



College of Psychologists of British Columbia

Annual Report 2013

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INTRODUCTION TO THE COLLEGE OF PSYCHOLOGISTS OF BC 2013 ANNUAL REPORT

MANDATE

To regulate the profession of psychology in the public interest in accordance with the Health Professions Act of British Columbia by setting the standards for competent and ethical practice, promoting excellence and taking action when standards are not met.

This 2013 Annual Report provides a summary of the College's regulatory activities for the 2013 year, including reports on the processing of applications for registration from Canadian and international applicants, the investigation of complaints about psychological services provided by a registrant of the College, and activities to enhance the competency and level of practice of psychologists, and engagement with other Canadian psychology regulators across the country and with other health regulators within British Columbia.

Readers of this report are also encouraged to visit the College's website for copies of the Annual Reports of previous years, the *Chronicle* publication, and other information and resources about the regulation of the profession of psychology in British Columbia: <http://www.collegeofpsychologists.bc.ca>.

The College is committed to meeting its public protection mandate with professionalism, objectivity, transparency, accountability, stakeholder involvement/participation, and clear communication.

Questions about this report or other College publications or activities are invited in writing to the College.

2013 BOARD, COMMITTEE MEMBERS, REGULATORY SUPERVISORS, ORAL EXAMINERS, AND NEW REGISTRANTS

BOARD

John Carter, Ed.D., R.Psych.
Michael Elterman, M.B.A., Ph.D., R.Psych.,
Henry Harder, Ed.D., R.Psych., Chair
Jenelle Hynes, Public Member
Russell King, Psy.D., R.Psych.

Leora Kuttner, Ph.D., R.Psych.
Lisa J. Seed, Public Member (04/13)
J. Dean Readman, Public Member, Vice-Chair
Hendre Viljoen, Ph.D., R.Psych.

DISCIPLINE COMMITTEE

Santa Aloj, Public Member
Daniel Fontaine, Public Member
John Carter, Ed.D., R.Psych., Chair
Brenda Kosaka, Ph.D., R.Psych.

Phillipa Lewington, Ph.D., R.Psych.
Jenelle Hynes, Public Member
Ingrid Söchting, Ph.D., R.Psych.
Janet Strayer, Ph.D., R.Psych.
Cheryl Washburn, Ph.D., R.Psych.

INQUIRY COMMITTEE

Kirk Beck, Ph.D., R.Psych.
Emily Chu, Public Member (from 09/12)
Anthony Dugbartey, Ph.D., R.Psych.
B. Lee Grimmer, Ph.D., R.Psych.
Lindsey Jack, Ph.D., R.Psych.

Sandy James, Public Member
Marlene Moretti, Ph.D., R.Psych. (to 11/13)
J. Dean Readman, Public Member
Hendre Viljoen, Ph.D., R.Psych., Chair

PATIENT RELATIONS COMMITTEE

Michael Elterman, M.B.A., Ph.D., R.Psych.
Lisa J. Seed, Public Member

Jenelle Hynes, Public Member, Chair

QUALITY ASSURANCE COMMITTEE

Russell King, Psy.D., R.Psych., Chair
Kirk Beck, Ph.D., R.Psych.
Sandra Clark, Ph.D., R.Psych.
Henry Hightower, Public Member
Cathy Costigan, Ph.D., R.Psych. (from 12/13)

Donna Paproski, Ph.D., R.Psych.
Joan Perry, Public Member
Michel Regev, Ph.D., R.Psych. (to 11/13)
Lindsay Thomas, Ph.D., R.Psych. (from 5/13)
Lois Toms, Public Member (from 5/13)

REGISTRATION COMMITTEE

Michael Elterman, MBA, Ph.D., R.Psych. (Chair)
Kenneth Cole, Ph.D., R.Psych.
Darcy Cox, Psy.D., R.Psych.
Marion Ehrenberg, Ph.D., R.Psych.
Marguerite Ford, Public Member

Jenelle Hynes, Public Member
Marina Navin, Public Member
Cheryl Washburn, Ph.D., R.Psych.
Sheila Woody, Ph.D., R.Psych.

REGULATORY SUPERVISORS 2013

Sandra Clark, Ph.D., R. Psych.
Cheryl Bradley, Ph.D., R.Psych.
Cinny Bubber, Ph.D., R. Psych.
Jeff Carr, Ph.D., R.Psych.
Cathy Costigan, Ph.D., R.Psych.
Marion Ehrenberg, Ph.D., R.Psych.
Michael Joschko, Ph.D., R.Psych.

Bill Koch, Ph.D., R.Psych.
Mary Korpach, Ph.D., R.Psych.
Ann Pirolli, Ph.D., R.Psych.
Anneliese Robens, Ed.D., R. Psych.
Marsha Runtz, Ph.D., R.Psych.
Alan Smitton, Ph.D., R.Psych.
Cindy Weisbart, Psy.D., R. Psych.

ORAL EXAMINERS 2013

Victoria Alfonso, Ph.D., R.Psych.
Verna-Jean Amell, Ph.D., R.Psych.
Nicole Aubé, Ph.D., R.Psych.
Mark Bailey, Ph.D., R.Psych.
Jeffrey Ballou, M.Ed., R.Psych.
Deborah Bell, Ph.D., R.Psych.
Rishi Bhalla, Ph.D., R.Psych.
Lee Cohene, Ph.D., R.Psych.
Robert Colby, M.S., R.Psych.
Susan Cross, Ph.D., R.Psych.
Timothy Crowell, Psy.D., R.Psych.
Maureen Godfrey, Ph.D., R.Psych.
Grace Hopp, Ph.D., R.Psych.
Mel Kaushansky, Ph.D., R.Psych.
Margaret Kendrick, Ph.D., R.Psych.
Maureen Whittall, Ph.D., R.Psych.

Brenda Kosaka, Ph.D., R.Psych.
Ronald Laye, Ph.D., R.Psych.
Jane McEwan, Ph.D., R.Psych.
Martin Phillips-Hing, Ph.D., R.Psych.
Susanne Schibler, Ph.D., R.Psych.
Whitney Sedgwick, Ph.D., R.Psych.
Meagan Smith, Ph.D., R.Psych.
Ingrid Söchting, Ph.D., R.Psych.
Sujatha Srikameswaran, Ph.D., R.Psych.
Harry Stefanakis, Ph.D., R.Psych.
Anneliese Robens, Ed.D., R.Psych.
Barbara Rosen, Ph.D., R.Psych.
John Wagner, Ph.D., R.Psych.
Larry Waterman, Ph.D., R.Psych.
Rene Weideman, Ph.D., R.Psych.

NEW REGISTRANTS 2013

Paul Raymond Albert, M.A., R. Psych.
Shannon Eileen Barnsley, Ph.D., R. Psych.
Mollie Elisabeth Bates, Ph.D., R. Psych.
Dagmar Bernstein, Ph.D., R. Psych.
Jennifer Susanne Coelho, Ph.D., R. Psych.
Catherine Currell, Ph.D., R. Psych.
Loray Daws, Ph.D., R. Psych.
Deborah Ellen Deeter, M.Sc., R. Psych.
Eva Christine Buschmann DeHaas, Ph.D., R. Psych.
Amrit K. Dhariwal, Ph.D., R. Psych.
Brenda (Yaari) Dyer, Ph.D., R. Psych.
Vivian Joy Dzedzora, Ph.D., R. Psych.
Glen Murray Edwards, Ph.D., R. Psych.
Jill Etmanskis, Ph.D., R. Psych.
Alexander Murray Ferguson, D. Psych., R. Psych.
Alexander Murray Firer, Antanina, Psy.D., R. Psych.
Brenda Ruth Fitzner, M.A., R. Psych.
Kristen Liane Frampton, Ph.D., R. Psych.
Heather Grace Fulton, Ph.D., R. Psych.
Janine Virginia Giannelli, Ph.D., R. Psych.
Emilie Giguere, M.A., R. Psych.
Alanaise Goodwill, Ph.D., R. Psych.
Annie Yi-Cheng Hsieh, Ph.D., R. Psych.
Nalini Elizabeth D. Joneja, Clin. Psychol., R. Psych.
Anusha Kassan, Ph.D., R. Psych.
Kimberly Anne Lane, Ph.D., R. Psych.
Shawnda Christine Lanting, Ph.D., R. Psych.
Kim Fredrick Maertz, Ph.D., R. Psych.
Vaughan Marshall, Ph.D., R. Psych.

