical supervisors, psychotherapists, training providers, psychotherapy associations, Competence Review Committee members and Professional Conduct Committee members.

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 has received.

The Board looks forward to continuing to develop and strengthen its relationships with stakeholders.

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

Psychotherapist Scopes of Practice

Under section 11 of the HPCAA, 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.

The Board has two pathways to registration. Acceptable qualifications³ are being grandparented until the accreditation of psychotherapy training programmes is completed.⁴

The two current pathways are:

- a tertiary programme
- a professional development programme or course of study.

Persons seeking registration under a tertiary programme must hold a master's level qualification in psychotherapy.

Persons seeking registration under a professional development programme or course of study must successfully complete a final clinical assessment through a Board-approved organisation. Organisations currently approved to conduct these assessments during grandparenting are the Australian and New Zealand Society of Jungian Analysts, New Zealand Association of Psychotherapists and New Zealand Association of Child and Adolescent Psychotherapists.

The Board notes that any person holding an overseas psychotherapy qualification not prescribed by the Board can apply to the Board under section 15(2) of the HPCAA to have their qualification assessed as comparable to a prescribed qualification.⁵ Assessments under section 15(2) apply to individuals⁶ only and are assessed on a case-by-case basis.

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

³ prescribed by the Board through the Gazette

⁴ see the accreditation section below for an update on this progress

⁵ The Board has a *Policy Statement on Criteria Expected for Comparable Qualification*, which will be reviewed to reflect finalised accreditation standards.

⁶ They do not apply to training providers.

Accreditation

Under sections 12(2) and 118(a) of the HPCAA, 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.

The Board is aware that many psychotherapy qualifications are Australasian and/or international and that the reality of training as a psychotherapist in Aotearoa New Zealand is delivered through a range of approaches to programme structure, content and training processes. Further to this, theoretical knowledge may be specific and may overlap between several approaches. While varied in approach, psychotherapy training is considered to be effective when identified components of clinical practice are evident, such as the ability to assess and the ability to participate in and manage psychotherapeutic relationships with individuals, couples, families and groups.

Due to the complexity and diversity of psychotherapy training, and informed by consultation with training providers over the past year, the Board has been developing meta-level standards within a single accreditation standards document.⁷ This is designed to include and acknowledge the different types of psychotherapy training available in Aotearoa New Zealand including:

- psychotherapy professional development pathways⁸
- psychotherapy educational programmes⁹
- psychotherapy modality-specific programmes.¹⁰

Work over the last year has involved the continued refinement of accreditation standards. In September 2019, further consultation began with training providers. This consultation will close on 29 November 2019, which falls outside of this report.

This consultation process will involve the Board inviting training providers to attend facilitated meetings in Christchurch, Wellington and Auckland. These meetings are intended to provide an opportunity for training providers and Board members to gather together to discuss the draft standards, hear and discuss concerns and seek clarity so that the standards have meaning and relevance for psychotherapy training.

The Board would like to acknowledge 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. This feedback continues to help the Board shape and refine accreditation standards that are realistic and relevant to the training of psychotherapists, while meeting the requirements of the HPCAA.

⁷ Previously, the Board had consulted on two separate standards.

⁸ **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. Training and education will be selected and undertaken by individual trainees in discussion with their training clinical supervisor.

⁹ **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, which may begin during or after the theoretical part of any programme.

¹⁰ **Modality-specific training programmes** can situate themselves within the definition that best describes their programme.

Wider consultation will take place as soon as practicable and will involve programme providers, practitioners, stakeholders and the public. In the meantime, the Board continues to keep stakeholders, training providers and psychotherapists updated on progress through its newsletters and correspondence.

Accreditation Committee

The Board would like to acknowledge the ongoing work of its Accreditation Committee (Committee). The Committee is made up of six members, two Board members and four training providers. Committee members were sought via expressions of interest, and all who applied were appointed.

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. Mr Brown was appointed in 2017, and all other members were appointed in 2013.

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

HPCAA section	Scope	Number	Registered	Registered with conditions	Not registered
15	Interim Psychotherapist Scope of Practice	15	15	0	-
15	Psychotherapist Scope of Practice	14	14	0	-
15	Psychotherapist Scope of Practice with Child and Adolescent Psychotherapist Specialism	0	0	0	

Annual Practising Certificates

An annual practising certificate (APC) provides assurance to the public that a psychotherapist is competent and fit to practise their profession. Each year, psychotherapists are required to declare that they have maintained their competence and fitness to practise.

The cost of the APC (\$850 including GST) remains unchanged.

