



ShrinkRAP

Newsletter of the New Zealand College of Clinical Psychologists
THE SPECIALIST ORGANISATION FOR CLINICAL PSYCHOLOGISTS

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"He korero Takurua"

A winter's tale. Such a story told during leisure time was assumed not to have any weight or authority.

College News

Patron

The Executive is delighted to have received a verbal acceptance to our invitation to Sir John Kirwan to be a patron of the College. We are planning a ceremony to announce this exciting development hopefully by the end of November, depending on Sir John's availability. It is also hoped that Sir John would be able to attend the conference next year and either give the opening address or a talk at the conference dinner or that we would be able to get something from him on video if he is unable to be there in person.

Conference

The 26th NZCCP national conference, ***Psychology Across the Lifespan***, will be in Auckland next year on Saturday 21 and Sunday 22 March, with a pre-conference workshop presented by Professor Joseph Ciarrochi on Friday 20 March and a post conference workshop presented by Linda Dimeff on Monday 23 March.

Pencil these dates into your diaries and watch this space for the conference flyer which will be winging its way to you shortly.

The 2014 conference which was jointly hosted by the Australian Clinical Psychologists Association (ACPA) at the Chateau on the Park in Christchurch, and was very successful with nearly 300 registrants over the 5 days of conference and pre- and post- conference workshops. Feedback has been overwhelmingly positive, particularly for

the pre-conference workshop on Compassion Focused Therapy with London clinical psychologist Chris Irons.

College Council

There have been some changes to the Executive. Hawkes Bay member Luke Rowe has been elected as Te Māngai Māori (Elect). He will be replacing Clive Banks who plans to step down early next year after nearly 10 years in the role. Clive's contribution to the NZCCP Executive and Council has been invaluable. The title of 'Honorary Secretary' has been changed to 'Vice-President' as this more aptly describes the role.

The College Council congratulates NZCCP Kaumatua Kuni Shepherd on his recent appointment as Māori Cultural Advisor to the Psychologists Board.

Publications update

The theme for the next Journal NZCCP is mothering/fathering/parenting and we would be interested in any parenting/family topics including any writing about 'the psychologist as a parent'. The copy deadline for this issue, which will be published in December, is 15 October.

Next year's themes are:

Bodies, published May 2015, deadline 15 April

Care of Older People, published November 2015, deadline 15 October 2015

If you have (or know of someone else who has) an interest in any of the above themes and could write an article, or do a literature

search, or if you could review a conference or workshop you've attended, or a book or article you've read, or if you are aware of some good online assessment measures or apps, please contact Caroline at office@nzccp.co.nz.

If there is a book you want to read and are interested in reviewing it, Journal book review editor, Dr. Charlene Rapsey (charlrapsey@gmail.com), may be able to get you a free review copy.

Please don't forget that we are always keen to receive and publish letters to the editor, and encourage all students to submit articles, case studies, book reviews, commentaries on a set of abstracts, reviews of conferences or workshops and students whose submissions are published are paid \$100.

Thanks to a wonderful suggestion from NZCCP Fellow, Malcolm Stewart, a new online library for relevant journal articles is currently being developed for the College website. Initially a number of articles published in the Journal NZCCP over the years will be posted to the library, with permission from the authors of course. But it is hoped that in the future articles will be submitted from a wider population.

Research

It is likely that most of you who are conducting research would be attached to a university or some such organisation. However in the event that this is not the case you may want to access NZ Ethics Committee at http://www.nzethics.com/nzccp_membership/

They review independent research, so may be of use to psychologists etc. who are not attached to any kind of research institution, but wanting to carry out research for publication or anything else.

Student allowance update

Radio NZ's Nine to Noon programme invited Deb Moore and Peter Coleman onto their 30 April show to talk about the ongoing impact of the unavailability of the allowance. At the end of the segment Kathryn Ryan managed to extricate an undertaking from Mr Joyce that the situation would be reviewed within the next couple of years. The College have since received a letter from Mr Joyce focussed on the salaries psychologists can expect: \$61 - \$64K for graduates and "up to \$97k pa for those with 3-10 years'

experience", implying that as a well-paid profession, the student allowance changes were not a major issue. A much more useful response was received from the Hon Tariana Turia, which included some suggestions to ensure that all students have an easy point of contact at StudyLink and receive financial assistance while studying.