Lindsay Catherine Mathieson, Ph.D., R. Psych.
Kristen McFee, Ph.D., R. Psych.
Elisabeth Iris Melsom, Ph.D., R. Psych.
Erin Christina Moon, Ph.D., R. Psych.
Marci Dawn Moroz, M.A., R. Psych.
Monica Orendain, Ph.D., R. Psych.
Kristine Marie Pahl, Ph.D., R. Psych.
Jamie Sirish Patel, D.Psych., R. Psych.
Pamela F. Patterson, Ph.D., R. Psych.
Carey Grayson Penner, Ph.D., R. Psych.
Erika Kathleen Penner, Ph.D., R. Psych.
Daniel Joseph Reilly, M.Ed., R. Psych.
Lexcie Irene Richies, M.A., R. Psych.
Elisabeth Saxton, Psy.D., R. Psych.
Michael David Sheppard, Ph.D., R. Psych.
Colette M. Smart, Ph.D., R. Psych.
Linda Diane Smart, M.A., R. Psych.
Elisabeth Mary Stewart, M.Ed., R. Psych.
Tina Feng-Ting Su, Ph.D., R. Psych.
Kausar Suhail, Ph.D., R. Psych.
Jane Chang Sun, Ph.D., R. Psych.
Jing Ee Tan, Ph.D., R. Psych.
Iris Torchalla, Dr. rer. Nat., R. Psych.
Jodi Leanne Viljoen, Ph.D., R. Psych.
Delwynne David Windell, D Litt et Phil, R. Psych.
Kyla Marie Yaskowich, Ph.D., R. Psych.
Mandy Lynn York, M.Sc., R. Psych.
Susan Jennifer Young, M.Ed., R. Psych.

REPORT FROM THE CHAIR

I am honoured to have completed a second year as Chair of the Board of the College of Psychologists of British Columbia for the 2013 year and to be associated with the highly motivated and engaged individuals who comprise our Board, Staff and Committees in meeting the regulatory challenges of the past year.

Information Meetings Information meetings were held throughout the province during 2013. I again take this opportunity to remind registrants of the College's policy of providing an "information meeting by request" to any ten or more registrants, reflecting the Board's commitment to giving registrants the direct opportunity to be informed and to participate in discussions regarding the regulation of the profession in British Columbia. Key topics in all of the information meetings continued to be the College's proposed general and registration bylaws, revisions to the Code of Conduct, collaborative care and the integration of psychology into primary care, and other ongoing challenges in professional regulation including the Health Professions Review Board and the impact of trade agreements.

Annual General Meeting The Annual General Meeting for the 2012 year was held in Vancouver on May 23, 2013. A video link was provided to Victoria, and registrants were also able to participate and view the meeting via webcast. The continuing competency presentation was by the Honourable Dr. Moira Stilwell, Member of the Legislative Assembly on the topic of "Psychology and Primary Care: Perspectives from a politician and a physician". Dr. Stilwell has served as Minister of Advanced Education as well as Minister of Social Development. We were pleased again to note the high rate of participation in the AGM and continuing competency presentation, with approximately 25% of all registrants participating either in person or via webcast.

Health Professions Review Board (HPRB) There was a total of 25 Inquiry matters open before the HPRB at some point during 2013. There was one Registration matter before the HPRB in 2013. Decisions and policies of the HPRB are available on its website: www.hprb.gov.bc.ca. The College informs complainants and applicants of their rights with regard to the HPRB. The College also continues to provide registrants with information regarding the functioning of the HPRB and their responsibilities in dealing with this authority. Please see the full summary of HPRB matters in the Registrar's report.

College Workshops Work continues on development of the registrant workshop which is expected to be available to registrants in the 2014 and 2015 year. The workshop has three specific objectives: 1. Ensuring registrants are aware of regulatory documents and obligations; 2. Enhancing registrant understanding of changes in clinical practice in the context of collaborative care and the current healthcare climate, 3. Sharing the cumulative wisdom of the Inquiry Committee and translating that wisdom into best practice. Registrants are encouraged to read the Chronicle and other College announcements for more information on this important initiative.

Code of Conduct Changes

Proposed changes to the Code of Conduct were posted for registrant comment in January 2013. Changes were reviewed in the October 2013 issue of the Chronicle, including further proposed changes which will be posted in early 2014 for comment. Thank you to those registrants who chose to provide comment and feedback. The Board anticipates enactment of these changes along with the posted changes to the general and registration bylaws which have been posted since December 2012, pending government approval.

Report on the Family Violence Workshop

The College was pleased to host this important workshop on November 21, 2013. The workshop was designed to ensure registrants were aware of the new *Family Law Act*. The workshop was very well attended and positively experienced by the psychologists and social workers who were present. In addition to the excellent presentation lead by Dr. Peter Jaffe, a registered psychologist in Ontario and acknowledged expert in the field of family violence, we were delighted to have The Honourable Donna J. Martinson, Q.C., LL.M. and Retired Justice of the British Columbia Supreme Court, provide opening comments and a paper on the topic of the new *Family Law Act* and best practice issues in parenting assessments. The workshop was co-sponsored by the BC Psychological Association,

the BC College of Social Workers and the BC Association of Social Workers. The College appreciated the opportunity to collaborate with our colleagues in Social Work and looks forward to hosting future workshops that provide a similar opportunity for collaboration with related disciplines.

Strategic Planning The Board reviews the Strategic Plan and conducts strategic planning on an ongoing basis. A strategic planning meeting was scheduled for January 2014. A copy of the Strategic Plan is available on the College website.

Participation with Local, National, and International Organizations The College is an active participant in various regulatory organizations including the newly named Health Profession Regulators of British Columbia (HPRBC; formerly called the Health Regulatory Organizations (HRO). Our Registrar continued to serve as one of the four members of the Governance Group of the HPRBC, this year. The College plays a very active role in the Association of Canadian Psychology Regulatory Organizations (ACPRO) of which our Registrar is Vice-Chair. The College also continues to be an active member of the Association of State and Provincial Psychology Boards (ASPPB) and participated in ASPPB meetings in April in Halifax (attended by both our Registrar and Public Member Jenelle Hynes), and in Las Vegas (attended by our Deputy Registrar) in October. The College also remains connected with the Association of Executive Directors and Registrars of BC.

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. In particular, the College appreciates the wisdom and professionalism of Mr. Kensi Gounden, who regularly provides consultation to the College's Inquiry Committee, and to Mr. Jason Herbert, who provides the College with his special expertise in the areas of bylaw development and registration matters and also represents the College before the Health Profession Review Board.

Practice Support The Practice Support Service continues to be most ably staffed by Susan Turnbull, Ph.D., R.Psych. and the continued positive feedback and high usage of this service continues to be a source of satisfaction to the Board. This service is seen by the Board as enhancing the College's ability to meet its mandate of public protection by offering registrants assistance in contemplating novel practice issues and ethical dilemmas through the lens of governing legislation, including the Code of Conduct. This service continues to be offered free of charge to registrants. The objectives and parameters of this Service are delineated on the College website. Please review the summary information on this Service which is included in the Registrar's Report in this Annual Report.

Bylaw Development The proposed bylaws were posted on the website for the official required notification period in December 2012. Implementation dates will be announced to registrants when known. The proposed bylaws contain important initiatives and changes reflecting the College's active efforts to address government imperatives for mobility and collaborative health care.

Website The completely online renewal process was a notable success. Additional online initiatives remain under development. In particular, the Board decided that the Fall 2013 Chronicle would be the last paper version of the newsletter. An email and online version of the newsletter is under development.

In closing, it was a pleasure and privilege to serve as the Chair of the Board for 2013 and I give my best wishes to Dr. Russell King who will take over in this role in January 2013.

Respectfully submitted,
Henry Harder, Ed.D., R.Psych.,
Chair of the Board 2013

COMMITTEE REPORTS

DISCIPLINE COMMITTEE REPORT

There were no hearings of the Discipline Committee in 2013.

Respectfully submitted, John Carter, Ed.D., R.Psych., Chair,
Discipline Committee 2013

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,
Jenelle Hynes, Chair,
Patient Relations Committee 2013

INQUIRY COMMITTEE REPORT

The Inquiry Committee (IC) dealt with another year with a high number of complaints. A total of 87 complaint files were open for at least some part of 2013 and were at various stages of investigation at any given point in time during the year. This number includes the 51 new complaints received during 2013. As of December 31, 2013, 47 of the 87 open files had been closed. Files closed during 2013 are summarized in Table 1 below, along with the nature of the decisions of the IC in closing the complaint files. Please review the Registrar's Report for a comprehensive description and breakdown of 2013 complaint investigations and resolutions.

Table 1: Files Closed During 2013 (N=47)

Closing Reason	Number	%
Letter of Undertaking or Resolution Agreement	22	47
Resolved	2	4
Insufficient Evidence	16	34
Decision Not to Proceed (no jurisdiction, withdrawn, vexatious or frivolous)	7	15
Total	47	100

It is an honour to work closely with the five other psychologists and three public members on this very dedicated and hardworking committee, along with our legal counsel, Mr. Gounden, and our staff.

Respectfully submitted,
Hendre Viljoen, Ph.D., R.Psych.,
Chair, Inquiry Committee 2013

REGISTRATION COMMITTEE REPORT

Mobility and Access to the Profession In accordance with the *Labor Mobility Act*, reciprocal applications from psychologists registered elsewhere in Canada were received and processed. Approximately a third of all applications are from reciprocal applicants. This percentage has remained stable over the last two years. The Registration Committee remains committed to processing these applications in a timely fashion and is pleased to report that it is typical for reciprocal applicants who have submitted a complete application file to be reviewed and ready to take the Written Jurisprudence Examination within 3 months of applying. Many also achieve registration within that 3 month time period. Greater detail regarding this particular subset of applicants is provided in later sections of this Report.