APC applications

Total applications	APCs with conditions	No APC
551	1	-

52 psychotherapists held a non-practising status and 21 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 HPCAA because the Board was unable to contact the psychotherapist
- notification of death.

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

Competence

Under the HPCAA, 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.¹¹ 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.

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.

There were no competence reviews or programmes completed during the timeframe covered by this report.

¹¹ Reviews also ensure that notifications are not frivolous or vexatious.

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, the Board finalised one existing health notification under section 45 of the HPCAA. Following the completion of Board processes, the psychotherapist was deemed fit to practise.

One psychotherapist voluntarily made a health-related notification. Following the completion of Board processes, the psychotherapist was deemed fit to practise.

Recertification and continuing competence

The Board considers engagement in ongoing professional development an important factor in maintained competence. The Board continues to audit at least 100 psychotherapists annually.

Feedback indicated that psychotherapists are finding the self-reflective process beneficial and useful to their practice. Overall, the audit process continues to be successful, with the Board receiving encouraging and positive feedback from many psychotherapists.

This year, the Board introduced an audit exemplar that psychotherapists have found useful. The Board intends to develop a second exemplar in the coming year.

The recertification plan tips continue to be useful and were updated following the completion of the 2017/18 audit period. The audit exemplar and tips are available on the Board's website.

5. Complaints and discipline – Part 4 of the HPCAA

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 HPCAA, 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 three new complaints during the period covered in this report. All three complaints are open and ongoing at the time of this report.

Professional Conduct Committee

A professional conduct committee (PCC) is a statutory committee appointed to investigate complaints that relate to a practitioners' 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 HPCAA, 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, two complaints were referred to a PCC. Both cases remain open. The third complaint has yet to be assessed.

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 HPCAA. 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 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 with the public, Ministry of Health, stakeholders and psychotherapists via the Board's website, newsletters, consultation documents, consultation feedback documents, SurveyMonkey, teleconference, face-to-face 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, RAs and Ministry agencies to discuss and work on matters of common interest.

8. Linking with Responsible Authorities

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

The Board and the Registrar continue to support and encourage working with other RAs. This work has included combining training, collaborating in the development of documentation and policy and as appropriate consultation.

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

Secretariat

The Board is currently supported by two staff (1.2 FTE):

Jacquelyn Manley (Registrar)

Natasha Khouri (Registration Officer)

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

10. Financial statements

Audited accounts

**INDEPENDENT AUDITOR'S REPORT
TO THE READERS OF PSYCHOTHERAPISTS BOARD OF AOTEAROA
NEW ZEALAND'S PERFORMANCE REPORT
FOR THE YEAR ENDED 30 SEPTEMBER 2019**

The Auditor-General is the auditor of Psychotherapists Board of Aotearoa New Zealand (Psychotherapists Board). The Auditor-General has appointed me, Chrissie Murray, using the staff and resources of Baker Tilly Staples Rodway Audit Limited, to carry out the audit of the financial statements of the Psychotherapists Board of New Zealand on his behalf.

Opinion

We have audited the financial statements of Psychotherapists Board that comprise the statement of financial position as at 30 September 2019, the statement of financial performance, the statement of movement 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.

In our opinion the financial statements of Psychotherapists Board present fairly, in all material respects:

- its financial position as at 30 September 2019; and
- its financial performance and cash flows for the year then ended; and
- comply with generally accepted accounting practice in New Zealand and have been prepared in accordance with Public Benefit Entity Simple Format Reporting – Accrual (Public Sector)

Our audit was completed on 10 December 2019. 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 Psychotherapists Board and our responsibilities relating to the financial statements 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 Professional and Ethical Standards and International Standards on Auditing (New Zealand) issued by the New Zealand Auditing and Assurance Standards Board. Our responsibilities under those standards are further described in the Responsibilities of the Auditor section of our report.

We have fulfilled our responsibilities in accordance with the Auditor-General's Auditing Standards.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of the Board for the financial statements

The Board is responsible for preparing financial statements that are fairly presented and that comply with generally accepted accounting practice in New Zealand.

The Board is 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.

In preparing the financial statements, the Board is responsible on behalf of Psychotherapists Board for assessing Psychotherapists Board's ability to continue as a going concern. The Board is also responsible for disclosing, as applicable, matters related to going concern and using the going concern basis of accounting, unless there is an intention to liquidate Psychotherapists Board or to cease operations, or there is no realistic alternative but to do so.

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

Responsibilities of the auditor for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements, as a whole, are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion.

