

College of Psychologists of British Columbia

Annual Report

2008

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BOARD, STAFF, COMMITTEE MEMBERS, SUPERVISORS, ORAL EXAMINERS AND NEW REGISTRANTS FOR THE 2008 YEAR

BOARD

Michael Joschko, Ph.D., R.Psych., Chair of the Board, Finance Committee Lee Cohene, Ph.D., R.Psych., Chair, Quality Assurance Committee Rebecca England, Ph.D., R.Psych., Chair, Inquiry Committee, Patient Relations and Finance Committees Michael Elterman, MBA, Ph.D., R.Psych. Chair, Registration Committee, Patient Relations Committee Daniel Fontaine, Public Member, Chair, Patient Relations Committee, Discipline Committee Marguerite Ford, Public Member, Vice Chair of the Board, Inquiry Committee Wayne Morson, Public Member, Chair, Discipline Committee, Registration and Finance Committees Derek Swain, Ed.D., R.Psych., Chair, Finance Committee Valerie Whiffen, Ph.D., R. Psych., Quality Assurance Committee

STAFF MEMBERS

Andrea Kowaz, Ph.D., R.Psych., Registrar Colleen Wilkie, Ph.D., R.Psych., Deputy Registrar (to November 2008) Amy S. Janeck, Ph.D., R.Psych. (from September 2008) Susan Turnbull, Ph.D. R.Psych, Deputy Registrar Maureen Olley, Ph.D., R.Psych. Deputy Registrar (to August 2008) Gina Rowan, Inquiry Coordinator, Special Projects Manager Wendy Harris, Registration Coordinator Alyson E. Budd, Administrative Assistant Avigail Cohen, Office Assistant

DISCIPLINE COMMITTEE

Wayne Morson, Public Member, Chair Bruce Clark, Public Member Michael Fellman, Public Member (from May 2008) Henry Hightower, Public Member Lynn Superstein-Raber, Ph.D., R.Psych

Lynn Alden, Ph.D., R.Psych. (to July, 2008) Robert Colby, M.A., R.Psych., (July -Dec. 2008) Daniel Fontaine, Public Member Donna Paproski, Ph.D., R.Psych Cheryl Washburn, Ph.D., R.Psych.

INQUIRY COMMITTEE

Rebecca England, Ph.D., R.Psych., Chair Marguerite Ford, Public Member Lindsay Jack, Ph.D., R.Psych. (from Sept 2008) Marlene Moretti, Ph.D., R.Psych. Alexis Thuillier, Public Member Joseph Zaide, Ph.D., R.Psych. (to July 2008)

Kirk Beck, Ph.D., R.Psych. Jill Hightower, Public Member (to March 2008) Russell King, Psy.D., R.Psych. Judy Thau, Public Member (from Nov 2008) Hendre Viljoen, Ph.D., R.Psych.

QUALITY ASSURANCE COMMITTEE

Lee Cohene, Ph.D., R.Psych., Chair Chris Gibbins, Ph.D., R.Psych. Sandy James, Public Member (from Feb 2008) Michal Regev, Ph.D., R.Psych.

Dr. Valerie Whiffen, Ph.D., R.Psych

Santa Aloi, Public Member Julia Hass, Public Member Kathy Montgomery, Ph.D., R.Psych. Runa Steenhuis, Ph.D., R.Psych. (from Feb 2008)

REGISTRATION COMMITTEE

Michael Elterman, MBA, Ph.D., R.Psych., Chair Michael Fellman, Public Member Henry Hightower, Public Member Robert Ley, Ph.D., R.Psych. Donna Paproski, Ph.D., R.Psych.

Catherine Costigan, Ph.D., R.Psych. Sandy Gardner, Ph.D., R.Psych. Amy Janeck, Ph.D., R.Psych.(to July 2008) Wayne Morson, Public Member

PATIENT RELATIONS COMMITTEE

Daniel Fontaine, Public Member, Chair Rebecca England, Ph.D., R.Psych.

Michael Elterman, Ph.D., R.Psych.

FINANCE COMMITTEE

Derek Swain, Ed.D., R.Psych., Chair Rebecca England, Ph.D., R.Psych. Wayne Morson, Public Member Michael Elterman, Ph.D., R.Psych Michael Joschko, Ph.D., R.Psych.

SUPERVISORS

Lynn Alden, Ph.D., R.Psych. Eva Allan, M.Ed., R.Psych. Elizabeth Bannerman, Ph.D., R.Psych. Michael Boissevain, Ph.D., R.Psych. Robert Carey, Ph.D., R.Psych. Sarah Cockell, Ph.D., R.Psych. Kenneth Craig, Ph.D., R.Psych. Patricia (Trish) Crawford, Ph.D., R.Psych. Anthony Dugbartey, Ph.D., R.Psych. Maureen Godfrey, Ph.D., R.Psych. Joy Green, M.A., R.Psych. Simon Hearn, Ph.D., R.Psych. Krystyna Kinowski, Ph.D., R.Psych. William Koch, Ph.D., R.Psych. Leora Kuttner, Ph.D., R.Psych. Barbara Madani, M.A.Sc., R.Psych. Laurel Lee Mayo, Ph.D., R.Psych. Deborah McTaggart, Ph.D., R.Psych. Laura Mills, Ph.D., R.Psych. Tavi Nicholson, Ph.D., R.Psych. Lyne M. Piché, Ph.D., R.Psych. Donald Read, Ph.D., R.Psych. Michal Regev, Ph.D., R.Psych. Ronald Samuda, Ph.D., R.Psvch. Noa Schwartz, Ph.D., R.Psych. Kathy Simas, Ph.D., R.Psych. Sujatha Srikameswaran, Ph.D., R.Psych. Rhona Steinberg, Ph.D., R.Psych. Lynn Superstein-Raber, Ph.D., R.Psych. Allan Thornton, Ph.D., R.Psvch. Michelle Worth, Ph.D., R.Psych.

Victoria Alfonso, Ph.D., R.Psych. Nicole Aubé, Psy.D., R.Psych. Susan Baum, Ph.D., R.Psych. Cheryl Lynn Bradley, Ph.D., R.Psych. John Carter, Ed.D., R.Psych. Catherine Costigan, Ph.D., R.Psvch. Joanne Crandall, Ph.D., R.Psych. Susan Cross, Ph.D., R.Psych. Marion Ehrenberg, Ph.D., R.Psych. Lynda Grant, Ph.D., R.Psych. Lee Grimmer, Ph.D., R.Psych. Lindsey Jack, Ph.D., R.Psych. Rita Knodel, Ph.D., R.Psych. Mary Korpach, Ph.D., R.Psych. Stephen Lustig, Ph.D. R.Psych. Todd Mason, Ph.D., R.Psych. Jennifer McIvor, Psy.D., R.Psych. Alison Miller, Ph.D., R.Psych. Bruce Monkhouse, Ph.D., R.Psych. Martin Phillips-Hing, Ph.D., R.Psych Ann Pirolli, Ph.D., R.Psych. Anneliese Robens, Ed.D., R.Psych James Roche, Ph.D., R.Psych. Susanne Schibler, Ph.D., R.Psych. Martin Shoemaker, Ph.D., R.Psych John Spencer, Ph.D., R.Psych. Harilaos Stefanakis, Ph.D., R.Psych. Paul Sungaila, Ph.D., R.Psych. Karen Tallman, Ph.D., R.Psych. Rene Weideman, Ph.D., R.Psych.