Proposed Changes to Bylaws In 2010, the Committee developed proposed changes to classes of registration responsive to the new legislative challenges related to mobility and other public policy trends. In December 2012, the Ministry of Health approved our official posting of these proposed revisions. Changes relate to both general bylaws which pertain to general College functioning and operations, and registration bylaws, which speak to the College's proposal on several new classes of registration. As discussed in the Chronicle, at AGMs and information meetings, these proposals retain the doctoral entry standard for registration as a registered psychologist and the creation of several specific classes designed to ensure work continuity for those individuals currently working as psychologists under existing exemptions.

Since the College's proposed bylaw amendments were originally posted for public comment in 2012, the College has been engaged in discussion with the Ministry of Health about when the amendments may be finally approved and brought into force. This timing has not yet been resolved, largely due to the election and competing priorities. Thus implementation of these bylaw amendments has been delayed significantly beyond the College's original expectations, and it remains unclear when the bylaw amendments will eventually be brought into force.

Proposed Changes to the *Psychologists Regulation* For over a decade, the College has been actively engaging with the provincial government with regard to the recommendation of the 2001 “*Safe Choices*” report for removal of the exemptions stipulated in the *Psychologist’s Regulation*. These exemptions pertain to individuals working in schools, health authorities, universities and other government settings, exempting them from registration with the College yet granting entitlement to use of the title “psychologist”. Discussions in 2012 led to a Ministry of Health proposal to remove particular sections of the existing exemptions. The remaining clause, pertaining to school psychologists, continues to be a subject of ongoing discussions with the Ministries of Health and Education.

Over the past several years the College has held meetings with various stakeholders potentially affected by the removal of the exemptions (e.g., academics, school psychologists, psychology practitioners in corrections) and encouraged these groups to share with the College and government, their questions and concerns regarding changes to the regulation. It is expected that any revisions to our regulation will be coordinated with the implementation of our new bylaws which were developed to ensure that currently exempt individuals can continue their current practice. In the interest of the College’s public protection mandate, the College looks forward to bringing all currently exempt psychology practitioners in British Columbia under its regulatory authority.

Foreign Qualifications Recognition (FQR).

Substantial Equivalence The matter of substantial equivalence, the obligation to review whether other education, training and experience is substantially equivalent to a particular registration requirement, is particularly relevant to the assessment of foreign trained applicants as training models differ across countries. The assessment of substantial equivalence has been a subject of significant interest amongst the Canadian psychology regulators and the Association of Canadian Psychology Regulatory Organizations (ACPRO) obtained Human Resources and Skills Development Canada (HRSDC) funding in order to study provincial assessment practices in this regard. In February 2013, the members of ACPRO met to discuss the results of this national review and determined there was a need to work toward a national standard for registration/licensure for practicing the profession in Canada. The *ACPRO National Licensure Standard Development Task Force* was formed and met several times throughout the year. The task force will continue its work in 2014 with our College being an active participant in this work.

Competency Based Supervision In follow up to a previous provincially funded (Ministry of Jobs, Tourism and Skills Training) project on the topic of developing a competency based supervision framework, the College was grateful to receive additional funding to continue this work in 2013. The work resulted in the creation of a supervision manual, assessment tools and proposed pilot training modules for supervisors. The Committee looks forward to the continued development of these tools and their eventual implementation.

I would like to thank the members of the profession and public who served on this Committee in 2013. Thanks also to the oral examiners and regulatory supervisors for their vital service to the Committee. Finally, on behalf of the Committee, I would like to acknowledge the College staff and their dedication and careful implementation of registration policies and decisions. I also wish to thank them for their competent management of the many details and important decisions related to applications for registration, renewal and other registrant matters.

Respectfully submitted,
Michael Elterman, Ph.D., R.Psych., Chair, Registration Committee 2013

QUALITY ASSURANCE COMMITTEE REPORT

In addition to the annual review of the Continuing Competency Program, the Committee initiated a number of important projects. Below is a summary of the Committee's work in 2013.

Continuing Competency Program Review The audit for the 2012 year was completed by the Committee by April, 2013. In a number of cases the Committee sought additional information from registrants to clarify their activities. As a result of the audit, a small number of individuals were required to forward their logs again for the following year. Overall, the Committee was pleased with the quality of continuing competency activities reported by the registrants selected in the random audit. As some registrants had difficulty describing the relevance of certain continuing competency activities to the practice of psychology, the Committee contemplated the introduction of a continuing competency plan.

The Committee also reviewed the Continuing Competency programming of other Colleges regulated under the *HPA* in considering revisions to the current program. It was noted that, consistent with government expectation and public policy shifts, other Colleges are exploring or have already implemented direct assessments of registrant competence (e.g., examinations, office inspections, etc). The Committee reviewed and discussed several of these direct assessment programs, including the one presently in place at the *College of Psychologists of Ontario*.

Code of Conduct Proposed revisions to the *Code* were posted for public comment in early 2013. The original posting then underwent several additional edits as described in 2013 editions of the *Chronicle* and at various registrant information meetings. Registrants should check the website for the latest posted revision, and log onto the registrant portal to review and submit any feedback to the College.

Workshops

Family Violence: The Quality Assurance Committee was pleased to sponsor the College workshop on Family Violence which took place on November 21, 2013. The workshop was designed to ensure registrants were well informed about the new *Family Law Act*. The workshop was very well attended and feedback from attendees was very positive. Dr. Peter Jaffe, a registered psychologist in Ontario, led the workshop. As well, The Honourable Donna J. Martinson, Q.C., LL.M. and Retired Justice of the British Columbia Supreme Court, provided opening comments and a paper on the topic of the new *Family Law Act* and best practice issues in parenting assessments.

2014 Workshop: As set out in the Chair's report, work continued on the development of the registrant workshop which is expected to be available to registrants in the 2014 and 2015 year. The workshop has three specific objectives: 1. Ensuring registrants are aware of regulatory documents and obligations; 2. Enhancing registrant understanding of changes in clinical practice in the context of collaborative care and the current healthcare climate, 3. Sharing the cumulative wisdom of the Inquiry Committee and translating that wisdom into best practice.

Practice Support Service Since its inception in March of 2010, the Practice Support Service has received a very positive and active response from registrants, with a total of 715 queries through December 31, 2013. Please see the Registrar's Report for more information. The Committee wishes to thank the registrants who took the time to provide feedback to the Committee and the Board with regard to this service which continues to be a well utilized and helpful resource to registrants.

Respectfully Submitted,
Russell King, Psy.D., R.Psych., Chair, Quality Assurance Committee 2013

FINANCE COMMITTEE REPORT

Audited financial statements for the 2013 year are found at the back of this Annual Report. Table 2 provides a comparison of College expenses over the past 5 years.

Table 2: Comparative Expenses

YEAR	WAGES AND BENEFITS		ROUTINE STATUTORY EXPENSES (including any costs associated with citations for, preparation of or holding extraordinary hearings).		GENERAL OPERATING EXPENSES		TOTAL EXPENSES	
	Amount	%	Amount	%	Amount	%	Amount	%
2009	632,320	50	206,723	16	421,937	34	1,260,140	100
2010	660,870	52	204,277	17	415,859	32	1,281,006	100
2011	679,369	47	293,899	20	484,013	33	1,457,281	100
2012	637,044	41	392,154	25	519,148	34	1,548,346	100
2013	642,732	44	336,501	23	453,613	32	1,438,846	100

As documented in the table, there was a notable decrease in routine statutory expenses and general operating expenses for 2013, contributing to the lower overall expenses for the College for 2013. This decrease may represent a normalization of HPRB expenses which were particularly high in 2012, during which a disproportionately high number of HPRB matters were active as a result of some delays put in place by the HPRB, in addition to a higher than normal amount in 2012 spent on processing several FOI requests.