NZCCP Membership News

At the National Executive meetings since the ShrinkRAP Autumn 2014 edition was published, the following people have been approved and accepted as

Full Members of the College:

Roni Alder, Wellington
Hilary Bradley, Tauranga
Julia Chrisp, Auckland
Kimberley Falconer, Auckland
Petra Hoggarth, Christchurch
Vicki Mobley, Auckland
Florence Shodaravam, Waikato
Katrina Stanley, Christchurch
Charles Swart, Wellington
Annie Talbot, Wellington
Marie Townsend, Hamilton
Sarah Watson, Auckland
Kristy-Lee Wilson, Wellington

As a Full Member, each may now use the acronym MNZCCP.

The following people have been approved as **Associate Members** of the College:

Katie Douglas, Canterbury
Beatrix Gardiner, Palmerston North
Louise Jenkins, Canterbury
Denise Kirby, Hawkes Bay
Jessica Mitchell
Pene Muir, Otago
Sam O'Sullivan, Wellington
Jennifer Pevreal, Waikato
Charis Scott, Christchurch

The National Executive wishes to congratulate these people on attaining their new membership status.

Membership renewals

For those of you who haven't done so yet this is just a wee reminder that your NZCCP/MPS membership renewals are DUE NOW. You can renew your membership at the [online NZCCP/MPS subscription renewal page](#).

To remind you of the benefits of membership with NZCCP

The full range of excellent benefits available to College members can be [downloaded via this link](#). A few of these resources which members find particularly useful are as follows:

Access to excellent Indemnity Insurance

Members of the College are eligible for membership of the Medical Protection Society, which provides inexpensive professional indemnity including access to legal advice and representation in the event of a hearing. Even working for organisations such as District Health Boards does not mean that you are protected in the event of malpractice complaints. MPS provides enduring coverage for events that happened in the entire time you paid MPS fees. This means that you will be entitled to representation in the case of a retroactive complaint even if this arises many years after your retirement. Even more importantly, there is no upper limit on the financial assistance available and there is no excess to be borne by you. Student members of the NZCCP are entitled to be covered by the MPS scheme at no cost.

Access to free confidential counselling service.

The Medical Protection Society also facilitates a free EAP style counselling service for members who may be having difficulties or issues in their personal or professional lives, that can't be addressed during supervision sessions.

Access to free online psychology database.

The EBSCO Publishing online Psychology Research Database is now available free to all College members. This provides unlimited remote access to their Core Psychology Research Package containing Psychology & Behavioral Sciences Collection, MEDLINE with Full Text, and Mental Measurements Yearbooks with Tests in Print.

Active support for students. During the period of clinical training, membership with NZCCP is free and you receive both publications. Prizes are awarded for student presentations at conference and some of the local branches support students from their area to attend the NZCCP Annual Conference. The College also has annual student awards. Students have access to College education events at reduced or no cost. The College provides a [mentoring program](#) for students and new clinicians, and

a [list of resources](#) that have been recommended by NZCCP members is available on the website. Students are encouraged to submit material to the Journal of the NZCCP. Students receive a \$100 grant for work that is published.

Reduced rate for new Associates. Associate members have a reduced fee for up to two years or until they achieve full membership status with NZCCP. More importantly, NZCCP student members who apply for Associate membership as soon as they have been registered in the clinical scope are given free membership until the end of the financial year (30 June) and then a 50% discount on the Associate membership fee for the next financial period.

NZCCP Ethics Committee Column

*Marijke Batenburg FNZCCP
Chair Ethics Committee*

The Ethics committee were asked whether a College member should notify the Child Youth and Family Service (CYFS) about a potentially problematic situation. A girl, aged under 5, lives part time in a household where her uncle (the client), who is in his 30s, also lives. The client has a recent history of sexual offending focused on boys aged under 12 years. He has received a diagnosis of Pervasive Developmental Disorder Not Otherwise Specified (PDD NOS, DSM-IV-TR). The sexual behaviours have escalated and include watching child pornography and a specific sexual interest in boys aged under 12, which has been acted on. The client has disengaged with the psychologist in spite of requests to him to remain engaged.

What follows is an opinion from the committee and is written to serve as a guide. It is not a formal legal opinion.

The Committee's response

There was general consensus that the clinical psychologist has no choice but to contact CYFS. We agreed there was enough information and cause for concern to believe that the client was a risk to his niece. Furthermore the recent changes to the Crimes Act also encourages practitioners to notify and that not notifying could be construed as a crime.

Here are the amendments:

195 Ill-treatment or neglect of child or vulnerable adult

- "(1) Everyone is liable to imprisonment for a term not exceeding 10 years who, being a person described in subsection (2), intentionally engages in conduct that, or omits to discharge or perform any legal duty the omission of which, is likely to cause suffering, injury, adverse effects to health, or any mental disorder or disability to a child or vulnerable adult (the victim) if the conduct engaged in, or the omission to perform the legal duty, is a major departure from the standard of care to be expected of a reasonable person. "(2) The persons are—
 - "(a) a person who has actual care or charge of the victim; or
 - "(b) a person who is a staff member of any hospital, institution, or residence where the victim resides.
- "(3) For the purposes of this section and section 195A, a child is a person under the age of 18 years.