ORAL EXAMINERS

Victoria Alfonso, Ph.D., R.Psych. Randall Atkinson, Ph.D., R.Psych. Mark Bailey, Ph.D., R.Psych. Barbara Beach, Ph.D., R.Psych. Carole Bishop, Ph.D., R.Psych. Michael Boissevain, Ph.D., R.Psych. Geoffrey Carr, Ph.D., R.Psych. Robert Colby, M.A., R.Psych. Constance Coniglio, Ed.D., R.Psych. Kenneth Craig, Ph.D., R.Psych. Patricia (Trish) Crawford, Ph.D., R.Psych. David Eveleigh, Ph.D., R.Psych. Mervyn Gilbert, Ph.D., R.Psych. Brian Grady, Ph.D., R.Psych. Susan Hackett, Ph.D., R.Psych. Simon Hearn, Ph.D., R.Psych Grace Hopp, Ph.D., R.Psych Charlotte Johnston, Ph.D., R.Psych. Margaret Kendrick, Ph.D., R.Psych. Brenda Knight, M.A., R.Psych. Brenda Kosaka, Ph.D., R.Psych. Ulrich Lanius, Ph.D., R.Psych. Phillipa Lewington, Ph.D., R.Psych. Anne MacGregor, Ed.D., R.Psych. Jane McEwan, Ph.D., R.Psych. Gregory Meloche, Ph.D., R.Psych. Laura Mills, Ph.D., R.Psych. Jennifer Newman, Ph.D., R.Psych. Martin Phillips-Hing, Ph.D., R.Psych. Donald Ramer, Ph.D., R.Psych. Erica Reznick, Ph.D., R.Psych. Anneliese Robens, Ed.D., R.Psych. Barbara Rosen, Ph.D., R.Psych. Ronald Samuda, Ph.D., R.Psych. Myron Grant Schimpf, Ph.D., R.Psych. Heather Scott, Ph.D., R.Psych. Ruth Sigal, M.Ed., R.Psych. Cecelia Louise Smith, M.Sc., R.Psych. Ingrid Söchting, Ph.D., R.Psych. Runa Steenhuis, Ph.D., R.Psych. Rhona Steinberg, Ph.D., R.Psych. Paul Sungaila, Ph.D., R.Psych. Paul Swingle, Ph.D., R.Psych. Joyce Ternes, Ph.D., R.Psych. John Wagner, Ph.D., R.Psych. Rene Weideman, Ph.D., R.Psych. Maureen Whittal, Ph.D., R.Psych. Marshall Wilensky, Ph.D., R.Psych. Sheila Woody, Ph.D., R.Psych.

Verna-Jean Amell, Ph.D., R.Psych. Nicole Aubé, Psy.D., R.Psych. Susan Baum, Ph.D., R.Psych. Deborah Bell, Ph.D., R.Psych. Susan Blake, Ph.D., R.Psych. Robert Carey, Ph.D., R.Psych. John Carter, Ed.D., R.Psych. Michael Coles, Ph.D., R.Psych. Evelyn Corker, M.A., R.Psych. Joanne Crandall, Ph.D., R.Psych. Susan Cross, Ph.D., R.Psych. Jean Laura Ferri, Ph.D. R.Psych. Maureen Godfrey, Ph.D., R.Psych. Joy Green, M.A., R.Psych. Jordan Hanley, Ph.D., R.Psych. John Higenbottam, Ph.D., R.Psych. Elizabeth Huntsman, Ph.D., R.Psych. David Katz, Ph.D., R.Psych. Krystyna Kinowski, Ph.D., R.Psych. Lorne Korman, Ph.D., R.Psych. Randall Kropp, Ph.D., R.Psych. Ronald Laye, Ph.D., R.Psych. Wolfgang Linden, Ph.D., R.Psych. Barbara Madani, M.A.Sc., R.Psych. Deborah McTaggart, Ph.D., R.Psych. Nancy Meyer, Ph.D., R.Psych. Bruce Monkhouse, Ph.D., R.Psych. Philip Perry, Ph.D., R.Psych. Lyne Piché, Ph.D., R.Psych. Jennifer Reiss, Ph.D., R.Psych. Michal Regev, Ph.D., R.Psych. James Roche, Ph.D., R.Psych. Deborah Samsom, Ph.D., R.Psych. Susanne Schibler, Ph.D., R.Psych. Noa Schwartz, Ph.D., R.Psych. Whitney Sedgwick, Ph.D., R.Psych. Kathleen Simas, Ph.D., R.Psych. Meagan Smith, Ph.D., R.Psych. Sujatha Srikameswaran, Ph.D., R.Psych. Harilaos Stefanakis, Ph.D., R.Psych. Janet Strayer, Ph.D., R.Psych. Lynn Superstein-Raber, Ph.D., R.Psych. Karen Tallman, Ph.D., R.Psych. Inna Vlassev, Ph.D., R.Psych. Larry Waterman, Ph.D., R.Psych. Malcolm Weinstein, Ph.D., R.Psych. Ursula Wild, Ph.D., R.Psych. Rosemary Wilkinson, Ph.D., R.Psych. Arianna Yakirov, Ph.D., R.Psych.

NEW REGISTRANTS - 2008

Beauchemin, Kathleen Mary Bhalla, Rishi Kant Broad, James Charles Butterfield, Lee Denise De Kryger, Nechia Anne Deprey, Lesley Joyce Eadie, Susan Jane Gambouras, Adam Frizzell Haverkamp, Beth Elaine Horne, Kathryn Anne Jeyakumar, Sharon Leela Elizabeth Klages, Jennifer Dawn Lautzenhiser, Aaron Lymburner, Jocelyn Alexandra Mandrusiak, Michael Nicholas McGee, Brandy Jennifer Morosan, David Eugene Nigro, Tracey Lynn Bilan Orzeck, Tricia Leigh Rae-Powell, Sharon Elaine Rowat, Wanda Lee Shewchuk, Daria Olha Stanford, Elizabeth Ann Tessier, Joanne Roberta Wiebe, Vaneesa Joy

Beresford, Helen Mary Boyes, Debby Alison Bryceland, Christy Cox, Darcy Shannon delaSalle, Margaret May Diskin, Katherine Mary Ferguson, Robin M Hamilton, William Greg Helmer, D'Arcy John James, Joan Susan Kaderly, Erin Colleen Lau, Mark Anthony Lindberg, Tracy L. MacNeil, Conrad Francis McEachran, Andrea Karen Miners, Richard Lawrence Newlove, Theresa Anne Ohm, Phyllis Deutsch Price, Kelly John Roch, Ursula Roy, Robert Joseph Edmund Simpson, Anna Tamar Taneja, Chand Whitehead, Paul Richard Woodin, Erica Margaret

REPORT FROM THE CHAIR

It was my pleasure to serve as Chair of the Board for the 2008 year and I am pleased to provide a report on College activities for January through December, 2008.

Information Meetings The Board held information meetings in Victoria on October 21, 2008, Nanaimo on November 17, 2008, and Vancouver on November 20, 2008 in addition to meetings held by registrant request at Children's Hospital (January 16, 2008), Vancouver General Hospital (February 23), and UBC (November 16, 2008). Given the importance for registrants to be informed and to participate in discussions regarding the regulation of the profession in British Columbia, the Board continues to remind registrants that it is willing to provide "individualized" information sessions to groups of registrants in particular work or geographic locations.

Annual General Meeting The Annual General Meeting was held in Vancouver on May 22, 2008. Video links were provided to Victoria, Kelowna, and Prince George.

Board Elections A Call for Nominations was distributed to registrants in the fall of 2008, to fill three elected positions on the Board. Nominations were received for three individuals. Acclaimed for three year terms were Russell King, and Leora Kuttner, with terms to commence January 1, 2009. John Carter was acclaimed for a two year term commencing January 1, 2009.

Annual Evaluation of Registrar The objectives which provide the criteria for the annual evaluation of the Registrar are embodied in the College's Strategic Plan available on the College website. The annual evaluation involves discussion about achievement of the objectives and the Board's provision of sufficient resources and support for their achievement. The Board was again extremely pleased with the achievements of the Registrar and her staff with regard to these objectives, as well as the efficient and effective coordination between staff and the Board and College Committees in the highly collaborative efforts to meet these objectives.

Reviews of Inquiry Committee Decisions A total of 10 reviews of Inquiry Committee decisions on complaints were heard by the Board in 2008. These reviews were requested by complainants under the *Health Professions Act*. The Board upheld the decision of the Inquiry Committee in each instance, based on a careful review of the process followed by the Committee and the documents before the Inquiry Committee when making its decision.

College Workshops A number of different continuing education opportunities were offered by the College in 2008. College counsel Lisa Fong presented a workshop on "Release of Records: Legal Issues for Psychology" immediately after the Annual General Meeting on May 22, 2008. Dr. Susan Jacobs presented a one-day workshop jointly sponsored by the College and the BC Association of School Psychologists (BCASP) on May 30, 2008 on "Ethical Issues in School Psychology," and this was followed the same day by "A Legal Issues Primer" provided by Lisa Fong. Finally, Dr. Tom McGee again presented a series of workshops on professional wills, including in Nanaimo on May 11, Castlegar on May 12, in Vancouver on May 14 and 15, and in Prince George on May 16, 2008. All of these workshops were well-attended.

Strategic Planning A copy of the Strategic Plan is available on the new College website. The Board reviews the Strategic Plan on an ongoing basis.

Participation with ASPPB The College remained an active member of the Association of State and Provincial Psychology Boards (ASPPB), and participated in ASPPB meetings in April in Vancouver, and in October in Nashville. At the meeting in Nashville, the Registrar and College counsel gave a presentation on *Regulatory Supervision*.