John Carter, Ed.D., R.Psych., Chair,
Finance Committee 2013

REGISTRAR'S REPORT

Below is the Registrar's Report on the activities of the College for the year 2013. This report is divided into three main sections:

- I. **Registration/Application Matters** *This section provides a description of the College Register for 2013, a summary of application activity, and a report on examinations.*
- II. **Complaint and Investigative Matters** *The second section provides a descriptive and statistical analysis of complaint and HPRB matters.*
- III. **Administrative Matters** *The third section summarizes activities of the Practice Support Service, administrative activities related to external relationships, and our obligations under the Ombudsperson and Freedom of Information and Protection of Privacy Acts.*

I. REGISTRATION/APPLICATION MATTERS

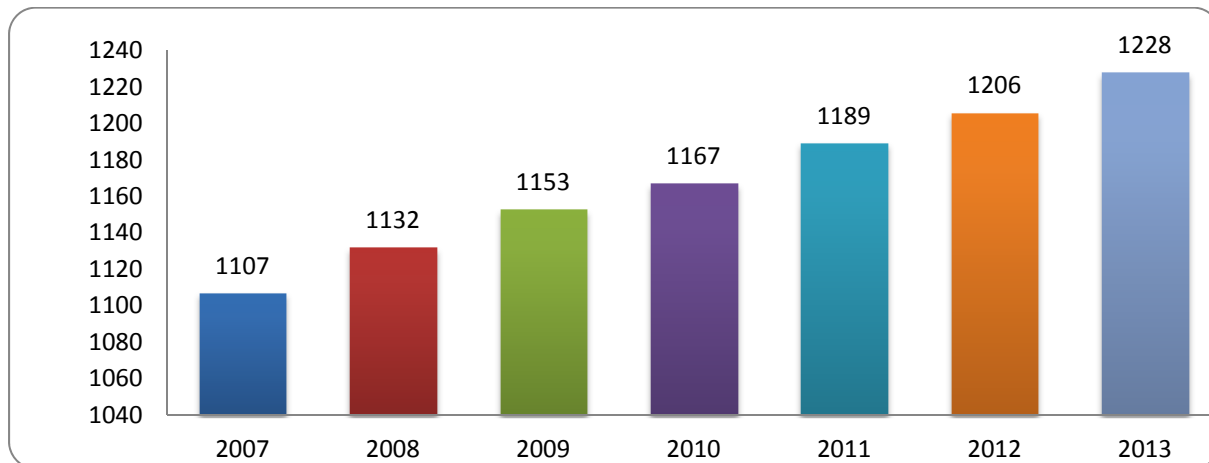
This section is divided into 3 sections as follows: 1) The College Register 2013, 2) Summary of Application Activity and 3) Examinations.

1. **The College Register 2013** As of December 31, 2013, the College Register listed a total of 1228 registrants. The College was officially notified of the death of one registrant during the year.

Table 3: The College Register as of December 31, 2013

Register Status on December 31, 2013	Total
Full Registration	1126
Limitations as per Inquiry Committee (IC)	11
Limitations as per Registration Committee (RC)	11
Limitations by Category - Out-of-Province	32
Limitations by Category - Non-Practicing	10
Limitations by Category – Retired	32
Limitations by Category – Retired and as per IC	3
Limitations as per Inquiry Committee and Registration Committee	1
Suspended as per Inquiry Committee	1
Other	1
Total	1228

The College has maintained a relatively stable number of registrants with a modest increase over the past 7 years. This increase is illustrated in Figure 1, depicting the total number of registrants over the years 2007-2013.



As shown in the table below, a total of 57 new registrants were added to the Register in 2013. Comparison data from the previous year is also provided.

Regular applicants are typically seeking registration for the first time. Reciprocal applicants hold full registration in another Canadian jurisdiction and Mobility applicants hold a license to practice psychology in a US jurisdiction.

Table 4: New Registrants by Application Category

2012				2013			
Regular	Reciprocal	Mobility	Total	Regular	Reciprocal	Mobility	Total
24	21	8	53	34	22	1	57

2. Summary of Application Activity Table 5 below summarizes the application activities at the College during the 2013 year, along with comparison data from the previous year. As shown in the table, a total of 60 applications were received during the 2013 year. Of these, 57% (n=34) were Regular applications. 33% percent (n=20) were Reciprocal applications and 7% (n=4) were Mobility applications.

Table 5: Application Activity Summary 2012-2013

	2012					2013				
	Reg.	Temp	Recip.	Mobil.	Total	Reg.	Temp	Recip.	Mobil.	Total
# of applications rec'd	34	1	20	5	60	34	2	20	4	60

3.Examinations All regular applicants are required to complete three examinations as part of the application process: the Examination for Professional Practice in Psychology (EPPP), the Written Jurisprudence Examination (WJE) and the Oral Examination (OE). Reciprocal and Mobility applicants are required to successfully complete the WJE.

Table 6: Number of Examinations Written

	2008	2009	2010	2011	2012	2013
Number of EPPP Examinations	32	24	26	31	29	46
Number of Written Jurisprudence Examinations	62	53	44	31	61	52
Number of Oral Examinations	41	32	25	52	26	43

The EPPP was taken 46 times in 2013. Of the applicants taking the exam for the first time (n=37), 33 (89%) passed. The minimum required passing score is 500/800 (scaled score). The average passing score for first-time test takers in 2013 was a scaled score of 624/800 (range 514-763). Nine (9) of the 46 exams were re-takes and all applicants sitting for re-takes obtained passing scores.

As in past years, the WJE was held at the College offices on a monthly basis. Fifty-one (51) applicants passed on their first attempt. One (1) applicant was taking the exam for the second time and successfully passed.

The College also conducts the Oral Examination on site. In 2013, 43 examinations took place. Of the applicants taking the exam for the first time (n=40), 33 (83%) fully passed and were added to the register without limitations. The other candidates (n=7) elected to either a) retake the examination or b) accept limitations on their practice for a short period of time in order for them to address the remediable areas of concern. Those who elected to re-take the examination fully passed on their second attempt.

II. COMPLAINT AND INVESTIGATIVE MATTERS

This section contains information about complaints received in the year 2013 as well as a report on all complaints closed during 2013. Included are descriptions of aspects of the complaint investigation process and a sampling of complaints received during the year. This section is divided into the following topic areas:

1. Complaint file status as of December 31, 2013
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 2013 and comparison with previous years
6. Components of the complaint investigation process
7. Letters of Undertaking/Resolution Agreements
8. Summary of a sample of complaints in 2013
9. Complaints per year and number of registrants with complaints
10. Summary of Final Decisions of the Health Professions Review Board

1. Complaint file status as of December 31, 2013

Since the College of Psychologists came under the *Health Professions Act (HPA)*, a total of 722 new complaints have been received, including 51 received during 2013.

Complaints received in 2013 (N=51): Fifteen (15) of the complaints received in 2013 were also closed in 2013, leaving a total of 36 complaints received in 2013 still open on December 31, 2013. Two (2) complaints opened by the Inquiry Committee on its own motion in 2012 also remained open as of December 31, 2013.

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 7 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 2013 was Assessment Procedures (n=14). 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=248). General standards for competency was the next most frequent primary allegations in 2013 (n=12), which is also the second most common allegation overall (n=112). Many of the cases in which competency is the primary allegation involve an assessment situation of some kind.

Table 7: Primary Allegation in Complaints Received 2000-2013

Primary allegation	2000-2011		2012		2013		Total	
	#	%	#	%	#	%	#	%
General Standards for Competency (CC 3.0)	88	14%	12	21%	12	24%	112	16%
Informed Consent (CC 4.0)	26	4%	1	2%	3	6%	30	4%
Relationships-Clients (CC 5.0)	56	9%	2	3%	9	18%	67	9%
Relationships-Work (CC 5.0)	10	2%	1	2%	0	0%	11	2%
Relationships-Dual Roles (CC 5.0)	26	4%	1	2%	1	2%	28	4%
Confidentiality (CC 6.0)	26	4%	1	2%	4	8%	31	4%
Professionalism (CC 7.0)	92	15%	12	21%	5	10%	109	15%
Provision of Services (CC 8.0)	19	3%	0	0%	0	0%	19	3%
Rep. of Services/Credentials (CC 9.0)	3	0%	0	0%	0	0%	3	0%
Advertising/Public Statements (CC 10.0)	18	3%	2	3%	1	2%	21	3%
Assessment Procedures (CC 11.0)	218	36%	16	28%	14	27%	248	34%
Fees (CC 12.0)	10	2%	1	2%	0	0%	11	2%
Maintenance of Records (CC 13.0)	1	0%	0	0%	0	0%	1	0%
Security/Access to Record (CC 14.0)	7	1%	5	9%	0	0%	12	2%
Compliance with Law (CC 18.0)	4	1%	3	5%	0	0%	7	1%
Application (CC 2.0)	2	0%	0	0%	0	0%	2	0%
No Standard Applicable	7	1%	1	2%	2	4%	10	1%
Total	613	100	58	100	51	100	722	100

b. Complaint Context Table 8 reports on the context within which complaints occurred. As in the past, in 2013 a substantial proportion (n=22; 43%) of complaint concerns arose in the context of an assessment, such as a custody and access proceeding or a correctional assessment.

Table 8: Complaint Context for Complaints Received 2000-2013

Complaint Context	2000-2011		2012		2013		Total	
	#	%	#	%	#	%	#	%
Assessment	341	56%	26	45%	22	43%	389	54%
Consultation	8	1%	1	2%	3	6%	12	2%
Intervention	147	24%	12	21%	15	29%	174	24%
Regulatory Compliance	29	5%	2	3%	4	8%	35	5%
Other	88	14%	17	29%	7	14%	112	16%
Total	613	100	58	100	51	100	722	100

c. Area of Practice Table 9 below presents information on the area of practice within which complaints occurred. In 2013, 6% of the complaints received were in the custody and access sub-area within clinical psychology, and 45% were in the broader clinical psychology area.

