



*Psychology*

*Psychology Council of New South Wales*

***Annual Report 2013***

Psychology Council of New South Wales

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The Hon Jillian Skinner MP  
Minister for Health Minister for Medical Research  
Level 31, Grosvenor Macquarie Tower  
1 Farrer Place  
**SYDNEY NSW 2000**

Dear Minister,

On behalf of the Psychology Council of New South Wales (Council), we are pleased to submit the Council's Annual Report and Financial Statements for the year ended 30 June 2013 for presentation to Parliament.

These documents have been prepared in accordance with the provisions of the *Annual Reports (Statutory Bodies) Act 1987*, the *Annual Reports (Statutory Bodies) Regulation 2010* and the *Public Finance and Audit Act 1983* as amended.

Throughout the reporting period, the Council maintained a productive relationship with its primary stakeholders, namely, the Health Care Complaints Commission, the Psychology Board of Australia and the Australian Health Practitioner Regulation Agency. The Council wishes to acknowledge their collective contribution in assisting the Council to meet its charter of protecting the public health and safety through managing concerns about the performance, conduct and health of registered psychologists.

Yours sincerely,

Caroline Hunt  
Council President

Margo Gill  
Council Member

# *Contents*

About the Council	3
Regulatory Activities	7
Management and Administration	16
Financial Statements	22
Appendix 1 - Legislative Changes	47
Appendix 2 - GIPA Statistics	48
Appendix 3 - Members of Committees, Panels and Tribunals	51
Appendix 4 - Tribunal Decisions	53
Glossary	54
Index	58



## About the Council

The Psychology Council of New South Wales (Council) is a statutory body established to manage notifications (complaints) about conduct, performance and health matters concerning registered psychologists practising in New South Wales (NSW).

The Council undertakes its regulatory functions in partnership with the Health Care Complaints Commission (HCCC), which is a separate statutory authority, established under the *Health Care Complaints Act 1993*.

The Psychology Council is one of 14 Councils in NSW. The Health Professional Councils Authority (HPCA) provides secretariat support to the NSW health professional Councils to assist them in carrying out their regulatory responsibilities.

### Charter

The Council is constituted under the *Health Practitioner Regulation National Law (NSW) No 86a* (the Law) to exercise the powers, authorities, duties and functions imposed by the Law.

### Aims and Objectives

The role of the Council is to act in the interests of the public by ensuring that registered psychologists are competent to practise. The Council manages a range of programs, services and procedures to achieve those objectives. As a result, members of the public can be assured that registered psychologists are required to maintain appropriate standards of conduct and professional performance.

### Council Membership

Section 41E of the Law provides for membership of the Council. There are eight members of the Council appointed by the Governor.

The following members held those positions for the entire reporting period:

- (a) three psychologists nominated by the Minister from a panel nominated by the Australian Psychological Society Limited, and other bodies the Minister may decide:
  - Ms Wendy McCartney BA MA(Hons)(USyd) DipCrim FAPS
  - Dr Robyn Vines BA(Hons)(Psych) MSc(ClinPsych) PhD FAPS GAICD
  - Mr Thomas O'Neill BA(Hons)(Psych) MPsych(Clin)

- (b) one psychologist nominated by the Minister, being a member of the teaching staff of an educational institution that is involved in conducting approved programs of study for the psychology profession in this jurisdiction:

- Associate Professor Caroline Hunt  
BSc(Hons)(Psych) MPsych(Clin)(Hons) PhD (*President*)

- (c) one psychologist nominated by the Minister:

- Associate Professor Michael Kiernan  
BSc(Hons)(Psych) MPsych(Clin)(Hons) PhD  
(*Deputy President*)

- (d) two persons, who are not psychologists, nominated by the Minister to represent the community:

- Ms Margo Gill DMU MAppSc MBA
- Dr Patricia Jenkins BA(Hons) PhD(USyd)

- (e) one Australian lawyer nominated by the Minister:

- Mr Geoffrey Graham LLB

The President and Deputy President positions are prescribed in Part 2, Schedule 5C of the Law. Associate Professor Caroline Hunt was President of the Council and the Deputy President was Associate Professor Michael Kiernan.

As at 30 June 2013, the Council had eight members, including five female members.

### Remuneration

Remuneration for members of the Council is as follows:

President	\$2,336 per annum
Deputy President	\$1,752 per annum
Members	\$1,752 per annum

Additionally, Council members may receive sitting fees of \$448 per day or \$224 per half day for the conduct of Inquiries at a meeting of the Council or hearings under s 150 of the Law, and \$436 per day or \$218 per half day if a Counselling Committee is convened to conduct counselling on a day other than the scheduled Council meeting date.

Council members are reimbursed for expenses incurred only when travelling on official business at Council direction.

Members of Council committees, Panels Tribunals and other regulatory activities also receive remuneration and reimbursement of expenses.

### Attendance at Council Meetings

The Council met on the second Tuesday of each month and met 11 times during the reporting period. The Council did not meet in January.

Attendance at meetings was as follows:

Member	Meetings Attended	Leave of Absence Granted
Associate Professor Caroline Hunt	11	0
Associate Professor Michael Kiernan	10	1
Dr Robyn Vines	10	1
Ms Wendy McCartney	10	1
Mr Thomas O'Neill	11	0
Ms Margo Gill	9	2
Dr Patricia Jenkins	8	2
Mr Geoffrey Graham	8	3

### Committees of the Council

Section 41F of the Law provides that the Council may establish committees to assist it with the exercise of its functions. Members of committees need not be Council members.

The following Committees operated throughout the reporting period to support the Council.

#### Education and Research Committee

Section 41S of the Law allows the Council to establish an Education and Research Account. The Council may expend these funds for education and research purposes relevant to its regulatory functions, and for meeting any associated administrative costs incurred.

The Council has established an Education and Research Committee to deal with assessing applications for grants and to provide recommendations for funding to the Council for endorsement. Although some administrative work relating to education and research was performed, the Committee did not meet during the reporting period.

The Education and Research Committee members were:

- Dr Vida Bliokas (nominee of NSW Health)
- Associate Professor Graham Tyson (psychology academic)

#### Finance Committee

The Finance Committee provides advice and recommendations to the Council about financial and budget issues relevant to the Council's work. The Committee met three times during the reporting period.

The Finance Committee was comprised as follows:

- Associate Professor Caroline Hunt
- Associate Professor Michael Kiernan
- Mr Geoffrey Graham
- Dr Robyn Vines

#### Regulatory Committees and Panels

Part 8 of the Law prescribes the committees and panels that support the Council in undertaking its regulatory activities. The activities and decisions of these bodies are reported in the section *Regulatory Activities* below.

#### Psychology Assessment Committee

The Assessment Committee is established under s 172A and Schedule 5E of the Law and comprises four members appointed by the Minister. Three members are registered psychologists, and one is a person who is not a registered health practitioner.