"195A Failure to protect child or vulnerable adult

- "(1) Everyone is liable to imprisonment for a term not exceeding 10 years who, being a person described in subsection (2), has frequent contact with a child or vulnerable adult (the victim) and—
 - "(a) knows that the victim is at risk of death, grievous bodily harm, or sexual assault as the result of—
 - "(i) an unlawful act by another person; or
 - "(ii) an omission by another person to discharge or perform a legal duty if, in the circumstances, that omission is a major departure from the standard of care expected of a reasonable person to whom that legal duty applies; and
 - "(b) fails to take reasonable steps to protect the victim from that risk.
- "(2) The persons are—

- "(a) a member of the same household as the victim; or
 - "(b) a person who is a staff member of any hospital, institution, or residence where the victim resides.
- "(3) A person may not be charged with an offence under this section if he or she was under the age of 18 at the time of the act or omission. "(4) For the purposes of this section,—
 - "(a) a person is to be regarded as a member of a particular household, even if he or she does not live in that household, if that person is so closely connected with the household that it is reasonable, in the circumstances, to regard him or her as a member of the household:
 - "(b) where the victim lives in different households at different times, **the same household** refers to the household in which the victim was living at the time of the act or omission giving rise to the risk of death, grievous bodily harm, or sexual assault.
 - "(5) In determining whether a person is so closely connected with a particular household as to be regarded as a member of that household, regard must be had to the frequency and duration of visits to the household and whether the person has a familial relationship with the victim and any other matters that may be relevant in the circumstances."

The wording of the Crimes Amendment Act is difficult to clearly interpret regarding what constitutes close contact for non-residential workers. One member on the committee understood that the legislation was amended to ensure that future cases where family members who knew of abuse occurring within the home would be criminally liable, but as to how far this extends to psychologists being criminally liable is unclear at this point.

Even if the clinical psychologist's relationship with the client doesn't fall within the definition as outlined in the Crimes Act (i.e.

closely connected with the household), there is still a discretion to warn as per the Children's and Young Person's Act . Based on this Act, there is clearly a child at risk and therefore the clinical psychologist should be contacting CYFS accordingly. Further, it can be argued that to not warn could be regarded as an act of omission under Common Law in terms of not doing anything when the clinical psychologist is aware of the risk.

In addition, the actions of the man in question, and of his mother's refusal to engage in information exchange or activities that could lead her to feel confident that the risk is being effectively and appropriately managed, further elevates the need for a notification.

All members of the committee viewed the interests of the vulnerable child as paramount. Under the Crimes Amendment Act 2011 (especially 195A), the Children's and Young Person's Act, 1989 (clauses 67 and 68), and Principal 1.5 in the Code concerning vulnerable children and young persons, it seems that the clinical psychologist must make a report to CYFS because, based on the information at hand, the child is probably at risk of harm.

From the Editor

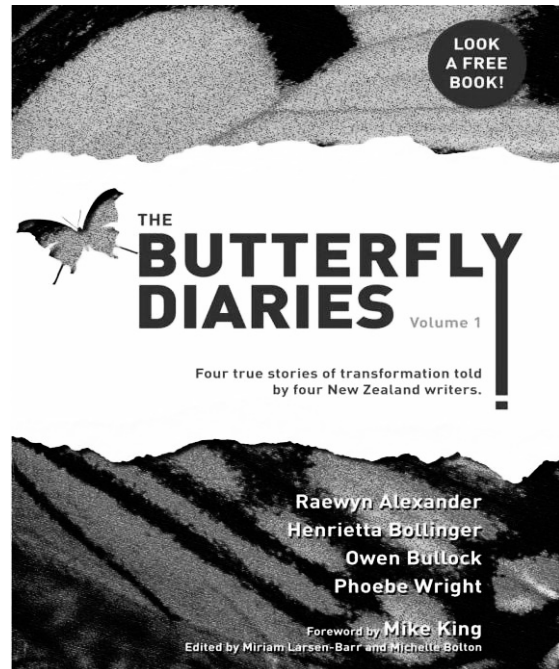
Readers are encouraged to send information about new and relevant applications and resources for inclusion in ShrinkRAP. What follows are two such resources.

Raising Awareness with about OCD

The following is a link to a useful guide offering some good advice and information to members of the public about Obsessive Compulsive Disorder.