Table 9: Complaint - Area of Practice in Complaints Received 2000-2013

Complaint: Area of Practice	2000-2011		2012		2013		Total	
	#	%	#	%	#	%	#	%
Clinical Psychology	253	41%	21	36%	23	45%	297	41%
Custody and Access	161	26%	6	10%	3	6%	170	24%
Counselling Psychology	58	9%	5	9%	5	10%	68	9%
Forensic /Corrections	53	9%	2	3%	8	16%	63	9%
Industrial /Organizational	2	0%	0	0%	0	0%	2	0%
Neuropsychology	26	4%	5	9%	1	2%	32	4%
Rehabilitation Psychology	14	2%	0	0%	5	10%	19	3%
Research /Academic	4	1%	0	0%	1	2%	5	1%
School Psychology	11	2%	2	3%	1	2%	14	2%
N/A	31	5%	17	29%	4	8%	52	7%
Total	613	100	58	100	51	100	722	100

d. Complainant Type As indicated in Table 10 below, 22 (43%) of the complaints received in 2013 were filed directly by clients of respondents. The Inquiry Committee may open files on its own motion based on information provided to it, and did so on a number of occasions this year. Files were opened based upon concerns that were brought to the Committee's attention through a number of other means.

Table 10: Complainant Type in Complaints Received 2000-2013

	Complainant Type	2000-2011		2012		2013		Total	
		#	%	#	%	#	%	#	%
PUBLIC	Client - 3rd Party	146	24%	13	22%	3	6%	162	22%
	Client – Direct	182	30%	20	34%	22	43%	224	31%
	Client – Relative	80	13%	2	3%	7	14%	89	12%
	Colleague	90	15%	10	17%	10	20%	110	15%
	Other	43	7%	7	12%	4	8%	54	7%
IC	Inquiry Committee	72	12%	6	10%	5	10%	83	11%
	Total	613	100	58	100	51	100	722	100

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. As noted above, 5 complaint investigations were opened by the Inquiry Committee in 2013.

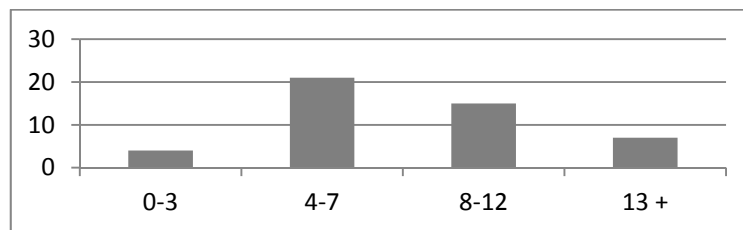
4. Length of Time to Close Files For complaints closed in 2013 (N=47), the number of months required to investigate and/or close a file ranged from 3 to 19 months. Table 11 below contains the average length of time to close complaint files for 2011, 2012, and 2013.

Table 11: Average Time (in months) to Close Files for Complaints Closed 2011-2013

Year Complaint Closed	2011	2012	2013
Mean Length of Time to Close File	6.76 months, N=42	6.90 months, N=66	8.32 months, N=47

As depicted in the Figure below, the majority of complaints closed in 2013 were closed between 4-12 months from receiving the initial complaint. Eighty-five percent of the complaints that were closed in 2013 were closed within 12 months (n=40) of receipt. This is an important achievement given the complexity and volume of typical complaint files.

Figure 2: Average Time (in months) to Close Files in 2013 (N=47)



5. Complaint File Closing Reasons Nearly half of the complaints closed in 2013 were dismissed because of insufficient evidence of a breach of the *Code of Conduct* or because they were withdrawn by the complainant (and did not present public protection concerns). For complaints received and closed in 2013, 51% were resolved by an undertaking or agreement with the respondent, or by some action offered by the respondent satisfying the Committee's concerns in the matter.

Table 12: Closing Reasons for Complaints Closed 2010-2013

		Year Complaint Received							
Closing Category	Closing Reason	2011		2012		2013		Totals	
		#	%	#	%	#	%	#	%
Dismissed - lack of evidence; not proceeded upon; withdrawn; admin. closure; no jurisdiction	Decision Not to Proceed	3	7%	16	24%	7	15%	26	17%
	Insufficient Evidence	24	57%	19	29%	16	34%	59	38%
	Subtotal	27	64%	35	53%	23	49%	85	55%
Voluntary Resolution	Letter of undertaking or Consent Agreement	15	36%	26	39%	22	47%	63	41%
	Resolved	0	0%	3	5%	2	4%	5	3%
	Subtotal	15	36%	29	44%	24	51%	68	44%
Resigned/ Cancelled	Resigned/Cancelled	0	0%	2	3%	0	0%	2	1%
Totals		42	100%	66	100%	47	100%	155	100%

6. Components of the Complaint Investigation Process Components of the complaint investigation process include resolution meetings, extraordinary hearings, and citations and discipline hearings, described below.

a. Resolution Meetings Resolution meetings provide an effective means for resolving complaint matters.

b. Extraordinary Hearings Sometimes concerns arise which suggest that immediate action on the part of the Inquiry Committee such as a restriction on practice or license suspension. There is no testing of evidence at an extraordinary hearing. Rather, a decision is made on whether the available evidence, on its face, supports extraordinary 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. No extraordinary hearings were held in 2013.

c. Discipline Hearings and Citations In contrast to an extraordinary hearing, a hearing of the Discipline Committee 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 2013.

7. Letters of Undertaking/Resolution Agreements. Table 13 provides a summary of Letters of Undertaking and Resolution Agreements signed with registrants during the year 2013 as a means of bringing a complaint file to a close. A total of 18 agreements were signed in 2013 in order to resolve 22 complaints. The terms of such agreements are determined on a case by case basis and all are signed voluntarily. 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 13. Summary of Terms of Letters of Undertaking/Resolution Agreements in 2013 (N=18)

Respondent	# of Files	Primary Allegation by Code Section	Terms of Consent Agreement or Undertaking	Serious Matter*
1	1	11 – Assessment Procedures	Changes to practice	
2	1	04 – Consent	Consultation, practice review, change to practice	
3	1	11 – Assessment Procedures	Changes to practice	
4	1	03 – Competency	Consultation and change to practice	
5	4	03 – Competency	Practice review, changes to practice, full supervision	YES
6	1	03 – Competency	Changes to practice	
7	1	18 – Compliance with Law	Self-study, changes to practice	
8	1	14 – Records Security/Access	Practice review, consultation, changes to practice	
9	1	07 – Professionalism	Self-study, changes to practice	
10	1	03 – Competency	Consultation, practice review, change to practice	
11	1	05 – Relationships (client)	Letter of apology, consultation, practice review, changes to practice	
12	1	11 – Assessment Procedures	Changes to practice	
13	2	11 – Assessment Procedures / 05 – Relationships	Practice review, changes to practice, full supervision	YES
14	1	03 – Competency	Consultation, changes to practice	
15	1	11 – Assessment Procedures	Letter of apology, practice review, consultation, agreement to a reprimand	YES
16	1	11 – Assessment Procedures	Changes to practice	
17	1	11 – Assessment Procedures	Consultation, changes to practice	
18	1	11 – Assessment Procedures	Changes to practice	

*A "serious matter" means a matter which, if admitted or proven following an investigation, would ordinarily result in an order by the Discipline Committee relating to the imposition being made under section 39 (2) (b) to (e) of the *Health Professions Act*, relating to an imposition of limits or conditions on the respondent's practice; suspension of the respondent's registration; imposition of limits or conditions on the management of a respondent's practice during suspension; or cancellation of the respondent's registration.

8. Samples of Complaints Open During 2013

Below is a brief review of the main allegations raised in a sample of complaints received and closed during 2013, along with a description of the process and outcome of the complaint investigation.

One example is a complaint submitted to the College eight years after the Respondent conducted an assessment of the Complainant. The Complainant alleged a number of concerns about the report, including factual errors, procedural errors, insufficient informed consent, bias, and failure to provide continuity of care. The Respondent replied that he has no memory of the assessment and no longer has his clinical record for this file, which was destroyed in keeping with College guidelines for record retention. The Respondent described his typical assessment procedure at that time. The Inquiry Committee reviewed all of the available information and determined that there was no basis to proceed.

A second example occurred in the context of a respondent's assessment of the Complainant. The Complainant alleged that the Respondent's report contained false and inaccurate statements, the Respondent did not listen to the full range of the Complainant's symptoms, the Respondent had the Complainant complete a long questionnaire that had nothing to do with his medical issues, and that the Respondent was biased against the Complainant. In the course of reviewing the Respondent's report, the Inquiry Committee noted that the Respondent used a computer text-based search for key terms in conducting his record review rather than reviewing the record in its entirety. In resolving the complaint, the Respondent signed a Letter of Undertaking to request additional time to review voluminous files, and to consult with a senior psychologist who practices in this area to review best practices in conducting such assessments.