Assessment Committee members are listed in Appendix 3.

There were no matters considered by the Psychology Assessment Committee during the reporting period.

#### Impaired Registrants Panel

Impaired Registrants Panels are established under s 173 of the Law to deal with matters concerning practitioners who suffer from a physical or mental impairment which affects or is likely to affect their capacity to practise. The Panel consists of two or three members appointed by the Council. At least one member must be a registered medical practitioner and at least one member must be a registered psychologist. Panellists are drawn from a pool of members who are usually experienced in working with practitioners demonstrating health problems.

The members of the Impaired Registrants Panels are listed in Appendix 3.

Eight new matters were considered by Impaired Registrants Panels during the year.



## Performance Review Panels

Performance Review Panels are established under s 174 of the Law to review the professional performance of a registered health practitioner. Three members are appointed to each Panel: two must be psychologists and one is a lay person representing the community.

The members of the Performance Review Panels are listed in Appendix 3.

There was one matter considered by Performance Review Panels during the year.

## Psychology Tribunal

The Psychology Tribunal of New South Wales is established under s 165 and comprises four members. The Chairperson or Deputy Chairperson is an Australian lawyer appointed by the Governor. For each Tribunal hearing, the three other members are appointed by the Council. Two are psychology professionals and one is a community representative.

The Tribunal deals with serious matters that may lead to suspension or deregistration, appeals against Council decisions regarding disciplinary matters and appeals against decisions of the National Board in relation to registration matters. Tribunal members are listed in Appendix 3. The current Tribunal appointments are for a period of three years from 1 March 2012 until 28 February 2015.

The Tribunal concluded two prosecutions during the year. The Tribunal heard one appeal against a decision about registration made by the Psychology Board of Australia. At the time of reporting, the decision is reserved.

Refer to the *Regulatory Activities* section for further details.

## Executive Officer

Under s 41Q of the Law the Council's Executive Officer is responsible for the affairs of the Council subject to any directions of the Council.

Ms Myra Nikolich is the Executive Officer to the Council.

## Meetings and Conferences

**Heads of Departments, Senior Public Sector and Local Health District Psychologists meeting (HODSPA)**

The Council continued its regular practice of meeting with the Heads of Departments and Schools and Senior Public Sector and Local Health District Psychologists to facilitate information sharing on topics of interest to all parties. The Council held this annual meeting on

13 November 2012 at The Sebel, Surry Hills.

## National Registration and Accreditation Scheme (NRAS) 2012 Combined Meeting

Associate Professor Caroline Hunt attended the NRAS 2012 Combined Meeting in Melbourne on 14-15 September 2012.

## Rural and Remote Mentoring Scheme

The Rural and Remote Mentoring Scheme commenced in July 2010. The project had been approved by the former NSW Psychologists Registration Board and funding had been provided in previous reporting periods. The project's aims were to provide supervisory and mentoring support to rural and remote psychologists (RRPs) in NSW, and to establish a network of supportive links for RRP's which could continue beyond the life of the project and enhance training and supervision opportunities for RRP's. The Council approved an application in August 2011 to fund the continuation of the Scheme for another year, with a payment of \$150,000. The Scheme was finalised in December 2012.

## Education and Research

Section 41S of the Law allows the Council to establish an Education and Research Account. The Council may expend these funds for education and research purposes relevant to its regulatory functions and for meeting any associated administrative costs. During the reporting period the Council did not operate an Education and Research Account.

The Council has agreed to participate in and contribute to an Australian Research Council (ARC) funded research project in partnership with the University of Sydney, the Medical, Dental, Pharmacy and Nursing and Midwifery Councils, HCCC and AHPRA NSW. The project is a comparative study of the notifications and complaints systems of NSW compared with other States.

## Overseas Travel

No overseas travel was undertaken by Council members during the reporting period.

## Promotion of Council Activities

The Council's website ([www.psychologycouncil.nsw.gov.au](http://www.psychologycouncil.nsw.gov.au)) is updated on a regular basis and is the principal medium for communicating with the public and the profession and disseminating information to psychologists.

The Council's Annual Reports since 2010/2011 and Annual Reports for previous years of the former Board are accessible on the website.

## Other Council Activities

The Council joined a number of other health profession Councils to instigate and fund the development of a newsletter, the first of which will be published in 2013.

Council members have consulted with a range of professional organisations and stakeholder groups to facilitate the sharing of expertise and to promote the work of the Council.

Associate Professor Caroline Hunt has consulted with:

- Australian Psychology Accreditation Council
- Professional Advisory Group for the Children's Court Clinic
- Victims Services Professional Advisory Panel, NSW Department of Attorney General and Justice (July - December 2012).

Associate Professor Michael Kiernan is a member of the NSW Board of the Psychology Board of Australia, holding the position of Chairperson.

Ms Wendy McCartney and Ms Margo Gill are also members of the NSW Board of the Psychology Board of Australia.

## Complaints Received About Council Administrative Processes

The Council acknowledges that the trust and confidence of the public are essential to its role and values all forms of feedback. The Council has established a complaint handling policy and procedures for addressing complaints regarding its administrative processes or about its activities, staff or service delivery. There was one complaint received from a member of the public regarding timeliness in responding to his correspondence. The complainant was invited to meet with two members of staff. This resulted in a satisfactory outcome for the complainant and improved administrative processes for the Council secretariat.

## Legislative Changes

Details of the legislative changes in 2012/2013 are at Appendix 1.





# Regulatory Activities

The primary responsibility of the Council, in conjunction with the HCCC, is to protect the public by managing the performance, conduct and health concerns relating to psychologists practising in NSW.

This section details the Council's regulatory programs and results for the year.

## National Registration

NSW health professionals are registered under the National Registration and Accreditation Scheme. Through the Scheme, the Psychology Board of Australia (National Board) is responsible for registering health practitioners and for determining the requirements for registration.

The National Board approves accredited programs of study which provide the necessary qualifications for registration. It also develops and approves standards, codes and guidelines for the profession which inform the Council's regulatory activities.

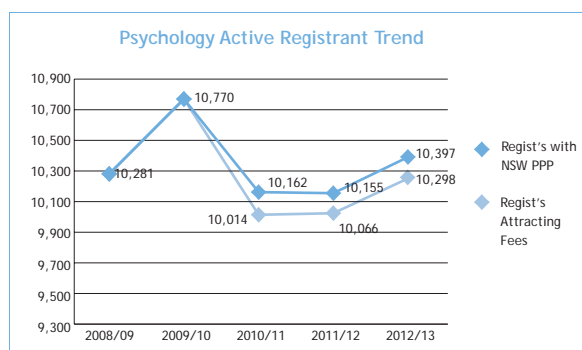
Further information about the operations of the National Board can be obtained on the Australian Health Practitioner Regulation Agency (AHPRA) website ([www.ahpra.gov.au](http://www.ahpra.gov.au)).