<http://www.psychguides.com/guides/obsessive-compulsive-disorder-symptoms-causes-and-effects/>

Free Book of Recovery Stories for Kiwis Struggling with Suicidal Thoughts



"People experiencing suicidal urges, as well as their supporters, will feel less alone and find plenty of helpful advice to take away. Most importantly, this collection of stories...shows readers that they can both survive and thrive beyond these experiences." ~ K. Issell, Mental Health Foundation of NZ Book Blog Review.

The Butterfly Diaries shares four true recovery stories from people who have survived being suicidal and are now glad they are still alive. Short stories are supplemented by summaries of the strategies each person used and found helpful from their supporters. Anyone can order copies online by making a donation or request free copies by email. Those who donate fund free copies for community-members who do not use services or have limited financial resources. Books have been ordered by adolescents and adults for themselves and their loved ones, as well as to GP practices, schools, corrections services, mental-health services, pharmacies and libraries.

For further info visit:

www.engagenz.co.nz/?page_id=5287

Please note that this is an extracurricular activity of NZCCP student member, Miriam Larsen-Barr.

Summary of the Psychology Workforce Group (PWG) meeting, 26 May

The Psychology Workforce Group (PWG) met on Monday 26 May 2014. Those attending the meeting were

NZPsS: Peter Coleman, Kerry Gibson Pamela Hyde

NZCCP: Deb Moore, Caroline Greig

Universities: Marc Wilson (HODs), Richard Linscott (Programme Directors),

NSCBI: Ray Nairn

Ed Psych: Jeanette Berman

NZPB (Observers): Ann Connell, Anne Goodhead, Steve Osborne

The Werry Centre: Tania Wilson

Te Pou: Denise Kingi-Uluave

The following is a summary of the issues discussed.

Presentation by Robyn Shearer, CEO of Te Pou

The CEO of Te Pou, Robyn Shearer, met with PWG and described the role of Te Pou in workforce development.

Robyn noted that the role of Te Pou is to translate policy into practice, influence future policy and encourage and support evidence-based workforce development.

Te Pou has contracts with the MOH and HWNZ. Their work covers a range of areas including addiction services, nursing, leadership, allied health, CBT, disability, mental health. Te Pou's work includes focusing on workforce needs, outcomes, information and tools, training grants, modules and resources e.g. a resource in working with Māori. Te Pou works with multiple stakeholders and is part of international networks.

Supporting service delivery

Te Pou works with the MOH and HWNZ to look at the demographics which will impact on future service need and on issues such as where to make an investment. DHBs and NGOs are encouraged to look beyond FTEs to the right skill mix for future workforce needs. The aim is to have people seen earlier, have access to exit services and to have DHBs and NGOs and primary and secondary care work together.

Workforce education and training

Te Pou works to

- assist leaders and supervisors to ensure that the environment and

culture fits well with new graduates and trainees

- assist DHBs to look at systems to support new practice

Rising to the challenge 2012-2017

Te Pou is working in partnerships and collaboration across the sector to assist the integration of primary and secondary care through stepped care, improved access, earlier intervention and shorter waiting times.

Disability Workforce

Te Pou also works to increase the skills of the registered and non-registered disability workforce.

It was noted that it was important to recognise psychologists' unique skills and fully use these "top of scope" skills so that the right skills are used for the right job.

It was noted also that it would be useful for Te Pou to have conversations with universities/training programmes regarding psychology curricula relating to future workforce needs and workplace readiness. It was also suggested that it is important to have an evaluation of the impact of training non-psychologists in CBT. It was noted that some psychologists would benefit from advanced training in CBT and it was noted that some overseas psychologists may not have CBT skills. It was also noted that the MOE is responsible for ORS-verified children and although children in special needs schools don't have access to MOE psychologists, Te Pou's focus is on MOH providers.

Robyn closed by welcoming follow-up conversations on the issues raised.

Student Allowances

It was noted that a number of actions re student allowances had occurred e.g. radio and TV interviews. The issue of student allowances is being constructed by government as a private good and the issue of the public good e.g. access to psychologists is being ignored. Steven Joyce has indicated that he will take another look at the issue in the future and Tariana Turia (Māori Party) has not only noted the relative disadvantage of Māori but also had some useful ideas re the use of study link etc. It was agreed to continue a watching brief on this issue.

Internships

It was noted that there are still many issues with psychology internships to be addressed

and PWG will gather information for a national picture of psychology internships across all areas of psychology. This will lead to a draft position statement to be circulated to others for comment.