A third complaint occurred in the context of the Respondent providing therapy to Client A. Using the information provided to him by Client A, the Respondent wrote an opinion letter about the Complainant for Client A without having seen the Complainant. In his letter, he made a diagnosis and recommendations. The Complainant reported that she had never met the Respondent or had any contact with him prior to his submitting the opinion letter. The Inquiry Committee found that the Respondent did not meet appropriate standards when providing a diagnostic opinion. In the interest of public protection, the Respondent was required to undertake professional consultation.

A fourth complaint occurred in the context of the Respondent providing an assessment of an individual ("A") at the request of a third party. The Respondent conducted the assessment and submitted the report to the third party who then complained to the College. The Inquiry Committee had concerns that the assessment fell below minimum standards. Their concerns broadly related to competence, including concerns about informed consent, professionalism, record management, communication of opinions, limitations on opinions, working with third parties, and assessment procedures. The Respondent agreed to sign a Letter of Undertaking that included a review and supervision of various aspects of her practice.

9. Complaints per Year and Number of Registrants with Complaints

Table 14 below describes the number of registrants about whom complaints have been received since 2006. As shown in the Table, in 2013, 51 complaints were received. These 51 complaints were with regard to 47 different registrants and former registrants. Thus, some respondents were named in more than one complaint file.

Table 14: # of Complaints per year from 2006 - 2013 and # of Registrants with Complaints

Year	# Complaints (with named registrant)	# Respondents
2006	50	42
2007	50	37
2008	41	31
2009	42	32
2010	41	38
2011	69	51
2012	58	47
2013	51	47

10. Summary of Matters before the Health Professions Review Board

Table 15 below summarizes final decisions of the Health Professions Review Board to December 31, 2013.

The Review Board has the jurisdiction to evaluate whether the dispositions of the Inquiry Committee are reasonable and the investigations adequate. It is the College's experience to date that expectations on the part of complainants in bringing their concerns forward to the College are often outside the range of permissible and appropriate complaint investigation outcomes. This may also relate to the likelihood of complainants making application to the Health Professions Review Board after a completed complaint investigation, even when action was taken and the respondent psychologist made changes to their practice or other undertakings. The College continues to review means of communicating with complainants early in the complaint investigation process about the College's mandate and the range of allowable outcomes. The College also continues to make significant efforts to explain the nature of typical College complaints and the particular challenges faced by the College, in its communications with the Review Board.

The table below summarizes final decisions of the review board on 17 CPBC matters, 16 of which were with regard to complaints and one was a registration matter. Of the 16 complaint matters, as documented in the table, the disposition of the Inquiry Committee was confirmed for 14 files. For the other two files, one was sent back to the IC with directions for additional investigation consisting of an interview of the registrant. Upon completion of this interview, the IC confirmed its original decision. The complainant took the matter to the HPRB again, and the IC disposition was confirmed. For the second matter, representing one of four files that were grouped by the HPRB for administrative ease, the IC was directed to conduct an interview of a third party.

For the one registration matter, the HPRB determined that they had no jurisdiction in the matter.

Please note that the table which follows summarizes final HPRB decisions. Matters that remain open (N=4 at the end of 2013), or which were directed to mediation (N=1), or were withdrawn by the Complainant (N=2) are not included in this table.

Table 15. Summary of Final Decisions of the Health Professions Review Board on College Matters since 2009 to December 31, 2013.

	Complaint Rec'd Date	Date Closed	No. Files	Date App. for Review	Date HPRB Decision	HPRB file Status as of Dec. 31, 2013	Nature of Allegations	Rel. of HPRB Applicant to Psych. Services
COMPLAINT MATTERS								
1	June 2009	Oct 2009	1	Jan 2010	June 2012	IC DISPOSITION CONFIRMED	Assessment Procedures, Competency	Client - direct
2	June 2009	Nov. 2009	1	Jan. 2010	Dec 2013	IC DISPOSITION CONFIRMED	Assessment Procedures	Client – relative
3	Aug. 2009	Jan. 2010	1	Mar.2010	Aug2012/ Nov 2013	Back to IC with direction; direction followed; new application to HPRB; IC DISPOSITION CONFIRMED	Confidentiality; relationships – client	Client - direct
4	Apr. 2010	July 2010	1	Aug. 2010	Feb 2012	IC DISPOSITION CONFIRMED	Competency	Client - direct
5	Oct. 2010	Mar. 2011	1	Apr. 2011	Mar 2013	IC DISPOSITION CONFIRMED	Assessment procedures	Client – direct
6	Oct. 2010	Apr. 2011	4	June 2011	Apr 2013	IC DISPOSITION CONFIRMED ON THREE FILES; INTERVIEW WITH THIRD PARTY DIRECTED ON ONE FILE.	Professionalism; assess. Procedures Professionalism	Colleague
7	Mar. 2011	Sept. 2011		Oct. 2011				
8	June 2011	Sept. 2011		Oct. 2011				
9	Nov. 2011	Feb. 2012		Apr. 2012				
10	Dec. 2010	Mar. 2012	1	May 2012	May 2013	IC DISPOSITION CONFIRMED	Assessment procedures	Client – direct
11	Dec. 2010	July 2011	1	Sept. 2011	Sept 2013	IC DISPOSITION CONFIRMED	Competency; assessment procedures	Client – direct
12	Jan. 2011	Sept. 2011	1	Oct. 2011	July 2013	IC DISPOSITION CONFIRMED	Confidentiality; professionalism	Client - direct
13	Mar. 2011	Aug. 2011	1	Oct. 2011	Jan 2012	IC DISPOSITION CONFIRMED	Professionalism; confidentiality	Other
14	May 2011	Oct. 2011	1	Dec. 2011	Dec 2013	IC DISPOSTION CONFIRMED	Assessment procedures	Client - direct
15	July 2011	Mar. 2012	1	May 2012	June 2012	IC DISPOSITION CONFIRMED.	Assessment procedures; competence	Client – direct
16	Aug. 2012	Oct. 2012	1	Dec. 2012	June 2013	IC DISPOSITION CONFIRMED	Public statements	Other
REGISTRATION MATTERS								
17	n/a	n/a	1	Oct.2012	Jan 2013	No Jurisdiction	Application for Reinstatement	Former Registrant

III. ADMINISTRATIVE MATTERS

1. Ombudsperson Investigations and Request under the *Freedom of Information and Protection of Privacy Act*.

There were no requests received under the Ombudsperson Act during the 2013 year. Nine requests were received under the Freedom of Information and Protection of Privacy Act. All matters were responded to promptly and within established timelines. Of these nine requests, five were made by the same person. Four of these nine requests remained ongoing at the end of 2013.

2. Relationships with Other Regulatory Bodies The College remained actively involved with the other regulatory bodies through the Association of Canadian Psychology Regulatory Organizations (ACPRO) (Canada) and with the Executive Directors and Regulators of the Health Professions (BC – provincial), and the Association of State and Provincial Psychology Boards (ASPPB) (US and Canada). Of note is the work that took place during 2013 to develop the structure, objectives and societal status of the new Health Profession Regulators of BC (HPRBC, formerly the HRO). The creation of this new societal body represents an unprecedented level of effective collaboration among the health colleges.

3. Practice Support Service. The Practice Support Service was developed to assist registrants in considering how best to handle ethical dilemmas and practice decisions and to enhance clinical practice, consistent with the College's public protection mandate. Since its inception in March of 2010, the Practice Support Service has received a very positive and active response from registrants, with a total of 715 queries through December 31, 2013. Of these, 173 were received in 2013, the majority of which came via telephone, with a small number using the email account established for this purpose. This is a small decrease from the 2012 year in which 184 requests were received. Registrants are also able to submit inquiries via regular post or fax, although these have only occasionally been utilized. The Practice Support Service policy has continued to be refined as the service has developed. Currently, efforts are made to handle all inquiries by telephone, regardless of the modality in which the inquiry was received. The most frequent topic areas in 2013, in descending order, were: release of information, practice issues, dual relationships/roles, record keeping, concern regarding another registrant/applicant, advertising, supervision, and telepsychology. In order better to delineate the various complex issues related to release of information requests, this category has been further refined into subcategories, including: consent issues, deceased clients, in legal contexts, other, report writing in legal contexts, tests/test results, and releases to the client. Of these subcategories, releasing information in legal contexts and consent issues generated the most inquiries to the Service in 2013.

4. Acknowledgments. I appreciate this opportunity to express my gratitude to the College Board and Committees for their high level of engagement, thoughtful participation and generosity of time. I also wish to thank registrants serving the College as oral examiners and regulatory supervisors. The statutory work of the College during the 2013 year was informed by the wise legal guidance of Mr. Kensi Gounden, Mr. Jason Herbert and Ms. Fran Doyle. I especially want to thank my staff for their extremely competent management of a high volume of work which they complete with professionalism and dedication.

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

MINUTES OF THE 2012 ANNUAL GENERAL MEETING - MAY 23, 2013

Agenda and Minutes The Table of Contents in the 2012 Annual Report was approved as the agenda for the May 23, 2013 meeting. The Minutes of the 2011 Annual General Meeting held on May 24, 2012 were approved.