School Psychology The College was delighted with the jointly sponsored workshop on ethics in the school setting and looks forward to further collaborative efforts with the British Columbia Association of School Psychologists.

Legal Consultation The College's use of legal services is divided into several main categories: A. Routine legal consultations for Inquiry and Registration Committees, B. General legal counsel (Board legal consultation, legal matters such as lawsuits against the College); C. Legal consultation on Freedom of Information requests; and D. Special legal consultation on discipline matters including preparation for, and the conducting of, extraordinary hearings of the Inquiry Committee, Discipline Committee hearings, and legal consultation for hearing panels. These various types of consultation are obtained through the services of a number of different individuals, as needed.

Code of Conduct and Practice Advisories During 2008 work continued on the revision of the *Code of Conduct* which was first enacted in February 2002. The revision work focused on: 1. Increasing clarity and consistency of language; 2. Reviewing the scope of the Code to ensure inclusion of evolving issues; 3. Integration of those aspects of Practice Advisories that rise to the level of Code standards in setting the conduct expected of registrants; and 4. Reviewing registrant comments and feedback since introduction of the current Code. Registrants were sent copies of the proposed revised Code and Advisories in August of 2008 and asked for their feedback. The feedback received was reviewed, and final revisions of the Code were prepared and the new 2009 Code of Conduct took effect on January 1, 2009. Work on Practice Advisories remains ongoing.

Legislative Changes The Board devoted considerable attention to changes that were proposed and enacted to the legislation that governs the College, the *Health Professions Act*. Communication with registrants and the various College committees was a focus of the Board to ensure that registrants were aware of the scope and nature of these changes.

In closing, it was a pleasure and privilege to serve as the Chair of the Board for 2008, and I am very pleased to welcome my successor, Rebecca England, who has assumed the Chair position as of January 1, 2009.

Respectfully submitted, Michael Joschko, Ph.D., R.Psych., Chair of the Board 2008

DISCIPLINE COMMITTEE REPORT

There were no hearings of the Discipline Committee in 2008. An outstanding matter from 2007 remained in adjournment through part of 2008, but was resolved without requiring a reconvening of the Discipline panel. Another matter was referred to the Discipline Committee in 2008, but has not yet been heard.

Respectfully submitted, Wayne Morson, Chair, Discipline Committee 2008

PATIENT RELATIONS COMMITTEE REPORT

As per the *Health Professions Act*, the objectives of this Committee include: recommending to the Board specific procedures for handling complaints of professional misconduct of a sexual nature; informing the public about the process of bringing their concerns to the College; monitoring and periodically evaluating the operation of procedures established; developing and coordinating educational programs dealing with professional misconduct of a sexual nature for registrants and the public as required; establishing a patient relations program to prevent professional misconduct of a sexual nature; and recommending to the Board standards and guidelines for the conduct of registrants and their patients.

Respectfully submitted,
Daniel Fontaine, Chair, Patient Relations Committee 2008

INQUIRY COMMITTEE REPORT

The Inquiry Committee (IC) dealt with a total of 75 complaints that were open for at least some part of 2008 and were at various stages of investigation at any given point in time during the year. As of December 31, 2008, 49 of these cases had been closed, and the remaining 26 files remained open and actively before the IC. Fourteen of these 26 files had only recently been received and were under preliminary review, 9 were at various stages of investigation, 2 had involved the issuance of citations in 2007 and remained in that process through 2008, and 1 involved alleged conduct of sufficient concern that the IC moved to take the matter to an extraordinary hearing. Files closed during 2008 are summarized in Table 1 below along with the nature of the decisions of the Inquiry Committee in closing the complaint files. Please review the Registrar's report for a comprehensive description and breakdown of 2008 complaint investigations and resolutions. In addition, as of November 1, 2008, some types of resolutions are now published on the College website, in accordance with new publication requirements under the revised *Health Professions Act*.

Table 1: Files Closed during 2008 (N=49)

Closing Reason	Number	% *
Letter of Undertaking or Consent Agreement	28	57.1
Resolved	1	2.0
Insufficient Evidence	12	24.5
Decision Not to Proceed (opened in error, no jurisdiction, withdrawn, vexatious or frivolous)	7	14.3
Referred to Discipline Committee	0	_
Referred to Registration Committee	1	2.0
Total	49	100

^{*} Percentages in this and subsequent tables may contain rounding errors.

Much of the focus of the Committee centred on changes made to the *Health Professions Act* and ensuring development of policies and procedures responsive to these changes. An enormous amount of work was involved in the development of a step by step flow chart and accompanying tracking documents which were integrated into existing procedures.

The Inquiry Committee consists of very hardworking and dedicated professional and public members who work in consultation and cooperation with a very competent staff team consisting of the Registrar, Deputy Registrar, and Inquiry Coordinator. It was my pleasure to serve as Chair for the 2008 year.

Respectfully submitted, Rebecca England, Ph.D., R.Psych. Chair, Inquiry Committee 2008

Registration Committee Report

Mobility and Access to the Profession The College, along with other regulatory bodies in psychology across Canada, signed the Mutual Recognition Agreement in 2001 allowing psychology practitioners to more easily become registered in another province. The Trade, Investment, and Labour Mobility Agreement (TILMA) between BC and Alberta, further increases mobility between the two provinces and is now in effect. The College continued work on TILMA through the 2008 year. Improving the College website to increase clarity and ease of access to application information and forms was a major focus during 2008.

As a means of supporting these changes, the College applied for and received a "Solutions for Access" grant from the Ministry of Economic Development. This funding will assist the College in making the website and application documents more user-friendly to applicants from outside BC. The federal Agreement on Internal Trade (AIT) which came into effect in 1995 and was recently amended, is also intended to increase mobility for professionals fully licensed in another Canadian jurisdiction. Recent revisions to the Labour Mobility section of the AIT specify that any worker certified for an occupation by a regulatory authority in another province or territory must be recognized as qualified to practice that occupation by all other provinces and territories. In accordance with the spirit and intention of these changes, the College extended an invitation to apply for registration in British Columbia to all psychology practitioners registered as such with another Canadian psychology regulatory body. By December 31, thirty (30) individuals had submitted applications during the time frame of this initiative.

Psychologist's Regulation In October 2008, measures were taken to increase consistency of language in regulations for all professions governed by the Health Professions Act. This modification reduced the College's ability to pursue matters related to protection of title where an individual is using derivatives of the word "psychology." The Regulation continues to protect the titles of Psychologist and Psychological Associate and exemptions for persons working in certain contexts remain in place.

Utendale Decision As reported in the 2007 Annual Report, the Registration Committee decided to proceed on a serious title issue with implications for public protection. The Supreme Court decision, on April 26, 2007, confirmed the protection of the title "psychologist" and any of its derivatives, including "psychotherapist." However, as a consequence of the 2008 changes in the wording of the Psychologist's Regulation, this decision was no longer applicable and the case was closed.

Training in Psychology The Registration Committee invited faculty from various training programs in psychology and related disciplines to meet with the Committee during the 2008 year. The invitation to dialogue with the College was well received. The Committee believes the meeting resulted in greater appreciation of how training connects with registration, protection of the public and ways it can impact the integrity of the profession.

Supervision Any applicant applying as of January 1, 2008 is required to submit a supervision plan if he or she is providing psychological services in BC while an applicant. Applicants can select their own supervisor, who must be a registrant. Further specification of this requirement will be considered after this requirement has been in place for a longer period.

I have enjoyed my tenure as chair of this committee. My work on this committee has been greatly facilitated by the hard work of the professional and public members of the registration committee who spend freely of their time in reviewing all registration matters requiring policy development and decision-making. I also take this opportunity to thank our staff for their work in implementing these important policies and decisions and competently managing the enormous work volume. In addition, the ongoing volunteer time and experience of oral examiners in providing oral examinations to new applicants is much appreciated. Our growing group of regulatory supervisors and registrants who are providing supervision to applicants should also be acknowledged. All of these contributions combine to enhance the regulation of our profession.

Respectfully submitted, Michael Elterman, MBA, Ph.D., R.Psych., Chair, Registration Committee 2008

QUALITY ASSURANCE COMMITTEE REPORT

In addition to the annual review of the Continuing Competency Program, the Committee was actively engaged in important initiatives. Below is a summary of the Committee's work in 2008.

Continuing Competency Program Review The review for the 2008 year was conducted in March, 2008. Several registrants were found not to be in compliance with the requirement, and the Committee followed up with these registrants. The document "Continuing Competency Program Requirements" summarizes the policies and requirements and is available on the College website.