Māori and Pacific Workforce Issues

A number of issues were noted

- There is concern about the lack of Pasifika students enrolling in psychology programmes, particularly in the clinical psychology programmes. This may be a result of cuts to student allowances and the extra year of study required.
- The question of whether psychology is an attractive option for Pasifika people was raised. World views and perspectives can make people feel unsafe – e.g. around training in practices re engagement. This is being fed back to programmes. It is good that evidence-based Pasifika perspectives are being developed and this will resonate with students.
- It is concerning that a number of Pasifika students drop out between first and second years- there is a need to look at papers to support students to continue e.g. statistics support
- Can we do something centrally re programmes to support students? Is there specific Pasifika content at first year level?
- There is a huge need for psychologists re Pasifika mental health needs- especially youth suicide
- The model of Māori labs at universities would be useful for Pasifika students also
- Le Va offers scholarships to Pasifika students
- Medical schools put effort into encouraging and supporting Māori and Pasifika students. This has included a sense of whanau amongst students that fed into tutorial assistance.
- Some programmes are becoming more aware of the need to pay attention to Pasifika as well as Māori student needs.

Discussion of issues impacting on psychology

A number of issues were discussed. These included being aware of the changes to the profession in the UK and being more active in

promoting the skills of psychologists e.g. leadership skills, evaluating outcomes etc. The tendency for the profession to be fragmented because of its diversity was noted as was the importance of collegiality with psychology being stronger if people work together. An article in the latest NZPsS *Psychology Aotearoa* identifies some of the issues facing NZ clinical and health psychologists and it was noted that Michelle Levy's submission to the Board in 2005 also raised some important professional issues. Other issues noted were changes in primary care, moves to generic roles, the cost of psychologists being seen as a driver towards employing less expensive professions. Psychologists need to be promoted as an excellent investment.

Purpose of the group

There was a discussion of the need to clarify the purpose of PWG and to look at what actions need to take place on the issues raised. There is also the need for members of PWG to have a good understanding of what happens in university programmes.

There was a discussion of the need to look at roles for which psychologists need to be trained e.g. scientists/consultants and to look at the variability of conditions associated with interns. PWG functioned by breaking down the silos of the different areas of psychology, hearing different perspectives and setting clear goals around the areas impacting on psychology.

Summary of the Psychology Profession Advisory Forum (PPAF) meeting, 26 May

Representatives of the New Zealand Psychologists Board, the New Zealand College of Clinical Psychologists, the New Zealand Psychological Society, the university HoDs, and training Programme Leaders attended this half-day meeting in Wellington.

Key issues discussed

Colocation of Regulatory Authorities –

Steve Osborne noted that there are now three other RAs (Dietitians Board, Chiropractic Board, and Optometrists and Dispensing Opticians Board) sharing the 9th floor with the Psychologists Board. The Midwifery Council will also move in later this year. The 5 RAs will be actively pursuing opportunities for collaboration to reduce costs and/or cross-pollinate. The Nursing Council will also be involved, but will not be colocating.

Best Practice Guidelines – Steve noted that in February the Board approved some minor modifications to its “Keeping Records of Psychological Services” guidelines.

Counselling Psychologist Core Competencies – Anne Goodhead noted that there were no further submissions received on the proposed core competencies in the final round of consultation. The Board will therefore be considering a final version for adoption at their meeting later this week. The Board are also meeting with representatives from the NZPsS Institute of Counselling Psychology this week.

International Project on Competence in Psychology – Steve Osborne noted that good progress was made in Peachtree City (Atlanta, February 2014) on developing the first set of draft competencies. These will be the basis for the next round of consultations, including at major meetings in Paris and Durban in July 2014. The IPCP Working Group will also meet for a full day in Paris to progress the project in light of the input from the ICAP sessions and from Moana Waitoki (who has submitted a comprehensive set of proposed revisions focussing on the role of culture in the document).

Cultural Competence (Updates re each organisation’s cultural competence activities)
NZPsS NSCBI – Ray Nairn advised that the NSCBI are reviewing old reports and documents for relevance to the Board’s prescribed cultural competencies. For instance, Moe Milne’s (2005) report asks how wairua is addressed in the competencies: does it sit outside of the profession’s scientific foundations? In accreditation processes where cultural training is assessed, how are evaluators able to step outside the existing epistemology? It is clear that the profession doesn’t have answers to such questions at the moment. It was noted that it would be valuable to ensure these questions are raised as part of the Board’s current review of the accreditation Standards and Procedures.

Reports

HoDs and PLs

It was reported that:

It is a busy time of year for HoDs. The “180-point Masters” discussion still has life. PPAF will be apprised of any further developments.

A workshop on “Working with the Media” may be offered to psychologists.

The various programmes around the country are not very active in contributing to discussions.