Chair's Report - Dr. Harder welcomed everyone, thanked Dr. Lee Grimmer for chairing the Victoria site, and introduced the members of the 2012 Board. He noted his appreciation for the clear vision of these individuals of the manner by which College should regulate our profession and their hard work to achieve it. The Table of Contents for the 2012 Annual Report was approved as the agenda for the meeting. In addition, minutes from the 2011 Annual General Meeting were approved. As part of his report, noted that given the intersection of public policy challenges and the empirical research support for the effectiveness of psychological interventions with chronic disease and other significant areas of healthcare costs, the profession is facing a critical window of opportunity, an opportunity consistent with the College's mandate of regulating the profession in the public interest. He also highlighted that the Health Professions Act requires, as a specific duty and object of a College, to promote and enhance collaborative relations with other Colleges established under the Act and interprofessional collaborative practice between its registrants and other health professionals and that Psychologists are uniquely qualified to play a pivotal role in collaborative care. The College has been approached by government about collaborative care initiatives and the integration of psychological services in primary healthcare. He then referred registrants to his written report for an update on specific issues and then the Committee chairs gave their reports.

Patient Relation's Committee Report- Ms. Hynes acknowledged her fellow committee members and reminded registrants of the objectives of the Patient Relations Committee which 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.

Inquiry Committee Report - Dr. Viljoen introduced the members of the 2012 Inquiry Committee and summarized the complaint statistics reported in the Annual Report for 2012. He noted that the volume of work of the IC continues to be high, as many of the complaint files, especially those related to assessments, are comprised of hundreds of pages. He thanked Committee members for consistently demonstrating high integrity and utmost dedication to their investigation of complaints as well as to the ongoing development of procedures for this task. He thanked both our professional and public members for their contributions. He also expressed appreciation for Mr. Wayne Morson, a long-serving public member involved with the College, who passed away in 2012.

Registration Committee Report - Dr. Elterman introduced the members of the 2012 Registration Committee and highlighted several aspects of his written report including Mobility and Access to the Profession, Proposed Changes to Bylaws, Proposed Changes to the Psychologists Regulation, and Foreign Qualifications Recognition (FQR). He made mention of two provincially funded projects relating to FQR which were obtained through the Ministry of Jobs, Tourism and Skills Training. The first was launched and concluded in 2012 on a competency based supervision framework. He reported that the College was successful in obtaining funding for a follow up to this project to begin in 2013. He thanked the professional and public members on the Committee and noted the loss of public member Michael Fellman. He thanked College staff and acknowledged the Deputy Registrar, Dr. Amy Janeck, R.Psych., in particular. He also expressed his thanks to the oral examiners and supervisors for their services to the College. Dr. Janeck then gave a brief explanation of the role of oral examiners and regulatory supervisors. She also gave an award to Barbara Rosen, who joined the "20 Plus Club" for having provided more than 20 oral examinations.

Quality Assurance Committee Report- Dr. Russell King introduced the members of the 2012 Committee. He also acknowledged the six year service of Kathy Montgomery, Ph.D., R.Psych. Dr. King then reported on completion of the 2011 year audit, the Professional executor requirement, and work of the Committee on revisions to the Code of Conduct which included incorporation of the eighteen Draft Practice Advisories which were previously posted for registrant review and feedback into the Code, and a number of other changes designed to clarify ethical and

professional requirements and to be responsive to issues of concern identified by the Inquiry Committee. He noted that two versions of the Draft Code were posted during 2012 for registrant review and feedback. He also commented on the important work of the Practice Support Service and noted that 184 queries were received in 2012 on the following topics (in descending order): release of information, continuing competency, practice issues, record keeping, concern regarding another registrant/applicant, supervision, and telepsychology.

Discipline Committee Report. Dr. John Carter reported that there were no hearings of the Discipline Committee in 2012 and that while there were a number of matters for which a citation for a discipline hearing were contemplated, these matters were successfully resolved before a citation was issued.

Finance Committee Report. Dr. Carter referred registrants to the audited financial statements for 2012 and noted that the increases reflected therein were due to an increase in applications for information under the *Freedom of Information and Protection of Privacy Act*, and the number of applications to the Health Professions Review Board. He also commented on the stability of fees for more than a decade.

Registrar's Report: The Registrar gave her acknowledgments to the members of the College Board, Committee members, registrants serving the College as oral examiners and regulatory supervisors, and to registrants who take the time to provide their thoughtful comments and feedback to the College. She also noted the erudite and thoughtful legal guidance of Mr. Kensi Gounden, Ms. Fran Doyle and Mr. Jason Herbert. She especially noted the professionalism and integrity of her staff. She highlighted the work of the Quality Assurance Committee in developing a customized workshop for registrants with three specific objectives, 1. Ensuring registrants are aware of regulatory documents and obligations; 2. Enhancing registrant understanding of changes in clinical practice in the context of collaborative care and the current healthcare climate; 3. Sharing the cumulative wisdom of the Inquiry Committee and translating that wisdom into best practice. In terms of developments regarding other regulators, the registrar spoke of changes in role of colleges and work underway with other colleges to manage common issues. She noted trends in regulation in other jurisdictions, especially in the UK where significant changes have been made and government may be interested in following some of these changes.

COLLEGE OF PSYCHOLOGISTS
OF BRITISH COLUMBIA
AUDITED FINANCIAL STATEMENTS
DECEMBER 31, 2013

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DECEMBER 31, 2013

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The Raber Mattuck Group
Chartered Accountants

INDEPENDENT AUDITORS' REPORT

To the Members of COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA:

We have audited the accompanying financial statements of COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA, which comprise the statement of financial position as at December 31, 2013, the statements of operations, changes in net assets, and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information:

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian Accounting Standards for Not-for-Profit Organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

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 comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on our judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, we consider internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

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

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA as at December 31, 2013 and the results of its operations and its cash flows for the year then ended in accordance with Canadian Accounting Standards for Not-for-Profit Organizations.

CHARTERED ACCOUNTANTS

Vancouver, British Columbia

March 31, 2014

COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA
STATEMENT OF FINANCIAL POSITION
AS AT DECEMBER 31, 2013

	2013	2012
ASSETS		
CURRENT ASSETS		
Cash and short term investments (Notes 1(b), 2, 3)	\$ 1,504,708	\$ 1,444,431
Cash and short term investments- restricted (Notes 1(b), 2, 3, 6)	850,386	727,192
Accounts receivable (Notes 1(b), 3)	12,142	-
Prepaid expenses	2,637	2,098
	2,369,873	2,173,721
PROPERTY AND EQUIPMENT (Notes 1(e), 4)	40,995	52,361
	\$ 2,410,868	\$ 2,226,082
LIABILITIES		
CURRENT LIABILITIES		
Accounts payable and accrued liabilities (Notes 1(b), 3)	\$ 51,315	\$ 44,242
Employee remittances payable	11,002	8,844
Deferred revenue (Note 5)	1,327,800	1,238,759
	1,390,117	1,291,845
NET ASSETS		
INTERNALLY RESTRICTED		
General Contingency Fund (Note 6)	850,386	727,192
CAPITAL ASSET FUND (Note 7)	40,995	52,361
GENERAL FUND (Note 1(c))	129,370	154,694
	1,020,751	934,237
	\$ 2,410,868	\$ 2,226,082

Approved by the Board
"signed" _____ Director
"signed" _____ Director

The accompanying notes are an integral part of these financial statements.

The Rabot Mattruck Group

COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA
STATEMENT OF CHANGES IN NET ASSETS
FOR THE YEAR ENDED DECEMBER 31, 2013

	General Contingency Fund 2013 (Note 6)	Capital Asset Fund 2013 (Note 7)	General Fund 2013	Total 2013	Total 2012
NET ASSETS, beginning of year	\$ 727,192	\$ 52,361	\$ 154,694	\$ 934,237	\$ 819,099
Excess of revenue over expenses (expenses over revenue)	-	-	86,514	86,514	(36,099)
Inter-fund transfers	123,194	-	(123,194)	-	-
Prior period adjustment (Note 13)	-	-	-	-	151,236
Capital asset acquisitions, net of amortization	-	(11,366)	11,366	-	-
NET ASSETS, end of year	\$ 850,386	\$ 40,995	\$ 129,370	\$ 1,020,751	\$ 934,237

The accompanying notes are an integral part of these financial statements.

The Rabot Mattruck Group

COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA
STATEMENT OF OPERATIONS

FOR THE YEAR ENDED DECEMBER 31, 2013

	2013	2012
REVENUE		
Registration fees	\$ 1,392,546	\$ 1,385,861
Application and exam fees	68,720	63,744
Investment	38,007	34,387
Other income, cost recovery, and grants	26,087	6,565
	1,525,360	1,470,537
EXPENSES		
Administration (Note 14)	125,078	133,338
Audit	6,759	6,438
Board	65,047	79,122
Committees (meetings, travel and honoraria)	68,584	84,794
Extraordinary hearings	-	1,446
Operations	144,583	163,613
Registrar / Applicant services	44,349	19,231
Statutory functions (F.O.I., investigations, routine legal consultation)	336,601	393,032
Supervision expense	6,213	5,666
Wages and compensation (Note 14)	642,732	619,955
	1,438,946	1,506,635
EXCESS OF REVENUE OVER EXPENSES		
(EXPENSES OVER REVENUE)	\$ 86,514	\$ (36,098)

The accompanying notes are an integral part of these financial statements.