## Registrations in NSW

Information about registration and registrant numbers included in this Report provides context for the Council's regulatory activities and functions. Registration data is supplied by AHPRA.

At 30 June 2013, there were 10,289 registered psychologists whose principal place of practice was in NSW. This represents 33.7% of the total number of psychologists registered under the Scheme across Australia.

The graph below provides information about the number of psychologists registered in NSW from 2008/2009 to 2012/2013. There was a 2.2% increase in 2012/2013 (223 practitioners) compared with 2011/2012.



Registrations by registration type as at 30 June 2013 were as follows:

Registration Type	Principal Place of Practice (PPP) in NSW	NSW Share of registrants with no PPP listed	Registrants for whom fees were paid to NSW (PPP + no PPP)
General	8,705	93	8,798
Limited	1,108	0	1,108
Non-practising	476	15	491
<b>Total</b>	<b>10,289</b>	<b>108</b>	<b>10,397</b>

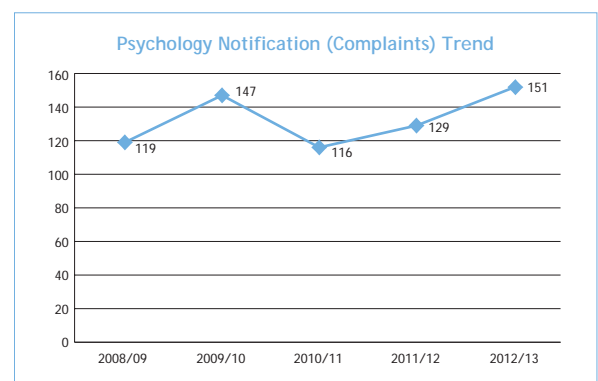
## Notifications (Complaints) Received

Any person may make a notification (complaint) against a registered psychologist. Notifications (complaints) may relate to the conduct, health or performance of a registered psychologist. A notification (complaint) may be made to the HCCC, the Council, or AHPRA.

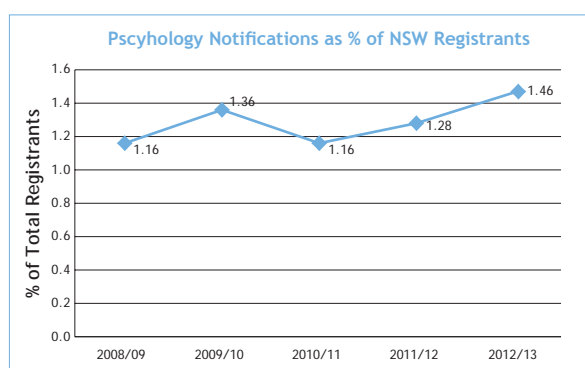
The *Health Care Complaints Act 1993* requires the Council and the HCCC to advise each other about notifications (complaints) received and to consult on the course of action to be taken. A notification made to the Council is deemed to be also made to the HCCC, and vice versa.

The Council received 151 new notifications (complaints) during the reporting period.

The following graph indicates the trend in notifications received since 2008/2009 and shows a slight increase in the past year.



The graph below shows the level of notifications (complaints) as a percentage of the number of registered psychologists in NSW, which is less than 1.5%.



A more accurate measure is the percentage of psychologists about whom a notification was received i.e. a psychologist with more than one notification is only counted once in the calculation. These data are only available since 1 July 2010. On this basis, the percentage of notifications (complaints) received on psychologists practising in NSW was 1.29% for the year.

	2012/2013	2011/2012	Variance
% of psychologists with notifications received	1.29	1.13	0.16

Of the psychologists with a new notification in 2012/2013, 18 psychologists have had one other notification, nine have had two other notifications, one has had three other notifications and two have had four other notifications. For the remaining 103 psychologists who received a notification in 2011/2012 it was the first for that registrant

The notifications (complaints) managed by the Council were as follows:

Notifications (Complaints)	2012/2013	2011/2012
Case volume open* at year beginning	17	25
New notifications received	22	27
Notifications closed	27	35 <sup>^</sup>
Case volume open* at year end	12	17 <sup>^</sup>
Total case volume managed	39	52

\* See Glossary for definition of open matters

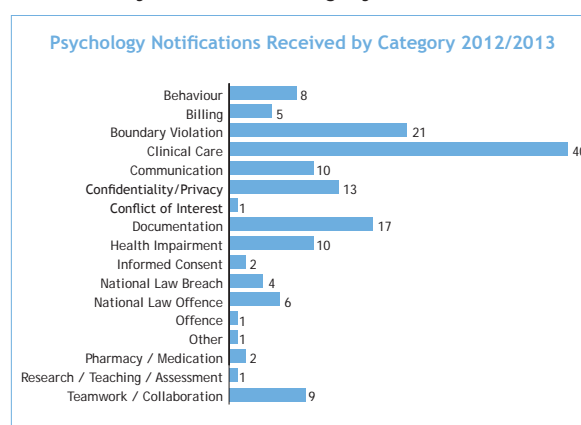
<sup>^</sup> Differs to 2012 Annual Report due to data cleansing

When they are received, notifications (complaints) are classified to the conduct, health or performance stream, depending on the nature of the matter. In some instances, more than one stream may be applicable; however, one stream is identified as the primary stream

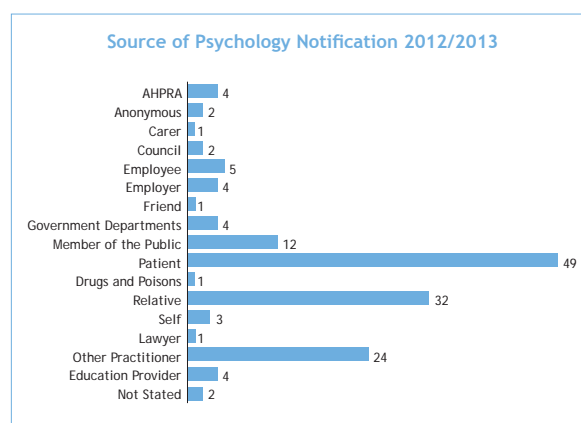
based on the seriousness of the matter. There were 79 new notifications (complaints) classified as performance issues and 61 conduct issues. There were 10 notifications related to health issues and one matter that was classified as 'other'. The remaining notification was unclear and discontinued after consultation with the HCCC.

Notifications are also allocated to an issue category. The Council has adopted the issue categories that have been developed by the AHPRA, which facilitates reporting across jurisdictions.