Designation of another registrant to take care of one's practice records in the event of unexpected incapacity or death This requirement will commence with renewal for the 2010 (rescheduled from 2009) calendar year, and will involve listing the designated registrant on the renewal form. For the 2008 and 2009 renewals, registrants were encouraged, but <u>not</u> required, to designate another registrant. The Committee's reasoning in establishing this requirement included awareness of the aging demographic of the College and the work of a task force established by the Committee to assist in this matter.

Professional will workshops The Committee was pleased to organize a series of 8 workshops on professional wills by Dr. Tom McGee that were offered in Vancouver, Nanaimo, Castlegar and Prince George in May of 2008. These workshops were well attended. They were arranged after a series of 10 previous professional wills workshops had been offered in 2007, and it was clear that not all

registrants who were interested had yet been able to attend. The workshops covered the important topic of development of professional wills, including the designation of a professional executor. There is no plan to require registrants to prepare a professional will, although as noted above, they will be required to designate another registrant to be responsible for their practices in the event of incapacity or death.

Other workshops The Committee was pleased to organize a one-day workshop by Dr. Susan Jacob on May 30, 2009 entitled "Ethical Issues in School Psychology," and workshop presentations by College counsel Lisa Fong entitled "Release of Records: Legal Issues for Psychology" immediately after the Annual General Meeting on May 22, 2008, and "A Legal Issues Primer" in conjunction with Dr. Jacob's May 30, 2008 presentation.

Respectfully submitted, Lee Cohene, Ph.D., R.Psych., Chair, Quality Assurance Committee 2008

FINANCE COMMITTEE REPORT

The College continues to stay within budget projections and has maintained stable renewal fees for the past 5 years with no anticipated fee increases for 2009.

Year Wages and Routine Hearings* General **Total Expenses** Benefits Statutory Operating Expenses** Expenses Amount Amount % % **Amount** % % Amount **Amount** % 2004 288,686 521,791 41 23 74,816 6 1,276,629 391,336 30 100 2005 554,704 128,899 48 70,563 6 403,717 11 35 1,157,883 100 2006 565,346 201,542 46 17 50,113 4 402,896 33 1,219,897 100 2007 571,315 44 210,917 16 101,350 8 414,650 32 1,298,232*** 100 2008 634,602 44 267,106 19 46,627* 494,783** 3 34 1,443,118***

Table 2: Comparative Expenses

Respectfully submitted,
Derek Swain, Ed.D., R.Psych., Chair, Finance Committee 2008

^{*} This figure represents the cost of preparing for and holding extraordinary and discipline committee hearings.

^{**} Included in these expenses are costs associated with committee and Board meetings, travel, rent, and office supplies.

^{***} This total differs from that reported on the attached financial statements by a total of \$57,002 which is the sum of \$16,970 for workshop fees and \$40,032 for recovered supervision expenses. Note that these sums are also represented in the receipt side of the financial statements as additional income.

REGISTRAR'S REPORT

Below is the Registrar's Report on the activities of the College for the year 2008. This report is divided into three main sections:

- Registration/Application Matters This section provides a description of the College Register for 2008 and the status of applications for registration, as well as a summary of activities of the College in this area.
- **II. Complaint and Investigative Matters** The second section provides a descriptive and statistical analysis of complaint and other investigative matters.
- **III.** Administrative Matters The third section summarizes administrative activities related to external relationships and our obligations under the *Ombudsman* and *Freedom of Information and Protection of Privacy Acts*.

I. REGISTRATION/APPLICATION MATTERS

This section reviews activities at the College related to the status of the College Register during 2008, and the status of applications for registration. It is divided into 5 sections as follows:

- 1) The College Register 2008; 2) Summary of Application Activity; 3) Status of Application Files;
- 4) Area of practice; and 5) Examinations.

1. The College Register 2008

As of December 31, 2008, the College Register showed a total of 1121 registrants. An additional 10 registrants cancelled their registration within the 2008 calendar year, 3 registrants died, and 1 individual held temporary registration.

Table 3: The College Register as at December 31, 2008

Register Status on December 31	2003	2004	2005	2006	2007	2008
Full Register	889	924	933	932	974	988
Suspended				1	0	1
Limited Register- Inquiry Committee (IC)	14	15	13	11	11	13
Limited Register- IC / Non-Practicing	1				1	0
Limited Register- IC/ Out of Province		1			0	0
Limited Register - Out-of-Province	43	29	28	27	22	27
Limited Register - Non-Practicing	17	11	18	23	15	16
Limited Register- Retired	15	13	14	23	26	34
Limited Register- Registration Committee	2	5	22	57	53	42
Category Pending	1	1	2		0	0
Held Temporary Reg. During the Year	2	3	2	1	2	1
Cancelled Prior to End of Year					3	10
Total	984	1002	1032	1075	1107	1132*

^{*}This total does not include 3 registrants who were deceased as of December 31, 2008.

As shown in the table below, a total of 50 new registrants were added to the Register in 2008.

Table 4: New Registrants by Class of Registration

	Regular	Reciprocal	Mobility	Extraordinary	Temporary	Total
Psychologists	27	15	5	0	0	47
Psychological Associates	0	3	0	0	0	3
Total	27	18	5	0	0	50

2. Summary of Application Activity

Table 5 below summarizes the application activities at the College during the 2008 year, along with comparison data from previous years. As shown in the table, a total of 62 applications were received during the 2008 year. Of these, 27% (n=17) were regular applications. Sixty-one percent (n=38) were reciprocal applications from another Canadian jurisdiction, and 10% (n=6) were mobility applications from jurisdictions in the United States. One application was withdrawn and one application was reviewed but it did not meet entry requirements.

Table 5: Application Activity Summary 2001-2008

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Activity	tivity 2007				₹ 2008							
	Reg	Temp	Recip	Mobil	Ext	Total	Reg	Temp	Recip	Mobil	Ext	Total
# applications received	39	2	14	8	1	64	17	1	38	6	0	62
# applications withdrawn	0	0	0	1	0	1	0	0	1	0	0	1
# applications did not meet requirements	0	0	0	0	0	0	1	0	0	0	0	1

3. Status of Application Files

Table 6 shows the status of all open applications as of December 31, 2008. There were a total of 75 open applications at various stages of the application process.

Table 6: Status of Open Applications as at December 31, 2008

Application Stage		2008								
Application stage	Regular	Reciprocal	Mobility	Total						
Initial review	12	24	2	38						
Under review for credentials/consistency	2	0	1	3						
EPPP	19	N/A	N/A	19						
Written Jurisprudence Exam	6	5	1	12						
Oral Examination	3	N/A	N/A	3						
Total Open Files as of December 31, 2008	42	29	4	75						

4. Extraordinary Applicants

In addition to the 75 open applications in the above three categories, 39 Extraordinary Applicants continued to work towards placement on the Full Register. Thirty-eight (38) of the Extraordinary Applicants had been placed on the Limited Register prior to 2008. These applicants complete examinations and other requirements of the Extraordinary process while on the Limited Register. Of the 39 extraordinary applicants not yet on the Full Register, 33 were at the EPPP stage, 5 were at the Oral Examination stage and 1 was completing Part One of the Oral Exam (an examination which, upon passing, allows for placement on the Limited Register).

5. Area of Practice: Applicants and Registrants

Applicants must indicate one area of practice in psychology on the application form. This area is expected to be the broad area of practice which best describes the individual's training and competence. Table 7 below represents the area of practice indicated by new applicants in 2008. Seventy-four percent (74%) of applicants selected Clinical or Counseling as most descriptive of their area of practice.

Table 7: Area of Practice for New Applicants in 2008

Tuble 7. Al	ea oi Praci	ice for Ne	w Applical	113 111 2008	
Area of Practice	Reg	Recip	Mobil	Temp	Total
Clinical Psychology	9	15	4	1	29
Counseling Psychology	3	14	0		17
Clinical Neuropsychology	1	2	2		5
School Psychology	2	3	0		5
Health Psychology	0	0	0		0
Rehabilitation Psychology	0	2	0		2
Forensic/Corrections Psychology	0	0	0	:	0
Clarification Required	2	1	0	1	4
Total	17	37	6	2	62

Note: The areas of Clinical and Counseling are defined by the College as broad areas encompassing many sub-areas, while the areas of Forensic/Corrections, Health, School, Rehabilitation, Industrial/Organizational and Clinical Neuropsychology are seen as more narrowly defined areas of practice, sometimes including exclusive practice in a particular setting.