Reasonable assurance is a high level of assurance but is not a guarantee that an audit carried out in accordance with the Auditor-General's Auditing Standards will always detect a material misstatement when it exists. Misstatements are differences or omissions of amounts or disclosures and can arise from fraud or error. Misstatements are considered material if, individually or in the aggregate, they could reasonably be expected to influence the decisions of readers taken on the basis of these financial statements.

We did not evaluate the security and controls over the electronic publication of the financial statements.

As part of an audit in accordance with the Auditor-General's Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. Also:

- We identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- We obtain an understanding of internal control relevant to the audit 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.
- We evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the governing body.
- We conclude on the appropriateness of the use of the going concern basis of accounting by the governing body and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on Psychotherapists Board's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause Psychotherapists Board to cease to continue as a going concern.

- We evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

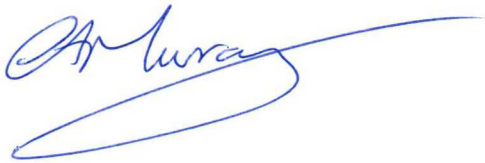
We communicate with the Board regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Our responsibility arises from the Public Audit Act 2001 and section 134(1) of the Health Practitioners Competence Assurance Act 2003.

Independence

We are independent of Psychotherapists Board in accordance with the independence requirements of the Auditor-General's Auditing Standards, which incorporate the independence requirements of Professional and Ethical Standard 1(Revised): *Code of Ethics for Assurance Practitioners* issued by the New Zealand Auditing and Assurance Standards Board.

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



Chrissie Murray
Baker Tilly Staples Rodway Audit Limited
On behalf of the Auditor-General
Wellington, New Zealand

PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
PERFORMANCE REPORT
FOR THE YEAR ENDED 30 SEPTEMBER 2019

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PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND

Entity Information

"Who are we?", "Why do we exist?"
FOR THE YEAR ENDED 30 SEPTEMBER 2019

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. Charitable trust 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 - 9184727

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 2019

		2019	2018
		\$	\$
Revenue	NOTE		
APC fees		399,070	391,122
Non-practising fees		3,409	3,226
Registration fees		12,957	14,435
Other revenue		2,600	3,077
Interest		29,632	25,930
Total Revenue		447,666	437,789
Expenditure			
Board & committees	1	125,258	145,409
Secretariat	2	241,180	229,939
Total Expenditure		366,438	375,348
Net Surplus		81,228	62,442

PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
STATEMENT OF MOVEMENT IN EQUITY
FOR THE YEAR ENDED 30 SEPTEMBER 2019

	2019	2018
	\$	\$
Accumulated funds at the beginning of period	635,377	572,936
Net surplus for the period	81,228	62,442
Accumulated funds at the end of period	716,605	635,377

The accompanying notes form part of these financial statements



PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND

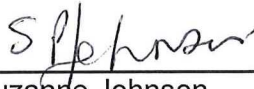
STATEMENT OF FINANCIAL POSITION


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

AS AT 30 SEPTEMBER 2019

	NOTE	2019 \$	2018 \$
Equity	3	716,605	635,377
Current assets			
Cash, bank & bank deposits		214,341	248,749
Investments		954,972	813,780
Accrued income		14,513	9,857
Prepayments		8,360	9,943
Total current assets		<u>1,192,186</u>	<u>1,082,329</u>
Non-current assets			
Property, plant and equipment	4	<u>10,463</u>	<u>14,758</u>
Total assets		<u>1,202,649</u>	<u>1,097,087</u>
Current liabilities			
Goods and Services Tax		49,728	47,631
Accounts payable		18,759	14,849
Accrued expenses		7,504	13,562
Employee costs payable	5	15,246	19,063
Income in advance	6	384,944	358,791
Withholding tax payable		9,862	7,814
Total current liabilities		<u>486,043</u>	<u>461,710</u>
Total liabilities		<u>486,043</u>	<u>461,710</u>
Accumulated Funds		<u>716,605</u>	<u>635,377</u>

For and on behalf of the Board:


 Suzanne Johnson
 Board Chairperson
 Date:


 Jacquelyn Manley
 Registrar
 Date: 10/12/19

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 2019

	2019 \$	2018 \$
Cash flows from operating activities		
Cash was received from:		
APC fees	425,222	388,220
Non-practising & registration income	16,626	17,922
Other fees	2,339	2,816
Interest revenue	16,564	20,007
Cash was applied to:		
Board and committees expenditure	-119,299	-151,010
Secretariat expenses	-242,062	-216,102
Net cash flows from operating activities	<u>99,390</u>	<u>61,852</u>
Cash flows from investing and financing activities		
Cash was applied to:		
Purchase of fixed assets	-1,018	-2,830
Short-term investments	-132,780	-180,000
Net cash flows from investing and financing activities	<u>-133,798</u>	<u>-182,830</u>
Net decrease in cash	<u>-34,408</u>	<u>-120,978</u>
Opening cash brought forward	<u>248,749</u>	<u>369,727</u>
Closing cash carried forward	<u>214,341</u>	<u>248,749</u>
Represented by:		
Cash and cash equivalents	214,341	248,749



PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
STATEMENT OF ACCOUNTING POLICIES
"How did we do our accounting?"
FOR THE YEAR ENDED 30 SEPTEMBER 2019

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

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

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.

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.



PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
STATEMENT OF ACCOUNTING POLICIES
"How did we do our accounting?"
FOR THE YEAR ENDED 30 SEPTEMBER 2019

STATEMENT OF ACCOUNTING POLICIES (continued)

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 2019

		2019	2018
		\$	\$
1. BOARD & COMMITTEES	NOTE		
Fees	15	74,944	87,098
Meeting expenses, training, travel & others		39,285	58,310
Legal, investigation and hearing expense (Discipline)		11,029	0
		125,258	145,409
		2019	2018
		\$	\$
2. SECRETARIAT			
Audit fees		6,892	6,432
Depreciation & amortisation	4	5,313	6,512
Occupancy		18,109	16,698
Other costs		36,834	32,763
Personnel & professional fees		171,849	167,041
Printing and stationery		2,183	493
		241,180	229,939
		2019	2018
		\$	\$
3. EQUITY			
General Reserve			
Balance at 1 October		526,201	463,760
Surplus for year		92,257	62,442
Balance at 30 September		618,458	526,201
Discipline Reserve			
Balance at 1 October		109,176	109,176
Deficit for year		-11,029	0
Balance at 30 September		98,148	109,176
Total Reserves		716,605	635,377

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 2019**

4. PROPERTY, PLANT & EQUIPMENT

At 30 September 2019

	Opening Carrying account	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	4,600	0	0	-1,903	2,697
	14,758	1,018	0	-5,313	10,463

At 30 September 2018

	Opening Carrying account	Current year additions	Current year Sales/disposals	Current Year Depreciation	Closing carrying Value
Computer Equipment	4,700	2,830	-105	-3,140	4,285
Fixture and Fittings	7,343	0	0	-1,469	5,874
Office Refit	6,503	0	0	-1,903	4,600
	18,547	2,830	-105	-6,512	14,759

5. EMPLOYEE COSTS PAYABLE

	2019	2018
	\$	\$
PAYE owing	3,114	3,676
Holiday pay accrual	11,115	14,271
Kiwisaver contributions owing	1,116	1,116
Student loan	430	0
	15,775	19,063

6. INCOME IN ADVANCE

	2019	2018
	\$	\$
Fees received relating to next year		
APC fees	381,787	356,721
Non-Practising fee	3,157	2,070
	384,944	358,791

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 & 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 2019

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 30 September 2019 are: property \$10,803; corporate services \$25,076; total \$35,879 per year.

Corporate services	2019 \$	2018 \$
Due in 1 year	25,076	25,054
Due between 1-2 years	9,962	25,054
Due between 2-5 years	0	9,953
	<u>35,038</u>	<u>60,061</u>

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

	2019 \$	2018 \$
Due in 1 year	10,803	9,707
Due between 1-2 years	4,292	9,707
Due between 2-5 years	0	3,856
	<u>15,095</u>	<u>23,270</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)

13. 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)

14. RECLASSIFICATION OF EXPENDITURE

Certain items have been reclassified so as to provide more useful information about the performance of the Council. It has not been practicable to restate all relevant comparative balances.



**PSYCHOTHERAPISTS BOARD OF AOTEAROA NEW ZEALAND
NOTES TO THE PERFORMANCE REPORT
FOR THE YEAR ENDED 30 SEPTEMBER 2019**

15. KEY MANAGEMENT PERSONNEL COMPENSATION

	2019	2018
Board Members Remuneration	\$	\$
Remuneration	74,944	87,098
Number of members	7	7
Fees paid to board members is lower than previous year due to a decrease in regulatory work for this period.		
Secretariat Remuneration	2019	2018
	\$	\$
Remuneration	146,676	138,797
Number of full time staff	1	0
Number of part time staff	1	2
Total Remuneration	221,620	225,895