The number of notifications (complaints) received by the issue category was as below:



The sources of notifications received in 2012/2013 were:



The total number of notifications (complaints) managed by the Council in 2012/2013 was 206: 151 new matters and 55 carried over from the previous period. Of the 151 new notifications (complaints) 40% (61) were related to the conduct of practitioners, 52% (79) were related to performance, 7% (10) were related to health, and 1% (1) was classified as 'other'.

## Mandatory Notifications

The Law requires health practitioners, employers and education providers to make mandatory notifications to AHPRA if they believe a psychologist has behaved in a way that constitutes notifiable conduct, i.e.

- the practice of the profession while intoxicated by alcohol or other drugs, engaging in sexual misconduct in connection with practice, placing the public at substantial harm because the practitioner has an impairment or placing the public at risk because the practitioner has practised in a way that constitutes a significant departure from accepted professional standards.

AHPRA then refers the matter to the Council for management.

There were eight mandatory notifications about psychologists received during the reporting period as follows:

Category	Number
Sexual misconduct	2
Impairment	2
Departure from standards	4

Mandatory notifications represent 5.3% of all notifications received in the reporting period. Seven notifications on practitioners were made by other health practitioners, one by a treating health practitioner, and none were made by employers or education facilities.

The status of mandatory notifications over the reporting period was as follows:

Mandatory Notifications	Number
Mandatory notifications received in prior period but not completed at 1/7/2012	14
Mandatory notifications received in 2012/2013	8
Mandatory notifications closed in 2012/2013	13
Mandatory notifications open at 30/6/2013	9
Total case volume managed in 2012/2013	22

## Notifications (Complaints) Management

A decision is made by the Council (in consultation with the HCCC) about which agency will manage the matter. Sometimes this decision is deferred until further assessment or investigation is carried out. Information on the processes for making and managing notifications (complaints) is available on the Council's website.

Following an assessment, the HCCC and the Council determine if the matter should be dismissed or whether the matter requires some form of action. A notification (complaint) may be dismissed if the matter falls outside the jurisdiction of the Council or the HCCC; if it does not raise issues of sufficient seriousness to warrant further action, or if the parties have resolved the matter.

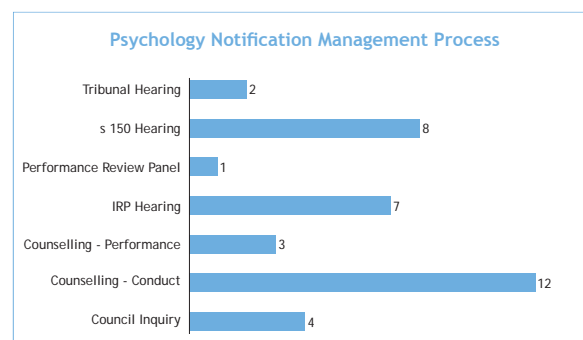
When action is required, further assessment or investigation occurs. Some matters may also be referred for further inquiry by a Tribunal, Panel or Committee.

Following consultation with the HCCC, the majority of matters were either discontinued or referred to the Council for further management. Other outcomes included:

- referral to the HCCC for investigation
- referral to another body such as AHPRA, where the matter was outside the jurisdiction of the Council or HCCC.

Of the 206 notifications (complaints) managed in 2012/2013, 18% (37) were referred during the period for management to other legislated committees or adjudication bodies other than regular Council meetings. Of those matters referred to an adjudication body in this or prior periods, 80% (38) were completed in 2012/2013.

The matters in 2012/2013 that were referred to an adjudication body or for counselling were as follows:



## Protective Orders - Immediate Action under s 150 of the Law

The Council must exercise its powers to either suspend a psychologist's registration, or impose conditions on the psychologist's practice if it is satisfied that such action is appropriate for the protection of the health or safety of the public, or is otherwise in the public interest.

During the reporting period, the Council considered taking immediate action on eight occasions and exercised its powers on four occasions. The issues were related to impairment. The outcomes of the four matters were two suspensions and two had conditions imposed.

## Assessment Committee

The Council may refer a notification (complaint) to the Assessment Committee if the HCCC has decided not to investigate it, or following an investigation has decided not to refer the matter to a Tribunal. The Council may also direct the Committee to require that a practitioner undergo skills testing.

The Committee must investigate complaints referred to it and encourage the complainant and the practitioner to settle the complaint by consent. A complainant and the practitioner are not entitled to be legally represented at an appearance before a Committee.

The Committee may obtain the medical, legal, financial or other advice it thinks necessary or desirable to enable it to exercise its functions. Advice obtained by the Committee may not, unless otherwise ordered by the Council, be admitted or used in civil proceedings before a court and a person may not be compelled to produce the advice or to give evidence in relation to the advice in civil proceedings.

There were no matters carried over from the previous year and no new matters in the period.

## Health

The object of the Council's health program is to protect the public, while maintaining the high standards the public is entitled to expect, and enabling psychologists with an impairment to remain in practice when it is safe to do so.

During the reporting period the Council managed 19 matters in the health stream of which 10 were new health matters and nine matters carried over from the prior period. Two matters involved drug addictions, one involved an alcohol dependency, 11 matters were mental health issues, and five involved cognitive impairment.

## Council Appointed Practitioner Assessments

The Council may refer a psychologist, who is the subject of a notification (complaint), for a

health assessment to determine whether the person has an impairment. This may include a medical, physical, psychiatric or psychological examination or testing.

The Council managed nine notification matters by referral for a health assessment during the reporting period. Of these, eight were referred to an Impaired Registrants Panel.

## Impaired Registrants Panels

The Law provides for the convening of Impaired Registrants Panels (IRPs) to deal with matters concerning psychologists who suffer from a physical or mental impairment which affects or is likely to affect the psychologist's capacity to practise.

An IRP is non-disciplinary and aims to assist psychologists to manage their impairment while remaining in professional practice as long as this poses no risk to the public. The Panel's role is to inquire into and assess the matter, obtain reports and other information from any source it considers appropriate, and to make recommendations to the Council.

The Panel may counsel the psychologist or, on the recommendation of the Panel, the Council may counsel the psychologist, impose conditions on the registration, or suspend the registration for a period if the Council is satisfied the psychologist has voluntarily agreed to the conditions or suspension.