Each year, registrants are required at renewal to report their primary area of practice. The Register indicated the following breakdown for the self-declared primary area of practice indicated by registrants as of December 31, 2008, excluding suspended (n=1) and retired registrants (n=34):

Table 8: Self-Declared Primary Area of Practice for Registrants as at December 31, 2008

Self-Declared Primary Area of Practice	Number of Registrants	%
Clinical Psychology	606	56
Counseling Psychology	230	21
Clinical Neuropsychology	65	6
School Psychology	63	6
Health Psychology	6	1
Rehabilitation Psychology	15	1
Research/Academic Psychology	27	2
Forensic/Corrections Psychology	50	5
Industrial/Organizational Psychology	24	2
Total	1086*	100

^{*} This number does not include the 1 registrant who was suspended or the 34 registrants who were in the retired category as at December 31, 2008.

5. Examinations

All regular applicants complete three examinations as part of the application process: the EPPP, the oral exam (OE) and the Written Jurisprudence Examination (WJE). Reciprocal and mobility applicants are required to successfully complete the WJE. Table 9 below summarizes examination results for 2008. In 2008, 1 extraordinary applicant completed Part A of the oral examination, which contains 10 questions covering aspects of ethical conduct and knowledge of regulation. The Part A examination is the final step to be completed by applicants under the extraordinary provisions prior to placement on the Limited Register.

Table 9: Examination Results

	2003	2004	2005	2006	2007	2008
Number of applicants who wrote EPPP	16	22	16	31	35	37
Number of Oral examinations (Regulars)	15	34	25	26	25	29
Number of Oral examinations (Extraordinary)	-	_	-	_	14	12
Number of WJE examinations	19	68	117	47	36	62
Part A of Oral examination (Extraordinary)	n/a	n/a	39	36	4	1

The EPPP exam was taken 37 times in 2008 with no failures. The scaled scores ranged from 505-749 out of 800 (Mean = 649.1; St Dev = 67.8).

As in past years, the WJE examination is held at the College offices on a monthly basis. It was administered 62 times in 2008. Fifty-seven (57) applicants passed on their first attempt, while three failed. Of the three failures, two applicants retook the examination in 2008 and passed.

The College also conducts the Oral Examination on site. In 2008, 41 examinations took place, of which 5 were second attempts by individuals who had failed (n = 4) or chose not to accept the limitations as recommended by the Oral Examiners (n = 1), after their first attempt. All 5 of these applicants passed and were placed on the Full Register.

Of the 36 first time examinees, 86% of the applicants (n = 31) passed the oral examination on their first attempt and were placed on the Full Register. Five (5) applicants were placed on the Limited Register and 1 failed, retook the examination in 2008, and passed.

II. COMPLAINT AND INVESTIGATIVE MATTERS

This section contains information about complaints received in the year 2008 as well as a report on all complaints closed during 2008. Included are descriptions of aspects of the complaints process and a sampling of complaints received during the year.

- 1. Complaint file status as at December 31, 2008
- 2. Descriptive complaint summary
- 3. Investigations opened by the Inquiry Committee
- 4. Length of time to close complaint files
- 5. Closing reasons for complaints closed in 2008 and comparison with previous years
- 6. Components of the complaint investigative process
- 7. Letters of Undertaking/Consent Agreements
- 8. Summary of a sample of Complaints in 2008
- 9. Complaints per year and number of registrants with complaints

1. Complaint file status as at December 31, 2008

Since the College of Psychologists came under the *Health Professions Act*, a total of 461 new complaints have been received, including 41 that were received during 2008. The College received eighteen percent (18%) fewer complaints in 2008 than in 2007.

- A. Complaints received in 2008 (n=41): Eighteen (18) of the complaints received in 2008 were also closed in 2008, leaving a total of 23 complaints received in 2008 still open on December 31, 2008.
- B. Complaints received in 2007 that remained open for at least part of 2008 (n=27): Twenty-six (26) of the 27 files remaining open from 2007 were closed in 2008. These 26 closed files originating from 2007 are included in the data on files closed in 2008 presented elsewhere in this report.
- C. Complaints received prior to 2007 and still open in 2008 (n=7): Five files opened in 2006 were closed in 2008. Two files opened in 2005 remained open in 2008. Citations were issued in the case of these latter two files and they remained in progress through 2008.

Table 11: Complaint File Status as at December 31, 2008 for all complaints received under the Health Professions Act

		Year Complaint Received										
Status	2000-2006		20	2007		2008		tal				
	#	%	#	%	#	%	#	%				
Awaiting or Under Initial Review					7	17.1	7	1.5				
33(4)												
Practice Records					7	17.1	7	1.5				
33(5)			1	2.0	4	9.8	5	1.1				
HPA S.28 Inspections					1	2.4	1	0.2				
Without Prejudice Meeting												
Letter of Undertaking					3	7.3	3	0.7				
Citation	2	0.5					2	0.4				
Extraordinary Hearing					1	2.4	1	0.2				
Total # open files	2	0.5	1	2.0	23	56.1	26	5.6				
Total # closed files	368	99.5	49	98.0	18	43.9	435	94.4				
Total	370	100	50	100	41	100	461	100				

2. Descriptive Complaint Summary

Below are four descriptive variables (primary allegation, complaint context, area of practice, and complainant type) on which all complaints are tracked:

a. Primary Allegation Table 12 (see next page) contains a breakdown of complaint investigations according to the primary allegation made by the complainant as it relates to the *Code of Conduct*. The most frequent primary allegation for complaints opened in 2008 was assessment procedures (n=13, 31.7%). This is consistent with all complaints received since the College came under the *Health Professions Act*; assessment procedures is the primary allegation in the largest number of cases overall (n=167, 36.3%). General standards for competency was the next most frequent primary allegation in 2008 (n=8, 19.5%) and overall (n=66, 14.3%), followed by professionalism (n=4, 9.8% in 2008, and n=56, 12.2% overall). For 2008, many of the cases in which competency is the primary allegation involved an assessment.

Table 12: Primary Allegation in Complaints Received 2000-2008

Primary Allegation			Yea	r Compl	aint Rec	eived		
(Code of Conduct Section)	2000-2006		2007		2008		Total	
	#	%	#	%	#	%	#	%
General Stds for Competency (CC 3.0)	50	13.5	8	16.3	8	19.5	66	14.3
Informed Consent (CC 4.0)	18	4.9	2	4.1	1	2.4	21	4.6
Relationships-Clients (CC 5.0)	48	13.0	4	8.2	1	2.4	53	11.5
Relationships-Work (CC 5.0)	5	1.4	2	4.1	1	2.4	8	1.7
Relationships-Dual Roles (CC 5.0)	16	4.3			4	9.8	20	4.4
Confidentiality (CC 6.0)	16	4.3			2	4.9	18	3.9
Professionalism (CC 7.0)	49	13.2	3	6.1	4	9.8	56	12.2
Provision of Services (CC 8.0)	9	2.4	4	8.2	1	2.4	14	3.0
Representation of Services/Credentials (CC 9.0)	2	0.5					2	0.4
Advertising/Public Statements (CC10.0)	7	1.9	1	2.0	2	4.9	10	2.2
Assessment Procedures (CC 11.0)	138	37.3	16	32.7	13	31.7	167	36.3
Fees (CC 12.0)	8	2.2	1	2.0			9	2.0
Maintenance of Records (CC 13.0)	1	0.3					1	0.2
Security/Access to Record (CC 14.0)	1	0.3	4	8.2			5	1.1
Compliance with Law (CC 18.0)	2	0.5			2	4.9	4	0.9
Application (CC 2.0)			2	4.1			2	0.4
No Standard Applicable			2	4.1	2	4.9	4	0.9
Total	370	100	49*	100	41	100	459	100

^{*}Total is less than 50 because one complaint was opened in error and no primary allegation was recorded.

b. Complaint Context Table 13 on the next page reports on the context within which complaints occurred. As has consistently been the case in the past, in 2008 a substantial proportion (n=21; 51.2%) of complaint concerns arose in the context of an assessment, such as a custody and access proceeding or a correctional assessment.