The Raber Mattuck Group

COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA
STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED DECEMBER 31, 2013

	2013	2012
OPERATING ACTIVITIES		
Excess of revenue over expenses (expenses over revenue)	\$ 86,514	\$ (36,098)
Adjustments for:		
Amortization	21,361	29,091
Accounts receivable	(12,142)	-
Prepaid expenses	(539)	7,324
Accounts payable	7,073	(12,406)
Employee remittances payable	2,158	(13,337)
Deferred revenue	89,041	26,994
CASH PROVIDED BY OPERATING ACTIVITIES	193,456	1,568
INVESTING ACTIVITIES		
Purchase of capital assets	(9,985)	(10,676)
CASH USED IN INVESTING ACTIVITIES	(9,985)	(10,676)
NET INCREASE (DECREASE) IN CASH	183,471	(9,110)
CASH, beginning of year	2,171,623	2,180,733
CASH, end of year	\$ 2,355,094	\$ 2,171,623

The accompanying notes are an integral part of these financial statements.

The Raber Mattuck Group

COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA
NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2013

The College of Psychologists of British Columbia ("the College") is the regulatory body for the profession of psychology in British Columbia. The College's role is to protect the public's interest by regulating and setting standards for the practice of psychology and monitoring the practice of psychology practitioners. The practice of psychology in British Columbia is regulated under the *Health Professions Act (HPA)*, the *Psychologists Regulation*, the *Bylaws* and the *Code of Conduct*.

The College is a not-for-profit organization under the Income Tax Act, and as such is exempt from income taxes.

1. SIGNIFICANT ACCOUNTING POLICIES

a) Basis of presentation

The financial statements have been prepared by management in accordance with Canadian Accounting Standards for Not-for-Profit Organizations (ASNPO).

b) Financial instruments

The College initially recognizes financial instruments at fair value and subsequently measures them at each reporting date as follows:

Asset/Liability	Measurement
Unrestricted cash	Amortized cost
Accounts receivable	Amortized cost
Accounts payable and accrued liabilities	Amortized cost

Investments in externally managed funds and restricted cash are recorded at fair values determined on the last business day of the fiscal period. Changes in fair value are recognized in the statement of operations.

c) Revenue recognition

The College accounts for revenues using the restricted fund method.

Registration, application, and exam fees received during the year are recorded as revenue in the period to which they relate and the related expenses are incurred. Where a portion of a fee or other contribution relates to a future period, it is deferred and recognized in that subsequent period.

Revenues and expenses for general activities and administration are reported in the General Fund. The General Fund was established in 2006.

The Raber Matlack Group

COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA
NOTES TO THE FINANCIAL STATEMENTS

DECEMBER 31, 2013

1. SIGNIFICANT ACCOUNTING POLICIES (continued)

d) Measurement uncertainty

The preparation of financial statements in accordance with ASNPO requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and the disclosure of contingent liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Management reviews all significant estimates affecting its financial statements on a recurring basis and records the effect of any necessary adjustments. Management believes that the estimates used in preparing its financial statements are reasonable and prudent; however, actual results could differ from these estimates.

e) Property and equipment

Purchased property and equipment are recorded at cost. Amortization is recorded over the estimated useful life of the assets using either a straight-line or declining balance method, as follows:

Office furniture and equipment	- 20% declining balance
Computer equipment and software	- 30% declining balance
Leasehold improvements	- 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.

2. CASH AND SHORT TERM INVESTMENTS

The College's cash and short term investments balance is comprised as follows:

	2013	2012
Unrestricted	\$ 1,504,708	\$ 1,444,431
Restricted - General Contingency Fund	850,396	727,182
	\$ 2,355,094	\$ 2,171,613

3. FINANCIAL INSTRUMENTS

The College's financial instruments include cash and cash equivalents, term deposits, investments in mutual funds, accounts receivable, and accounts payable and accrued liabilities. It is management's opinion that the College is not exposed to significant interest, currency or credit risks arising from these financial instruments.

The Raber Matlack Group

COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA
NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2013

4. PROPERTY AND EQUIPMENT

	2013		2012	
	Cost	Accumulated Amortization	Net Book Value	Net Book Value
Computer equipment	\$ 148,087	\$ 126,483	\$ 21,604	\$ 18,738
Leasehold improvements	90,063	85,215	4,848	15,445
Office furniture and equipment	118,471	103,928	14,543	18,178
	\$ 356,621	\$ 315,626	\$ 40,995	\$ 52,361

5. DEFERRED REVENUE

The College has received funds in advance of their year-end which are designated for expenses with specific restriction to be incurred during the forthcoming fiscal year.

These funds represent deferred revenue and relate to membership fees for the 2014 calendar year received in advance. These deferred fees will be recorded as revenue in the statement of operations when the related expenses are incurred.

	2013	2012
Deferred revenue, beginning of year	\$ 1,238,759	\$ 1,363,001
Less: amount recognized as revenue in the year	(1,238,759)	(1,211,765)
Less: prior period adjustment (Note 13)	-	(151,236)
Add: amount received for future periods	1,327,800	1,238,759
Deferred revenue, end of year	\$ 1,327,800	\$ 1,238,759

The Raber Marantz Group

COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA
NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2013

6. GENERAL CONTINGENCY FUND

The General Contingency Fund was established to provide for a reserve in case of law suits, hearings and other matters that may require significant expenditure. Based on financial guidelines and fiscal management, the Board of Directors resolved to endorse the equivalence of a one year operating amount for the General Contingency Fund. In the current year the fund has been maintained at \$850,386 (2012 - \$727,192).

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

7. CAPITAL ASSET FUND

The Capital Asset Fund was established to provide a reserve for furniture and equipment purchases. It is the intention of the College to maintain this fund at the current year carrying value of the capital assets. In the current year the fund has been maintained at \$40,995 (2012 - \$52,361).

	2013	2012
Capital Asset Fund, beginning of year	\$ 52,361	\$ 70,774
Less: amount amortized	(21,361)	(29,091)
Add: asset purchases during the year	9,985	10,678
Capital Asset Fund, end of year	\$ 40,995	\$ 52,361

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

8. CONTINGENCIES

The nature of the College's activities is such that there may be litigation pending or in progress at any time. With respect to claims at December 31, 2013, management is of the opinion that it has valid defenses and appropriate insurance coverage in place, or if there is unfunded risk, such claims are not expected to have a material effect on the College's financial position.

Outstanding contingencies are reviewed on an ongoing basis and are provided for based on management's best estimate of the ultimate settlement.

The Raber Marantz Group

COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA
NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2013

9. COMMITMENTS

The College has entered into lease agreements for photocopying and postage equipment. Furthermore, the College leases its premises. The aggregate amounts of payments estimated to be required for these commitments over the next five years are as follows:

Year	Amount
2014	\$ 125,907
2015	125,907
2016	125,907
2017	15,484
2018	-

10. CAPITAL MANAGEMENT

The College receives its principal source of capital through registration fees provided annually by new and existing members. The College defines capital to be net assets. The College's objective when managing capital is to fund its operations and capital asset additions.

The College is not subject to debt covenants or any other capital requirements with respect to operating funds.

11. ASSESSING GOING CONCERN

The Canadian Institute of Chartered Accountants ("CICA") Handbook Section 1400, General Standards of Financial Statement Presentation, includes requirements for management to assess and disclose an entity's ability to continue as a going concern. The College's ability to continue as a going concern is based on the assumption that current registration levels are maintained. If there are significant declines in registration, expenditures will be adjusted to match revenue as appropriate.

12. HRSDC PROJECT LIABILITY

On February 1, 2010, the College entered into a Labour Market Partnerships Contribution Agreement ("the Agreement") with the Canada Employment Insurance Commission (division of Human Resources and Skills Development Canada – HRSDC). Pursuant to the Agreement, the College will administer funds for an HRSDC labour mobility project. The maximum contribution in respect of the eligible costs of the project is \$99,539. During 2013, a total amount of \$14,400 was received by the College. \$14,000 was expended on project activities. The remainder of these funds, \$439, is maintained in a separate bank account designated for the project.

The Raber Martuck Group

COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA
NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2013

13. PRIOR PERIOD ADJUSTMENT

The adjustment for \$151,236 was made in 2012 as a result of a prior period error whereby registration fees paid by new registrants were deferred. The appropriate accounting treatment would have been to treat such registrations as revenue in the year in which they were received. The effect of the adjustment was to increase net assets with a corresponding reduction in that year's revenue.

14. COMPARATIVE FIGURES

Certain of the comparative figures for the year ended December 31, 2012, have been reclassified to conform to the account classification used in the current year; there have been no changes in the accounting principles or the reported operating results for 2013 or 2012.

The Raber Martuck Group