Status of IRP Inquiries	2012/2013	2011/2012 <sup>^</sup>
Referred to an IRP but not completed at year beginning	1	4
Referred to an IRP	7	7
IRPs finalised	8	10
Referred to an IRP but not completed at year end	0	1
Total case volume managed	8	11

<sup>^</sup> Differs from 2011/2012 Annual Report due to data cleansing

The matters referred to an IRP in 2012/2013 related to the following issues:

Issue	Number
Alcohol abuse	1
Drug abuse	2
Mental health	5

The outcomes of matters recommended to the Council following an IRP were:

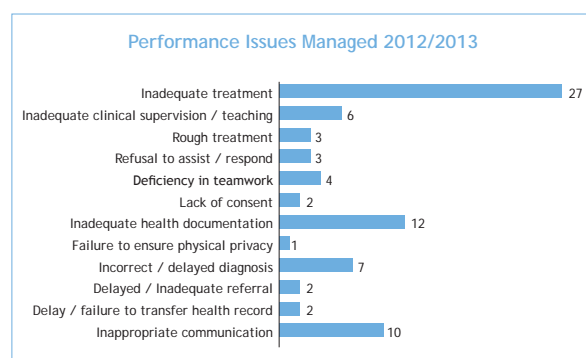
Conditions imposed on registration by agreement	4
Suspension on registration by agreement	1
The matter did not proceed	2
The matter was referred to the HCCC as a complaint	1

## Performance

Performance issues generally relate to concerns about the standard of a psychologist's clinical performance, that is, whether the knowledge, skill or judgment possessed, or care exercised, is significantly below the standard reasonably expected of a psychologist of an equivalent level of training or experience.

The Council's performance program provides an avenue for education and retraining where inadequacies in competency are identified, while at all times ensuring that the public is appropriately protected. The program aims to address patterns of practice rather than one-off incidents unless a single incident is thought to be demonstrative of a broader problem.

The total number of psychologists managed in the performance stream in 2012/2013 was 95: 16 matters carried over from the previous period and 79 new matters. The performance issues managed in the period were:



## Performance Assessments

The Council may require a psychologist to participate in a performance assessment to assist it in determining a course of action. The aim of such an assessment is to establish whether their performance is at a standard expected of a similarly trained or experienced psychologist. Consequently, assessments are intended to be broad-based and not limited to the substance of the matter that triggered them.

The assessment is generally conducted in the psychologist's own practice environment by assessors appointed by the Council who are familiar with the area of practice of the psychologist concerned.

There was one matter referred for a performance assessment although no assessments were undertaken during the reporting period. There were no referrals to a Performance Review Panel.

## Performance Review Panel

If a performance assessment finds that the professional performance of a psychologist is unsatisfactory, the Council may decide to refer the matter to a Performance Review Panel (PRP). The role of the Panel is to review the professional performance of the psychologist by examining the evidence placed before it to establish whether their practice meets the standard reasonably expected of a psychologist of 'an equivalent level of training or experience' at the time of the review.

Where deficiencies are identified, the psychologist is required to undertake remediation tailored to their individual needs. This may entail attending courses, undertaking supervision or engaging in additional continuing professional development. Conditions on practice may also be required to ensure the public is protected while the psychologist is undertaking remediation.

There was one PRP completed in the reporting period. The matter related to assessment and report writing, and record keeping. Conditions were imposed on the practitioner's practice.

## Conduct

Conduct issues generally relate to behavioural acts or omission and often go to the question of character and may be categorised as unsatisfactory professional conduct or professional misconduct.

The total number of psychologists managed in the conduct stream in 2012/2013 was 90: 29 matters carried over from the previous period and 61 new matters.



The conduct issues managed in the period were:



## Investigations by the Health Care Complaints Commission (HCCC)

During 2012/2013, seven matters were referred for investigation by the HCCC, resulting in three referrals to the Director of Proceedings for consideration of prosecution before the Tribunal at the time of reporting.

## Council Inquiry

Complaints of unsatisfactory professional conduct may be dealt with under Part 8 Division 3 Subdivision 5 of the Law by way of disciplinary proceedings held at a meeting of the Council. The resulting action taken may include a caution or reprimand, imposition of conditions on registration, issuing of an order requiring medical or psychiatric treatment or counselling, completion of an educational course or some other action.

During the reporting period, three Council Inquiries were finalised. The status of matters referred to a Council Inquiry was as follows:

Status of Council Inquiries	Number
Matters referred to an Inquiry but not completed at 1/7/2012	1
Matters referred to an Inquiry in 2012/2013	4
Matters where an Inquiry was completed in 2012/2013	3
Matters referred to an Inquiry but not completed at 30/6/2013	2
<b>Total case volume managed in 2012/2013</b>	<b>5</b>

Of the matters referred to or managed via an Inquiry at Council in 2012/2013, one related to competence, one to confidentiality, one to boundary crossing, and two matters related to multiple complaints, including fees and report writing.

The outcomes of the Inquiries were that three practitioners had conditions placed on their registration requiring supervision relating to their professional practice.

## Reviews by the Council

Psychologists who have had conditions placed on their registration or had their registration suspended as a result of Council's immediate action powers under s 150 of the Law, had conditions imposed following an Inquiry by the Council or on the recommendation of an Impaired Registrants Panel may request a review of the conditions or suspension by the Council.

There were no applications for review carried over from the previous period. The Council received one application for review of a suspension and two applications for review of conditions imposed through the health program in 2012/2013. One application for review of conditions imposed by the Council following an Inquiry was made.

The outcomes were that in one matter, the conditions were changed; in one matter the conditions remained the same; and in one matter the Council did not grant the review. The application for review of the suspension resulted in the suspension being lifted and conditions being imposed. There are no matters carrying over to the next reporting period.

## Psychology Tribunal

The Psychology Tribunal deals with serious notifications (complaints) that may lead to suspension or deregistration, appeals against Council decisions regarding disciplinary matters and appeals against decisions of the National Board in relation to registration matters.

There were four matters heard by the Tribunal during the reporting period.

Tribunal Matters	2012/2013	2011/2012
Matters referred to a Tribunal but not completed at year beginning	2	4
Matters referred to a Tribunal	2	2
Matters completed by a Tribunal	2	4
Matters referred to a Tribunal but not completed by year end	2	2
<b>Total case volume managed</b>	<b>4</b>	<b>6</b>

During the reporting period, the Tribunal finalised three matters. Refer to Appendix 4 for details.

The Reasons for Decision of the Tribunal are published in full on the Australasian Legal Information Institute website ([www.austlii.edu.au](http://www.austlii.edu.au)) or may be accessed via the Council's website.

## Tribunal Reviews

Psychologists who have had restrictions placed on their practice or registration by a Tribunal may request a review of conditions and suspension or can request to be reinstated following cancellation of registration by the Tribunal.

There were no Tribunal Reviews outstanding from 2011/2012. There was one application received for a review in 2012/2013, however, it was withdrawn.

## Appeals to the Tribunal

Psychologists who have had conditions imposed on their registration by the Council or a Performance Review Panel, had their registration suspended by the Council, or who have had a request for review of conditions or suspension refused by the Council, may appeal to the Tribunal. Practitioners may also lodge an appeal against a decision of the Psychology Board of Australia regarding registration status.