Table 13: Complaint Context for Complaints Received 2000-2008

Complaint Context	Year Complaint Received								
Complaint Context	2000-2006		2007		2008		Total		
	#	%	#	%	#	%	#	%	
Assessment	218	58.9	24	48.0	21	51.2	263	57.0	
Consultation	6	1.6			1	2.4	7	1.5	
Intervention	82	22.2	15	30.0	12	29.3	109	23.6	
Regulatory Compliance	16	4.3	3	6.0	1	2.4	20	4.3	
Other	48	13.0	8	16.0	6	14.6	62	13.4	
Total	370	100	50	100	41	100	461	100	

c. Area of Practice Table 14 below presents information on the area of practice within which complaints occurred. In 2008, 34.1% (n=14) of the complaints received were in the custody and access sub-area within clinical psychology. An additional 7 complaints (17.1%) were in the broader clinical psychology area.

Table 14: Complaint - Area of Practice in Complaints Received 2000-2008

	Year Complaint Received									
Complaint Area of	2000-2006		2007		200	98	То	tal		
Practice	#	%	#	%	#	%	#	%		
Clinical Psychology	169	45.7	30	60	7	17.1	206	44.7		
Custody and Access	96	25.9	11	22	14	34.1	121	26.2		
Counselling Psychology	33	8.9	3	6	3	7.3	39	8.5		
Forensic /Corrections	32	8.6	4	8	5	12.2	41	8.9		
Industrial /Organizational	2	0.5					. 2	0.4		
Neuropsychology	16	4.3	1	2	4	9.8	21	4.6		
Rehabilitation Psychology	8	2.2					8	1.7		
Research /Academic	4	1.1					4	0.9		
School Psychology	6	1.6			2	4.9	8	1.7		
N/A	4	1.1	1	2	6	14.6	11	2.4		
Total	370	100	50	100	41	100	461	100		

d. Complainant Type As indicated in Table 15 below, 39% (n=16) of the complaints received in 2008 were filed directly by clients of respondents. These files are referred to as "public complaints" in subsequent tables. The Inquiry Committee opened an additional 8 files (19.5%) on its own motion based on information provided to it (these files are referred to as "IC motion" in subsequent tables). The category of "Colleague" is now reserved for those cases in which the complainant is not also involved with the recipient of services (for example, a registrant who makes a complaint after becoming concerned about a colleague's conduct after observing him/her performing impaired in a shared work environment). Previously these files had been categorized in the "Client - 3rd Party" category.

Table 15: Complainant Type in Complaints Received 2000-2008

	Complainant Type	Year Complaint Received								
	Complainant Type	2000-2006		2007		2008		To	tal	
		#	%	#	%	#	%	#	%	
Р	Client - 3 rd Party	103	27.8	22*	44	2**	4.9	127	27.5	
U B	Client - Direct	82	22.2	13	26	16	39.0	111	24.1	
L	Client Relative	50	13.5	7	14	8	19.5	65	14.1	
l C	Colleague***	61	16.5			5	12.2	66	14.3	
	Other	33	8.9	2	4	2	4.9	37	8.0	
IC	Inquiry Committee	41	11.1	6	12	8	19.5	55	11.9	
	Total	370	100	50	100	41	100	461	100	

^{*}This total includes 13 cases in which the complainant was another registrant.

3. Investigations Opened by the Inquiry Committee

Under the *Health Professions Act*, the Inquiry Committee can open an investigation on its own motion when there are public protection concerns or when an investigation of allegations made by a complainant provides evidence which on its face suggests a new area of concern. Most frequently, investigations initiated by the Committee arise in the following circumstances: failure to comply with regulatory obligations in connection with another complaint; receipt of information generally available to the public; information obtained through an inspection of a registrant's practice records; or through information provided to the College that is deemed of sufficient concern to initiate an investigation. In 2008, 8 complaint investigations were opened by the Inquiry Committee. One of these files was opened to investigate issues of compliance with regulatory obligations. Five were opened subsequent to a practice inspection undertaken as part of an investigation into complaint matters, and two involved fitness to practice issues.

^{**}This total includes 1 case in which the complainant was another registrant.

^{***}As of 2007, this category reserved for colleagues not also involved as a third party with service recipient.

4. Length of Time to Close Files

For complaints closed in 2008 (n=49), the number of months required to investigate and close a file ranged from 1 to 36 months. Excluding eight (8) outlier files involving three different registrants in which protracted legal negotiations were involved, the average time to closure was 8.1 months. Table 16 below contains the average length of time to close complaint files for 2006, 2007 and 2008.

Table 16: Average Time (in months) to Close Files for Complaints Closed 2006-2008

Year Complaint Closed:	2006	2007	2008
Average Length of Time to Close File	8 months	6.45 months	8.1
	n = 61	n = 40	n = 41*

^{*}Excluding 8 files involving 3 respondents in which protracted legal negotiations resulted in unusually long closure times

5. Complaint File Closing Reasons

Slightly more than one-third of the complaints closed in 2008 were dismissed because of insufficient evidence of a breach of the *Code of Conduct*, withdrawn, or not proceeded on for administrative reasons. For complaints received and closed in 2008, 59% were resolved by means of an undertaking or agreement with the respondent, or by some action offered by the respondent that satisfied the Committee's concerns in the matter.

Table 17: Closing Reasons for Complaints Closed 2005-2008

		Year Complaint File Closed									
Closing Category	Closing Reason	20	06	2	007	20	800	Totals			
		#	%	#	%	#	%	#	%		
Dismissed-	Decision Not to Proceed	17	28	6	15	7	14.3	30	20.0		
lack of evidence or	Withdrawn/opened in error	1	2	3	7.5			4	2.7		
otherwise not	Insufficient Evidence	20	33	13	32.5	12	24.5	45	30.0		
proceeded upon	Subtotal	38	62	22	55	19	38.8	79	52.7		
Voluntary Resolution	Letter of undertaking or resolution agreement	12	20	12	30	28	57.1	52	34.7		
	Resolved	10	16	6	15	1	2.0	17	11.3		
	Subtotal	22	36	18	45	29	59.2	69	46.0		
Resigned/ Cancelled	Resigned/Cancelled Referred to Registration or Discipline Committee	1	2			1	2.0	2	1.3		
	Total	61	100	40	100	49	100	150	100		

6. Components of the Complaint Investigation Process

Components of the complaint investigation process include without prejudice meetings, extraordinary hearings, and citations and discipline hearings, described below.

- a. Without Prejudice Meetings The term "without prejudice" is used to indicate that nothing that occurs in a without prejudice meeting or correspondence may be used in other proceedings. Without prejudice meetings provide an informal and effective means for resolving complaint matters. Two without prejudice meetings were held in 2008. Additionally, a number of without prejudice telephone conversations occurred, and several without prejudice letters with proposals for complaint resolution were sent. By way of example, a without prejudice meeting between the Inquiry Committee and a respondent occurred in the context of a complaint involving a forensic assessment. The complainant in this matter was concerned about the assessment process and impact of the assessment report. Subsequent to the meeting, the respondent signed an agreement to enter into supervision to improve report preparation practices.
- **b. Extraordinary Hearings** Sometimes concerns arise which necessitate immediate action on the part of the Inquiry Committee, such as issues with sufficient public protection concerns that the Committee believes an immediate restriction on practice or license suspension may be warranted. There is no testing of evidence at an extraordinary hearing. Rather, a decision is made on whether the available evidence, on its face, supports action by the Inquiry Committee. Any extraordinary action or agreement is an interim measure, designed to address immediate public protection concerns, while the complaint investigation continues and/or pending a full hearing of the Discipline Committee. Extraordinary actions or agreements, therefore, do not represent final resolutions of the complaint issues. One extraordinary hearing was held in 2008.
- **c. Discipline Hearings & Citations** In contrast to an extraordinary hearing, a discipline hearing is the equivalent of a full trial on all issues, and a finding of fact is made at the end of the hearing. No Discipline Committee hearings were held in 2008, although citations for a hearing of the Discipline Committee on two files involving 2 registrants that were issued in 2007 remained in preparation as of December 31, 2008.

7. Letters of Undertaking/Consent Agreements

Table 18 on the next page provides a summary of Letters of Undertaking/Consent Agreements signed with registrants during the year 2008 as a means of bringing a complaint file to a close. A total of 20 such agreements were signed in 2008 relating to 28 complaint files. The terms of such agreements are determined on a case by case basis and all are signed on a voluntary basis. In a number of the more serious complaints below, a hearing of the Discipline Committee would have been held had such a resolution not been achieved.