To date no programme has noted any evidence that the cut to student allowances has resulted in a drop in applications.

There is some concern being expressed about the impact of the Board’s accreditation processes on the relationships between programmes. Some of this might be ameliorated by better training/orientation of Assessment Team members and HoDs. The current review of the Board’s *Standards and Procedures* is also an opportunity to explore and address these concerns including (for example) by making the standards more objective.

HB Professional Leaders

It was reported that:

There continue to be changes made to DHB leadership structures that have an adverse impact on Psychology Advisors. There has been a diluting of psychology-specific leadership in favour of increased “allied health” leadership.

There has been an overall increase in psychology positions over the past 5 years, and also a change in distribution.

DHBs are belt-tightening re support for training.

Psychologists Board

First Annual HRANZ Conference – It was noted that the Health Regulation Authorities of New Zealand (HRANZ) are holding their first annual conference later this week. The keynote speaker is Harry Cayton who is the CEO of the UK’s Professional Standards Authority. He will be talking about quality assurance for regulators and also the changes necessary in the wake of the Staffordshire Hospital scandal. Workshop topics include:

- Recertification (CCP) models
- Competence Reviews
- Workforce planning
- Honouring the Treaty of Waitangi
- Self-directed learning under a CCP
- Risk profiles for competence notifications (Midwives)
- Future directions for ensuring safe and competent practitioners

Representatives from all 16 RAs will be in attendance, along with guests from Health Workforce New Zealand, the Ministry of Health, and the Australian Health Practitioner Regulatory Agency (AHPRA).

Meeting with the Psychology Board of Australia – Professor Brin Grenyer (Chair) and Ms Alley Peck (Executive Officer) from the PsyBA will be attending part of the NZ Board's meeting later this week. Topics for discussion include updates on "hot topics" in each jurisdiction, future joint meetings, and the Asia Pacific Regional Convention on the Recognition of Qualifications in Higher Learning (2011). It is hoped that progress will also be made on plans for a larger joint meeting in 2015, which will involve representatives from around the Asia-Pacific region.

The timely creation of records of psychological services – Anne Goodhead mentioned that she had recently received a query about how soon after an event a psychologist should be expected to have documented it. The Board's guidelines are silent on the issue, and a check with other overseas jurisdictions found that only a few offered any specific guidance (usually in the form of generic wording like "as soon as practicable"). Further research is needed before the Board makes any change to the *Record Keeping* guideline.

Practitioners required to take on excessive caseloads – A supervisor recently expressed concern to the Board about the pressure being placed by an employer on a new practitioner to carry an excessively large caseload. Discussion suggests this is a widespread problem, and not unique to just one employer. A corollary is the pressure to close cases quickly. Client safety may be imperilled. Practitioners need to reference the Code of Ethics in such situations. Support may also be garnered from any union or via an organisation's health and safety policy.

HDC – The Board has asked to meet with Theo Baker (Deputy HDC) after it was noted that the HDC seems to be processing a number of complaints against psychologists each year without informing the Psychologists Board of those complaints. The Board will seek to have the Board's current MoU with the HDC modified to ensure that this does not continue.

ACC requesting return of documents – ACC are asking psychologists to return all ACC-sourced documents, which may conflict with the requirement for practitioners to retain client records for ten years. Discussion suggested mixed views on the appropriateness of this, as ultimately the

record still exists with ACC and the psychologist's records would include some reference to any important information therein.

Release of notes – A practitioner recently contacted the Board re concerns about an amendment to the Care of Children Act that can make a psychologist's notes available to the parties. There seems to be some procedural unfairness here, and a meeting with the Principal Family Court Judge may be needed.

CCP audit process – Anne Goodhead reported that about 480 audit notices were sent out, and that most audits had since been completed. About 105 practitioners have subsequently been referred for coaching, which is a higher proportion than in previous years. A major review of the Board's CCP is scheduled for later this year.

Future meetings

The next PPAF meeting will be held on 19 August 2014 (1-4pm).

ACC/NZCCP/NZPsS liaison meeting, 29 April

ACC update on changes – EOI results have been positive and we will be issuing the next stakeholder update early next week with details about opening the Request for Tender. The Request for Tender will include the Service Schedule (contract) and finalised Pricing Schedule. Please look out for the next stakeholder update.

ACC consent form – At the end of the document is the communication that has been sent to professional bodies and suppliers in relation to the ACC167 consent form.

Here are two key points:

- All client queries are to be referred to Freephone 0800 745 254, and
- Suppliers/Providers can contact their Supplier Manager at their local ACC branch if they have any queries about the ACC consent form.