During the reporting period, three appeals were filed against decisions of the Psychology Board of Australia regarding registration status. One matter was withdrawn, one matter has been heard but has not been finalised and one matter will be heard in the next reporting period. The status of matters appealed was as follows:

Status of Tribunal Appeals	Number
Appeals lodged but not completed at 1/7/2012	0
Appeals lodged in 2012/2013	3
Appeals completed in 2012/2013	0
Appeals lodged but not completed at 30/6/2013	2
Appeals withdrawn in 2012/2013	1
Total case volume managed in 2012/2013	3

## Appeals to the Supreme Court

Psychologists may appeal a decision made by the Tribunal to the Supreme Court.

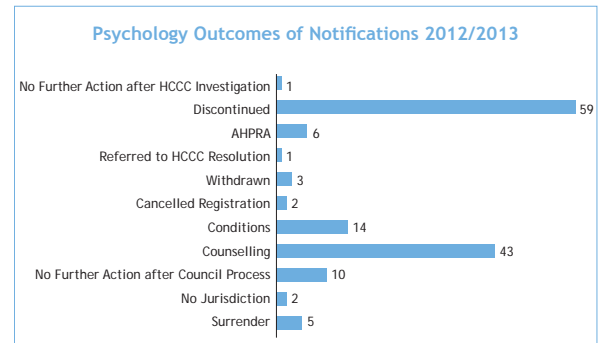
During the reporting period, one appeal against a decision of the Tribunal was filed in the Supreme Court of NSW but at the time of reporting it had not yet been heard.

## Notifications (Complaints) Outcomes

The outcomes of all notifications (complaints) closed in 2012/2013 are summarised below. The majority of matters were dealt with

expeditiously and did not require investigation or referral to a regulatory or adjudicating body. The most prevalent outcome was to agree with the HCCC to discontinue the matter, followed by counselling interviews, imposition of conditions and determinations to take no further action following a Council process.

The outcomes of these matters were as follows:



Of the notifications closed in 2012/2013, 7% (10) were considered to require no action by the Council. The reasons for closing the matters were as follows:

Reason for No Further Action	Number
Complaint not substantiated	8
During the process the Council ceased to have jurisdiction (i.e. no longer registered)	2

The stage at which matters were closed is as follows:

Stage* at Closure of Notification	Number
Assessment	98
Health	14
Performance	1
Investigation	29
Panel (IRP, PRP)	4
Tribunal	2
Appeal / Court	0

\* See Glossary for definition of open matters

## Notifications Received Under Former Psychologists Act 2001

Included in the total case volume managed in 2012/2013, the Council finalised three matters that had been lodged with the former Psychologists Registration Board. Complex matters in particular may take a number of years to finalise and at the end of the reporting period there were two matters still to be completed.



Matters under the former Act	2012/2013	2011/2012
Open matters under former Act at year beginning	5	11
Matters under former Act closed	3	6
Matters under former Act open at year end	2	5

Of the matters completed in 2012/2013, two resulted in the cancellation of the practitioner's registration and one resulted in the registrant having conditions imposed on their registration.

Of the two matters remaining open under the former law, both matters were heard by the Tribunal but have not been finalised at the time of this report.

## Counselling

The Council may direct a psychologist to attend for counselling. This is a non-disciplinary process that enables the Council to address performance or conduct concerns in an informal but sound and influential manner. Counselling may be conducted by two or three Council members.

During the reporting period, the Council managed 19 notifications by directing the practitioner to attend for counselling.

Some of the issues managed by counselling involved boundary crossing, performance and communication. Of those matters, 17 were finalised following counselling and two matters, although conducted, will be finalised in the next reporting period.

All Council members conducted counselling interviews.

## Matters Referred to Another Entity

During the reporting period, the Council directed six matters to AHPRA as the matters were outside the Council's jurisdiction.

## Matters Referred to HCCC for Assisted Resolution and Conciliation

The Council may refer a notification to the HCCC for assisted resolution or conciliation to be dealt with under the *Health Care Complaints Act 1993*. In 2012/2013, there was one matter referred to the HCCC for either of these actions.

## Outcomes of Mandatory Notifications

The outcomes of the 13 mandatory notifications completed in the reporting period were as follows:

Outcome	Number
Conditions on practice	3
Counselling	3
No further action by Council	4
Discontinued after assessment by HCCC	2
Surrendered registration	1

## Monitoring and Compliance of Orders and Conditions

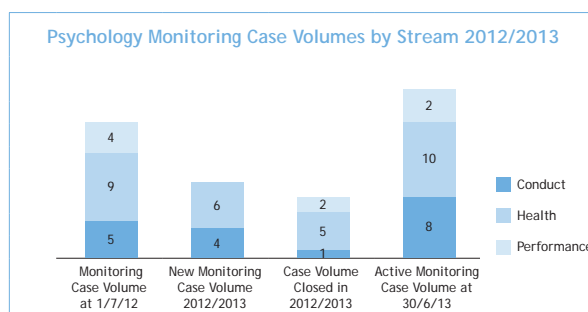
The Council is responsible for monitoring compliance with orders made and conditions imposed by the Psychology Tribunal, a Council Inquiry, a PRP, an immediate action (s 150) decision, or conditions following an IRP.

Conditions fall into two categories:

- practice conditions, which are published on the AHPRA website ([www.ahpra.gov.au](http://www.ahpra.gov.au)) or
- health conditions, which are not published.

During the year, 28 cases were monitored, and 20 remain active as at 30 June 2013.

Status of Monitoring Cases	Number
Practitioners monitored as at 1/7/2012	18
Practitioners commencing monitoring in 2012/2013	10
Practitioners for which monitoring was completed in 2012/2013	8
Practitioners under monitoring as at 30/6/2013	20
Total practitioners monitored in 2012/2013	28



The monitoring matters managed in 2012/2013 related to the following conditions:

Matters Monitored	Number
Individual or peer supervision of practice	20
Financial audit of practice	1
Additional professional development or training required	11
The practitioner must work only in a group practice	6
The practitioner must not undertake private practice	9
Restrictions placed in scope of practice	9
Not to take on new clients	4
To attend for treatment with a health practitioner	13
Council to approve the nature and place of employment	12
The practitioner not undertake report writing	2
Drug and/or alcohol testing	6
Review by Council Appointed Practitioner and/or Impaired Registrants Panel	10
Restricted working hours	2

\*Note: There may be more than one matter for each practitioner

Throughout the year, effective working relationships with AHPRA facilitated compliance monitoring across both organisations.

# Management and Administration



## Shared Services

The HPCA provides shared executive and corporate services to the 14 NSW health professional Councils to support their regulatory responsibilities.

On behalf of the Councils, the HPCA liaises with:

- AHPRA regarding financial, registration and reporting matters
- the HCCC on notifications (complaints) management issues, and
- the Ministry of Health on human resources and providing advice and responses to the Minister for Health and the Director-General on regulatory matters and appointments.