Table 18. Summary of Terms of Letters of Undertaking/Consent Agreements in 2008 (n=20)

Agree- ment #	# of Files	Primary Allegation by <i>Code of Conduct</i> Section	Terms of Consent Agreement or Letter of Undertaking
1	1 file	No Standard Applicable	Restrict amount of time practicing psychology
2	1 file	11-Assessment Procedures	No assessment without supervision
3	1 file	11-Assessment Procedures	Modify file keeping practices and confirm conduct is consistent with <i>Code of Conduct</i>
4	4 files	05-Prohibited Relationship/Contact 05-Relationships-Client x2 03-Competency	No psychological services without supervision
5	1 file	07-Professionalism	Ensure professionalism of communication
6	1 file	03-Competency	Supervision of assessment practice
7	1 file	02-Application	Confirm understanding that agreements with College are legally binding and no practice outside practice restriction without consent of Registration Committee
8	2 files	05-Prohibited Relationship/Contact x2	Supervision regarding office procedures and treatment issues
9	1 file	04-Consent	Supervision of psychological practice
10	4 files	11-Assessment Procedures x2 02-Application 07-Professionalism	Agreement not to practice as a psychologist and not to reapply for registration.
11	1 file	08-Provision of Services	Clarify timelines and fees, and complete work in timely fashion
12	2 files	05-Relationships-Client 11-Assessment Procedures	No custody and access or multiparty assessments without supervision, and supervision of psychological practice
13	1 file	03-Competency	Ensure professionalism of communication, obtain and document informed consent, and no opinion without sufficient contact
14	1 file	11-Assessment Procedures	Voluntary resignation and Inquiry Committee can resume investigation if reapplies for registration
15	1 file	04-Consent	Modify practices regarding informed consent and structuring relationships
16	1 file	03-Competency	Supervision of assessment practice
17	1 file	03-Competency	Supervision of assessment practice
18	1 file	08-Provision of Services	Modify informed consent process and record keeping practices
19	1 file	11-Assessment Procedures	Supervision of psychological practice
20	1 file	05- Relationships-Client	Supervision of practice

8. Samples of Complaints Open During 2008

Below is a brief review of the main allegations raised in a sample of complaints open during 2008, along with a description of the process and outcome of the complaint investigation.

One case arose in the context of a custody and access evaluation. The complainant, one of the parents who was the subject of the assessment, alleged that the respondent was biased and had reported personality issues that were contradicted by other assessors involved in the matter. The Committee requested that the complainant provide all the documentation referenced as forthcoming in the original complaint, carefully reviewed these extensive documents once they arrived, and provided the respondent with an opportunity to provide any information in accordance with Section 33(5) of the *Health Professions Act*. The Committee found no support for any the allegations made in this case, and closed the complaint pursuant to Section 33(6)(a) of the *Health Professions Act*, on the basis that careful review of complaint materials yielded insufficient evidence supporting allegations of professional misconduct.

A second case involved a complaint by an administrator of an organization who alleged that a registrant providing services to the organization's employees was engaging in inappropriate billing practices, had refused to answer questions about treatment and billing practices, had made a number of unprofessional statements, was using a treatment approach that lacked empirical validation, had abandoned a client, and had tried to involve a client in difficulties with the organization. The Inquiry Committee sought additional documentation from the complainant in this case, and then asked the respondent to address questions posed under Section 33(5) of the *Act*. After carefully reviewing all of the documentation before it, the Committee found insufficient evidence to support any of the allegations made with the exception of that pertaining to unprofessional communications. The Committee asked and the respondent agreed, to provide written confirmation that henceforth communications would be appropriately professional.

A third case involved a complaint made by an individual who alleged that the respondent had prepared an assessment report in a corrections context without interviewing the complainant or obtaining informed consent to do so. The Committee obtained the relevant practice records and posed a number of questions to the respondent under Section 33(5) of the *Act*. The Committee found evidence supporting the allegations made in this case, and after a without prejudice meeting with the Committee the respondent entered into an agreement to undergo supervision of practice to enhance assessment practices, informed consent processes, and record keeping, and to address *Code of Conduct* application within the employment context.

In a fourth situation, a colleague made a complaint alleging that a registrant was believed to have become romantically and sexually involved with a client. The Inquiry Committee commenced an investigation and moved in this case to hold an extraordinary hearing pursuant to Section 35(1) of the Health Professions Act in response to immediate public protection concerns. The extraordinary hearing was settled by the registrant entering into an agreement that the registrant would not practice psychology or provide psychological services until the complaint was resolved.

As a final example, the Inquiry Committee opened an investigation on its own motion after receiving documentation regarding a registrant's alleged mental health status. The registrant was asked to provide medical information pertaining to this issue, and then was asked and agreed to sign an agreement regarding a specific limitation on practice that reflected the medical information and medical advice.

9. Complaints per Year and Number of Registrants with Complaints

Table 19 below describes the number of registrants about whom complaints have been received since the College was first granted responsibility for regulating the profession in 1993. As shown in the Table, in 2008, 41 complaints were received. These 41 complaints were with regard to 31 different registrants. Thus some registrants were named in more than one complaint file.

Table 19: # of Complaints per year from 1993 - 2008 and # of Registrants with Complaints

Year	# complaints (with named registrant)	# Registrants
1993	30	21
1994	26	22
1995	44	35
1996	38	30
1997	45	39
1998	47	32
1999	53	37
2000	64	48
2001	59	42
2002	54	38
2003	53	42
2004	46	31
2005	44	35
2006	50	42
2007	50	37
2008	41	31
Total	703	_*

^{*}Column total not calculated, as some registrants appear in multiple years.

Since January 2000, 202 registrants have had at least one complaint as shown in Table 20 on the next page. Ten of these individuals resigned as a means of resolving matters with the College or in response to complaints received. Approximately 15% of current registrants have had at least one complaint filed under the *Health Professions Act*.

Table 20 shows the number of complaints in which a registrant is named since January 2000. The table makes a distinction, discussed in Section 2d on page 20 above, between complaints received directly from members of the public (public complaints) and files that are opened by motion of the Inquiry Committee (Motion of IC). The breakdown for 2008 is as follows: 1 registrant was named in 4 files (all opened by the Inquiry Committee on its own motion), 1 registrant had 3 complaints, 5 registrants had 2 complaints (all public complaints except for one registrant for whom the Inquiry Committee opened a file as a result of files reviewed during a practice inspection), and 24 registrants had 1 complaint. Of the 24 registrants with a single complaint file, two of these were opened by the Inquiry Committee on its own motion in order to investigate issues relating to fitness to practice.

Table 20: Number of Complaints since January 2000 Per Registrant

# of Complaints	# Named Registrants	Total complaints	Public complaints	Motion of IC
1	120	120	112	8
2	38	76	68	8
3	11	33	29	4
4	10	40	34	6
5	7	35	32	3
6	3	18	16	2
7	2	14	6	8
8	1	8	3	5
9	0	0	0	0
10	2	20	17	3
11	3	33	31	2
12	2	24	23	1
13	2	26	22	4
14	0	0	0	0
15	0	0	0	0
16	1	16	16	0
Total	202	463*	409	54

^{*}Total does not equal 461: one complaint did not name a respondent and was opened in error and is thus excluded, and two complaints named two registrants within a single complaint and were tabulated as separate complaints for purposes of calculating total complaints per individual registrant for this table.

III. ADMINISTRATIVE MATTERS

- **1. Ombudsman Investigations** There were 2 investigations of the College by the Ombudsman's Office in 2008. One was closed and the other remained open at December 31, 2008.
- **2.** Requests under the *Freedom of Information and Protection of Privacy Act* There were 7 requests received under the Freedom of Information and Protection of Privacy Act during 2008, all of which are now closed.
- **3.** Relationships with Other Regulatory Bodies in Psychology The College remained actively involved with the other Canadian regulatory bodies through our involvement in the Association of Canadian Psychology Regulatory Organizations (ACPRO). The Registrar was elected vice-chair of this organization.
- **4. Acknowledgments.** The members of the College Board and Committees are extremely generous with their time and expertise and devote many hours to the careful consideration of policy development and thoughtful decision-making. The combination of an excellent staff and a growing community of professionals and public members on the Board and College committees greatly enhances our ability to regulate our profession in the public interest.

Respectfully submitted, Andrea Kowaz, Ph.D., R.Psych., Registrar

Minutes of the 2008 Year Annual General Meeting

Agenda The table of contents in the Annual Report served as the agenda for the May 22, 2008 meeting, which was called to order at 5:10 p.m.

Minutes The Minutes of the 2007 Annual General Meeting held on May 10, 2007 were approved.

Report from the Chair Dr. Michael Joschko welcomed registrants to the AGM and referred registrants to his Report in the Annual Report. He introduced fellow board members: Lee Cohene, Rebecca England, Michael Elterman, Daniel Fontaine (in absentia), Marguerite Ford, Wayne Morson and Valerie Whiffen. Dr. Joschko also presented a brief report on the Patient Relations Committee on behalf of Daniel Fontaine.