ACC is currently employing an additional Branch Advisory Psychologists (BAP's) over the next month or so and, as soon as this process is complete, ACC will release the list of BAPs and their ACC contact details, hopefully early June 2014.

In regards to ACC contributing to the funding for classification system training that will be coordinated by the New Zealand

Psychological Society, Kris is currently waiting for her Manager to obtain approval and is hoping for a response within a couple of weeks

In relation to possible prescribing of medication, NZCCP and ACC are working together whether psychologists can be added to the AC Act 2001 as registered health professionals. This is being considered in the event of potential treatment injuries arising from medication prescription if and when clinical psychologists become medication prescribers for mental health conditions. Kris will continue to discuss these concerns with ACC's Policy Team and keep the College updated.

ACC would like to begin pursuing more purposefully ACC and DHB's improved shared care of clients with the DHBs and a strategy about how to approach this piece of work will be developed over the next 3 months within ACC Health Procurement teams.

All ACC staff has service delivery expectations that include:

- Staff must return all telephone calls within 24 hours or the equivalent of 1 working day
- Staff must reply to all written correspondence within 7 days
- Staff must reply to all emails within 48 hours (2 working days) of receiving them. This includes sending an interim acknowledgement if a formal written response is required. An interim response must include the timeframe in which the final response will be sent.

All reports for Sensitive Claims clients need to be emailed to sensitiveclaimsproviderreports@acc.co.nz not to the direct staff member as they are then uploaded into the case management system and tasked to the staff member. The staff member will then respond within the timeframes specified above.

If a provider finds that after a couple of attempts of contacting the staff member directly about your query and you still haven't received a reply please feel free to email sensitiveclaims@acc.co.nz or Kamini Pather, Branch Support Manager, Sensitive Claims Unit, ACC - kamini.pather@acc.co.nz

Additional Information from ACC re ACC167 Consent Form:

You may be aware of the recent media stories about ACC's use of the ACC167 consent form. These recent reports relate to

ACC's decision to withhold a claimant's entitlements for not signing the document.

We are reviewing our current processes and working on a new form which will replace the ACC167. There is currently a consultation process underway and a revised form will be ready shortly. In the meantime we will continue to use the ACC167.

If you have any concerns about using the consent form for your patients' information you may wish to contact the patient to confirm they are happy to release their details. If your patient has any concerns or wishes to withdraw their consent please refer them to the free number 0800 745254.

If you have any further questions please contact your Supplier Manager.

FAQs

Does this mean that ACC is still allowed to request claimant's clinical information?

Yes we can. We are still required to gain consent from our clients in order to obtain the necessary clinical records to help clients with their rehabilitation and treatment or to confirm other entitlements.

Is the ACC167 form illegal?

No the current ACC167 form is not illegal. The court's decision says it was wrong for ACC to stop paying entitlements to two clients who declined to sign this form.

What if a client wants to withdraw their consent?

Please refer them to ACC. We have set up an 0800 number (see above) and a team to manage the queries. We will establish the reason why they want their consent withdrawn, discuss the information ACC needs to collect and why this information is necessary in order to progress with the claim.

Is the ACC167 still a usable form?

Yes it is. We are working on a replacement consent form, which will be available shortly. The new form will be clearer and more user friendly. It will explain what authority the client is required to give under the act.

Are other consent forms that a client has signed still valid?

Yes. Many clients use forms such as ACC45, ACC38 etc to provide us with the authority to access and share information. Most clients are happy to sign these forms.

What if a client wishes to make a complaint about how ACC gathered consent.

Please refer them to the 0800 number and ACC will take it from there.

Observations of my favourite animal, and how it guides my clinical practice

Linda Gow

How do my Labradoodles' inform my clinical practice?

Shadow and Rebel have been dubbed "therapy dogs" in our home as they possess

many of the qualities one would hope for in a therapist.

They are good listeners who seem to maintain their composure regardless of your stress levels and do not try and give advice but just offer a comforting presence.

They maintain confidentiality, are completely trustworthy and non-judgmental. Your secrets are safe with them!

They greet you with genuine enthusiasm and give you a sense that you are special and important to them.

Last but not least they can be relied on to facilitate healing and not to do harm.