This coordinated approach provides efficiencies through shared services that would be costly for small bodies like the Councils, to implement on their own. It also allows Councils to direct their attention to protection of the public by concentrating on their core regulatory functions.

The Council and the HPCA have signed a three year service level agreement (SLA) effective from 1 July 2012. The SLA articulates the services the HPCA provides and key performance indicators against which performance is assessed annually. It provides certainty and a shared understanding for the Council and the HPCA on the range and quality of services provided.

## Access to Information - Government Information Public Access (GIPA)

The Council is committed to the principles of the *Government Information (Public Access) Act 2009* (GIPA Act) and provides access to policies, publications and information through the Council website. The Council complies with the *Government Information (Public Access) Regulation 2009* regarding annual reporting requirements.

The Agency Information Guide was updated and is accessible on the website.

### Review of Proactive Release Program

The Council reviewed its program for the release of government information to identify the type of information that can be made publicly available.

The Council releases all new and revised policies and other information publicly on the website. In addition, the Council reviewed the program and the policy register including monitoring

the completion and approval of relevant information.

New and revised policies and documents released on the Council website are:

- Conflict of Interest Policy
- Gifts and Benefits Policy
- Reporting Corrupt Conduct
- Member Remuneration and Payment Policy
- Official Travel Policy
- Audit and Risk Committee Charter.

The Council also complies with NSW Government policies and procedures which are available on the Department of Premier and Cabinet, Public Service Commission and the NSW Ministry of Health websites.

### Number of Access Applications Received

The Council received one formal access application (including withdrawn applications excluding invalid applications).

### Number of Refused Applications for Schedule 1 Information - Clause 7(c)

The Council refused no applications (either wholly or partly) for the disclosure of information (information for which there is conclusive presumption of overriding public interest against disclosure).

The Council's GIPA statistics are reported in Appendix 2.

## Privacy

The Council is subject to the provisions of the *Privacy and Personal Information Protection Act 1998* and the *Health Records and Information Privacy Act 2002*.

The Council received no complaints regarding privacy matters.

The Council has adopted the NSW Health Privacy Management policy pending development of a specific privacy management plan. A number of staff attended privacy awareness training conducted by the Office of the Information and Privacy Commissioner.

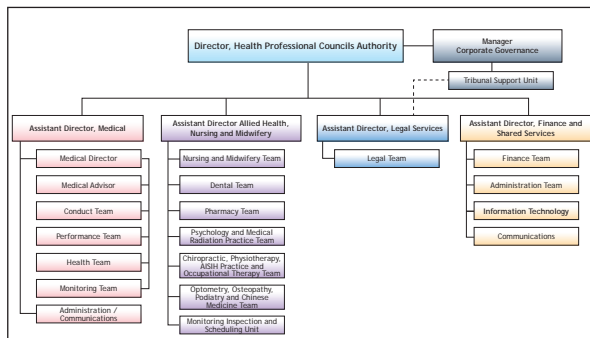
## Human Resources

The HPCA staff who support the Council are employed under Chapter 1A of the *Public Sector Employment and Management Act 2002*.

As at 30 June 2013 the HPCA employed 97 permanent full-time equivalent (FTE) staff and two temporary FTE staff, of whom 3.2 FTE staff

provided secretariat support directly to the Council.

HPCA Organisation Chart as at 30 June 2013



## Learning and Development

Learning and development opportunities are available to staff to ensure that they have the skills and knowledge to support the Council's core business and the HPCA's organisational priorities. Individual staff training needs are identified through the Coaching and Performance System (CAPS).

Staff attended training sessions on:

- GIPA, privacy management and public interest disclosure provisions
- Writing procedures and policy documents, and minute taking
- Dealing with difficult complainants
- TRIM records management system and Monitoring and Complaints System (MaCS) for case management
- Understanding of the *Health Practitioner Regulation National Law (NSW)* - regulatory responsibilities and Council processes to protect the public
- Merit selection techniques.

## Public Interest Disclosures

The Council is subject to the provisions of the *Public Interest Disclosures Act 1994* and the reporting requirements of the *Public Interest Disclosures Regulation 2011*. Staff and Council members comply with the policy and information is available on the requirements and processes for making and managing disclosures. The Council provides six monthly reports to the NSW Ombudsman and Ministry of Health.

There were no public interest disclosures (PIDs) made by staff or Council members during the year:

July 2012 - June 2013

Number of public officials who made PIDs	0
Number of PIDs received	0
Of PIDs received, number primarily about:	
Corrupt conduct	0
Maladministration	0
Serious and substantial waste	0
Government information contravention	0
Number of PIDs finalised	0

## Audit and Risk Management

NSW Treasury has granted the Council an exemption from the Internal Audit and Risk Management Policy for the NSW Public Sector (TPP09-05) on the grounds that it is a small agency for which the administrative and cost burden of full compliance would be prohibitive. However the Council has appropriate internal audit and risk management practices in place in line with the core requirements of TPP09-05.

In 2012/2013 the HPCA Audit and Risk Committee continued to review and monitor the Risk Register, discussed and monitored internal audits and reviews, and received high level summaries on the Council's financial reports. On the Committee's advice the HPCA established the role of Chief Audit Executive, which is fulfilled by the HPCA Assistant Director, Legal.

During the year the HPCA implemented the recommendations of the Audit Office of NSW 2011/2012 Management Letter, developed a business continuity management framework and commissioned a review of the 2012/2013 budget process following the identification of certain errors and omissions in some budget line items. These matters have been addressed and monitored through the 2013/2014 budget development process.

The business continuity management framework comprises a policy, Business Continuity Plan and procedures. Members of the Recovery Team have received training and been issued with documents and resources in case of an emergency. Documentation of an IT disaster recovery plan has been initiated and will be completed during 2013/2014.

IAB is commissioned to undertake the internal audits nominated in the internal audit plan. The IAB conducted an internal audit of the HPCA's Workforce Management Framework, which identified the need for a more consistent approach to performance monitoring, and

improving turnaround times on recruitment activity. All of the review's recommendations were accepted and are being addressed.

A review of monitoring of practitioners with orders and/or conditions on their registration commenced in June 2013.

## Information Management and Systems

Further improvements have been achieved in information management, control and reporting. System modifications have been made to the case management system (MaCS), to improve usability and reporting. The MaCS user group guides priorities and contributes to user testing. Staff received ongoing training and support as changes are implemented and the accuracy and reliability of reporting is improving.

The TRIM records management system has been further embedded in practice. The Business Classification Scheme was reviewed and is being modified to address the specific needs of Councils. Training has been a focus and priorities developed to promote the use of TRIM to meet State Records compliance requirements.