Inquiry Committee Dr. England introduced the members of her Committee, reported on the work of the Inquiry Committee for the 2008 year, and thanked the Committee members for their hours of dedicated service to the College and the profession.

Registration Committee Dr. Elterman introduced the members of his Committee and referred registrants to his report in the Annual Report. He acknowledged the hard work of his Committee in reviewing application files and thanked the staff for their support.

Quality Assurance Committee Dr. Cohene thanked the members of the Committee and the staff for their work during the year. He reported on the Continuing Competency Program, which allows registrants to self-manage their continuing education. Registrants were referred to his written report. The six-year service of Leigh Bowie was acknowledged with the presentation of an engraved statue, along with the introduction and acknowledgment of all committee members.

Finance Committee Dr. Swain referred registrants to his written report and to the Audited Financial Statements at the end of the Annual Report, and responded to questions. He noted the number of other jurisdictions increasing their registration fees, while our rates have remained the same for the past six years.

Registrar's Report Dr. Kowaz thanked the Board, Committee members, and staff for their support and the huge volume of work accomplished during the past year. The Registrar commented on the strong platform created by the College's established processes and procedures in meeting its legal mandate, and noted that the existence of such a foundation may allow for constructive review and refinement, as appropriate. The Registrar responded to questions from registrants.

Volunteer Recognition Dr. Joschko recognized the contribution of volunteers to the College, including Board and Committee members, Oral Examiners, and Supervisors. He concluded by welcoming registrants to the 2nd Annual AGM Workshop "Release of Records — Legal Issues for Psychologists," which was to follow after the refreshment break.

FINANCIAL STATEMENTS

DECEMBER 31, 2008

Auditors' Report
Statement of Financial Position
Statement of Changes in Net Assets
Statement of Operations
Statement of Cash Flows
Notes to Financial Statements

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AUDITORS' REPORT

To the Registrants of College of Psychologists of British Columbia

We have audited the statement of financial position of the College of Psychologists of British Columbia as at December 31, 2008 and the statements of changes in net assets, operations and cash flows for the year then ended. These financial statements are the responsibility of the College's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the College as at December 31, 2008 and the results of its operations and the changes in its net assets for the year then ended in accordance with Canadian generally accepted accounting principles applied on a basis consistent with that of the preceding year.

CHARTERED ACCOUNTANTS

Vancouver, British Columbia March 19, 2009

^{*} a partnership of professional corporations

STATEMENT OF FINANCIAL POSITION

AS AT DECEMBER 31, 2008

		2008	2007
ASSETS			
CURRENT ASSETS			•
Cash	\$	1,270,677	\$ 1,515,970
Cash - restricted (Note 4)		600,000	250,000
Prepaid expenses		3,929	20,915
		4 074 000	4 700 005
		1,874,606	1,786,885
CAPITAL ASSETS (Note 2)	10 100 100	44,455	43,435
	\$	1,919,061	\$ 1,830,320
LIABILITIES			
CURRENT LIABILITIES			
Accounts payable and accrued liabilities	\$	88,149	\$ 32,810
Employee remittances payable		13,807	12,277
Deferred revenue (Note 3)		1,156,875	1,109,475
<u> </u>		1,258,831	1,154,562
NET ASSETS			
CAPITAL ASSET FUND		44,455	43,435
INTERNALLY RESTRICTED	i.		
General Contingency Fund (Note 4)		600,000	250,000
UNRESTRICTED		15,775	382,323
		660,230	675,758
	\$	1,919,061	\$ 1,830,320
	Ψ	1,313,001	Ψ 1,000,020

Approved by the Board, Director

STATEMENT OF CHANGES IN NET ASSETS

FOR THE YEAR ENDED DECEMBER 31, 2008

	General ontingency Fund 2008	Ca	apital Asset Fund 2008	ĺ	Jnrestricted 2008	Total 2008	 Total 2007
NET ASSETS, beginning of year	\$ 250,000	\$	43,435	\$	382,323	\$ 675,758	\$ 587,269
Excess of Receipts Over Expenditures (Expenditures over Receipts)	:* -		1,020		(16,548)	(15,528)	88,489
Interfund transfers (Note 4)	 350,000		-		(350,000)	-	
NET ASSETS, end of year	 600,000	\$	44,455	\$	15,775	\$ 660,230	\$ 675,758

STATEMENT OF OPERATIONS

FOR THE YEAR ENDED DECEMBER 31, 2008

	2008	2007
RECEIPTS		•
Registration fees	\$ 1,273,588	\$ 1,251,880
Application and exam fees	94,850	81,900
Interest	42,872	47,051
Supervision cost recovery	43,932	48,690
Other income, cost recovery, and grants	29,350	61,178
	20,000	01,170
	1,484,592	1,490,699
EXPENDITURES		
Administration	764 600	676.050
Audit	761,609 5,141	676,959
Board	95,567	5,035 58,446
Committees (meetings, travel and honoraria)	76,065	72,566
External relations (dues)	6,089	5,805
Extraordinary Hearings	22,367	5,605
Discipline Hearings (Including Preparation)	24,260	101,350
Operations	139,544	132,428
Registrant / Applicant services	61,814	89,786
Statutory functions (FOI, investigations, routine legal consultation)	267,106	210,917
Supervision expenses	40,558	48,918
	,	10,010
	1,500,120	1,402,210
EVOLCE OF BLOCIBLE OVER EXPENDITURES		
EXCESS OF RECEIPTS OVER EXPENDITURES (EXPENDITURES OVER RECEIPTS)	\$ (15,528)	\$ 88,489

STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED DECEMBER 31, 2008

·	2008	2007
CASH FLOWS FROM OPERATING ACTIVITIES		
CASITI LOWS I ROW OF LIVATING ACTIVITIES		
Excess of receipts over expenditures (expenditures over receipts) Adjustments for:	\$ (15,528) \$ 88,489
Amortization	11,665	10,512
Prepaid expense	16,986	(13,548)
Accounts payable	55,339	(68,013)
Employee remittances payable	1,530	(12,015)
Deferred revenue	47,400	477,675
	117,392	483,100
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of capital assets	(12,685) (20,924)
NET INCREASE (DECREASE) IN CASH	104,707	462,176
CASH, beginning of year	1,765,970	1,303,794
CASH, end of year	\$ 1,870,677	\$ 1,765,970

NOTES TO THE FINANCIAL STATEMENTS

DECEMBER 31, 2008

1. SIGNIFICANT ACCOUNTING POLICIES

Fund Accounting

Revenues and expenditures for general activities and administration are reported in the General Fund.

The General Contingency Fund was established in 2006 and is being increased when possible to an amount equal to 50% of the College's annual budget.

Capital Assets

Purchased property and equipment are recorded at cost. Amortization is provided on a declining balance basis at the following rates:

Office furniture and equipment Computer equipment and software

Leasehold improvements

- 20% declining balance

- 30% declining balance

5 years straight line

In the year of acquisition, only one-half of the normal amortization is recorded.

Amortization expense is reported in the Capital Asset Fund.

Revenue and Expense Recognition

Registration fees are recognized as income in the fiscal year due. Expenditures are recognized as incurred.

Financial Instruments

The following policies and assumptions were used to determine the fair value of each class of financial assets and financial liabilities.

Cash, cash restricted term deposits, and accounts payable:

The carrying amount of each item is this class is approximately equivalent to its fair value due to the approaching maturity of these financial instruments.

NOTES TO THE FINANCIAL STATEMENTS

DECEMBER 31, 2008

2. CAPITAL ASSETS

	Cost	2008 Accumulated Net Book Cost Amortization Value		2007 Net Book Value
Office furniture and equipment Computer equipment Leasehold improvements	\$ 109,373 106,918 40,706	\$ 79,868 91,968 40,706	\$ 29,505 14,950 -	\$ 29,319 14,116
	\$ 256,997	\$ 212,542	\$ 44,455	\$ 43,435

DEFERRED REVENUE

Deferred revenue represents membership fees for the 2009 calendar year received in advance.

4. GENERAL CONTINGENCY FUND

The General Contingency Fund was established by the Board of Directors.

The objective of the Fund is to provide for sufficient funding in case of law suits, hearings and other matters that may require significant expenditure. It is the intention of the College to maintain this fund at 50% of its operating budget. In the current year the fund has been increased to \$600,000.

Expenditures from the General Contingency Fund are subject to approval by the College of Psychologists of British Columbia Board of Directors.