NZCCP

National Education Training Timetable

The NZ College of Clinical Psychologists aims to encourage and facilitate continuing education opportunities for members, by providing nationally coordinated events to a high standard. Our goal is to coordinate training opportunities between branches with the goal of facilitating training in all regions. Please consult the College website for further information and links (<http://www.nzccp.co.nz/events/>)

TRAINING TIMETABLE

NZCCP Events

LOCATION	MONTH	PRESENTER/ CONTENT
Auckland	12 September	Sarah Calvert/ Attachment across the lifespan
Wellington	17 October	Josh Myers/ DSM-5 workshop
Nelson	20 October	Josh Myers/DSM-5 workshop

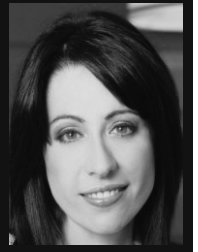
Other Events

LOCATION	MONTH	PRESENTER/ CONTENT
Nelson	1 September	Future Directions for Psychology in Aotearoa: A Time of Transition
Auckland	15 & 16 September	NZ-SIGN/ Multi-Cultural Perspectives on Neuropsychological Assessments
Wellington	17-18 October	Dr Jean Knox/ Relational Trauma, Shame and the Sense of Self
Main centres	31 October – 14 November	Mental Health Law Conference 2014
Wellington	11 November	EMDR Study Day
Rotorua	14-15 November	Alzheimers NZ Biennial Conference DEMENTIA: THE FUTURE IS NOW
Palmerston North	20-22 November	12th Psychosocial Oncology NZ Conference
Auckland	25-29 March 2015	The 40th Annual Scientific Meeting of the NZ Pain Society "Pain Through the Ages"

Leah is a Sydney based doctoral-level clinical psychologist with 18 years of clinical and teaching expertise in CBT and traumatology

2014-2015 Trauma Education

presented by
Dr Leah Giarratano



Two CPD activities for all mental health professionals: 14 CPD hours for each activity.

Clinical skills for treating posttraumatic stress disorder (Treating PTSD)

This two-day (9am-5pm) program presents a highly practical and interactive workshop (case-based) for treating traumatised clients; the content is applicable to both adult and adolescent populations. The techniques are cognitive behavioural, evidence-based, and will be immediately useful and effective for your clinical practice. The emphasis is upon imparting practical skills and up-to-date research in this area.

20-21 November, Melbourne CBD	21-22 May 2015, Melbourne CBD	18-19 June 2015, Adelaide CBD
27-28 November, Sydney CBD	28-29 May 2015, Sydney CBD	25-26 June 2015, Auckland CBD
7-8 May 2015, Brisbane CBD	11-12 June 2015, Perth CBD	

Clinical skills for treating complex trauma (Treating Complex Trauma)

This two-day (9am-5pm) program focuses upon treatment for adult survivors of child abuse and neglect. Participants must have completed the 'Treating PTSD' program. The workshop completes Leah's four-day basic training for professionals working with traumatised clients; the content is applicable to both adult and adolescent populations. The program incorporates practical techniques from ACT, CBT, DBT, EFT, Metacognitive Therapy and Schema Therapy.

23-24 October, Perth CBD	13-14 November, Adelaide CBD	16-17 July 2015, Melbourne CBD
30-31 October, Newcastle CBD	14-15 May 2015, Darwin CBD	23-24 July 2015, Sydney CBD
6-7 November, Brisbane CBD	4-5 June 2015, Cairns CBD	30-31 July 2015, Auckland CBD

Program Fee for each activity is in Australian Dollars (AUD)

Travel to Australia \$500 AUD (when you fax this form to pay for an Australian workshop with a Visa or Master card)

Auckland Super Early Bird \$550 AUD if you register at our website by 31/12/14

Auckland Early Bird \$600 AUD if you register at our website by 18/3/15

Auckland Early Bird \$600 AUD if you register at our website after 18/3/15

Program fee includes program materials, lunches, morning and afternoon teas on both workshop days

Direct your enquiries to Joshua George on (00612) 9823 3374 (phone/fax/voice) Email: mail@talinminbooks.com

For more details about these offerings and books by Leah Giarratano refer to www.talinminbooks.com

2014-2015 Trauma Education Registration Form

Please circle the workshop/s you wish to attend above and return a copy of this completed page

Name:	
Address:	
Phone:	Email (*essential*):
Mobile:	Special dietary requirements:
Method of payment (circle one)	Visa MasterCard
Name of cardholder: (if using a credit card)	Expiry Date:
Card Number:	Card Verification Number:
Signature of card holder: (if using a credit card)	Debit amount in Australian Dollars: \$

Cheques are to be made out to Talomin Books Pty Ltd and mailed to PO Box 877, Mascot NSW 1460 Australia

If payment is made with a credit card (or if you are reserving a place), simply complete the information above and fax this page to (00612) 9823 3374.

A receipt will be emailed to you upon processing. Note: Attendee withdrawals and transfers attract a processing fee of \$55 AUD.

No withdrawals are permitted in the seven days prior to the workshop; however positions are transferable to anyone you nominate.