## Exemptions from the Reporting Provisions

As a small statutory body, the Council is exempt from certain reporting provisions and provides a triennial report in relation to:

- multicultural policies and services programs
- disability services
- equal employment opportunity
- occupational health and safety, and
- waste management (WRAPP).

The Council last reported on these provisions in the 2010/2011 Annual Report and will next report in 2013/2014. The Council continued to meet its compliance obligations with regard to each of these matters and remains committed to implementing the relevant policy requirements.

## Consultants

The health professional Councils together commissioned six consultancies related to Council business process improvement, system improvements and the ongoing development of the HPCA's shared services to Councils.

The Council made the following contribution to these consultancies:

## Engagements costing less than \$50,000

Service Provided	No.	Cost inc. GST \$
Administration	2	2,182.91
Council business processes	1	3,996.99
Financial management	1	1,577.10
Information management and systems	2	487.33
<b>Total</b>	<b>6</b>	<b>8,224.34</b>

## Business Process Improvement

Through the course of several reviews (including of Council business planning processes), risk assessment and the 2011/2012 Council Satisfaction Survey a number of Councils and the HPCA identified the need to embark on a project to analyse selected core processes and to develop maps and procedure documents to guide work processes and decision-making. A consultant was engaged to undertake the project.

The purpose of process mapping is to optimise efficiency and provide support tools to staff and Councils and to help manage workflow and assist with sound decision-making.

The consultants are working with staff on process maps for the management of correspondence, handling notifications and immediate action, and refinement of the business classification scheme for records management.

## Insurance

The Council's insurance activities are conducted by the HPCA through the NSW Ministry of Health's insurance cover with the NSW Treasury Managed Fund, and include:

- legal liability - public liability, professional indemnity, product liability
- Comprehensive Motor Vehicle Insurance Policy
- Personal Accident Policy for volunteer workers
- property coverage, and
- workers' compensation.

## Annual Report Costs

The Council did not produce printed copies of this Annual Report in accordance with the Premier's Memorandum *Production Costs of Annual Reports* (M2013-09). The total cost of layout and design was \$624.77 (GST inc.), which is significantly lower than in previous years.

The report is published on the Council's website.

## Financial Management

The HPCA provides financial management services to the Council including the payment of accounts, budget preparation and monitoring and coordination of regular financial reporting to the Council.

In signing the SLA, the Council endorsed a revised cost allocation methodology for the distribution of shared costs across all Councils. The methodology is largely based on Council activity and provides a formula to apportion shared services staff, facilities and other resources. The methodology will be reviewed in 2013/2014 to ensure that it is equitable and is the best means of cost allocation.

## Format

The accounts of the Council's administrative operations, including the Education and Research activities, together with the Independent Auditor's Report are set out in the Financial Statements starting on page 22.

## Performance

The Council's accounts performance as reported in the Financial Statements is as follows:

	\$
Operating expenditure	888,131
Revenue	1,086,603
Net profit/(loss)	206,286
Net cash reserves (cash and cash equivalents minus current liabilities)*	1,379,278
* Included in the net cash reserves is Education and Research bank account balance of:	220,789

## Investment Performance

The Council, through a Special Interest Arrangement with the Commonwealth Bank of Australia earned an average of 2.81% p.a. on all bank account balances.



## Payments Performance

The Council's accounts are managed by the Health Administration Corporation. The consolidated accounts payable performance report for all 14 Councils is as shown below:

Quarter	Current (within due date) \$	Less than 30 days overdue \$	Between 30 to 60 days overdue \$	Between 60 to 90 days overdue \$	More than 90 days overdue \$
<b>All suppliers</b>					
September	1,201,178	620	0	218	0
December	1,106,321	26,167	0	165	0
March	1,310,988	1,225	0	657	0
June	1,758,606	4,583	141	1,758	0
<b>Small business suppliers</b>					
September	426,997	620	0	218	0
December	255,185	11,203	0	165	0
March	501,058	1,225	0	657	0
June	678,088	3,106	0	706	0

Measure	Sept	Dec	Mar	June
<b>All suppliers</b>				
Number of accounts due for payment	158	130	130	198
Number of accounts paid on time	156	102	128	177
% of accounts paid on time (based on number of accounts)	98.7	80.8	98.5	89.4
\$ amount of accounts due for payment	1,202,016	1,132,653	1,312,870	1,765,088
\$ amount of accounts paid on time	1,201,178	1,106,321	1,310,988	1,758,606
% of accounts paid on time (based on \$)	99.9	97.7	99.9	99.6
Number of payments for interest on overdue accounts	0	0	0	0
Interest paid on overdue accounts	0	0	0	0

Measure	Sept	Dec	Mar	June
<b>Small business suppliers</b>				
Number of accounts due for payment	141	112	120	170
Number of accounts paid on time	139	96	118	156
% of accounts paid on time (based on number of accounts)	98.6	85.7	98.3	91.8
\$ amount of accounts due for payment	427,835	266,553	502,940	681,900
\$ amount of accounts paid on time	426,997	255,185	501,058	678,088
% of accounts paid on time (based on \$)	99.8	95.7	99.6	99.4
Number of payments for interest on overdue accounts	0	0	0	0
Interest paid on overdue accounts	0	0	0	0

The HPCA is confirming relevant details with our small business suppliers in accordance with Treasury Circular TC11/21.



## Budget

The budget for the period 1 July 2013 to 30 June 2014 is as follow:

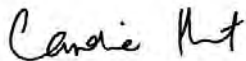
	\$
Revenue	1,065,546
Operating expenses	1,058,729
Education and research	0
Net profit/(loss)	6,817

**PSYCHOLOGY COUNCIL OF NEW SOUTH WALES****YEAR ENDED 30 JUNE 2013****STATEMENT BY MEMBERS OF THE COUNCIL**

Pursuant to s 41C(1B) *Public Finance and Audit Act 1983*, and in accordance with the resolution of the members of the Psychology Council of New South Wales, we declare on behalf of the Council that in our opinion:

1. The accompanying financial statements exhibit a true and fair view of the financial position of the Psychology Council of New South Wales as at 30 June 2013 and financial performance for the year then ended.
2. The financial statements have been prepared in accordance with the provisions of Australian Accounting Standards, Accounting Interpretations, the *Public Finance and Audit Act 1983*, the *Public Finance and Audit Regulation 2010*, and the Treasurer's Directions.

Further, we are not aware of any circumstances which would render any particulars included in the financial statements to be misleading or inaccurate.



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Council Member:

Date: 21/10/2013



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Council Member:

Date: 21/10/2013



## INDEPENDENT AUDITOR'S REPORT

### Psychology Council of New South Wales

To Members of the New South Wales Parliament

I have audited the accompanying financial statements of the Psychology Council of New South Wales (the Council), which comprise the statement of financial position as at 30 June 2013, the statement of comprehensive income, statement of changes in equity and statement of cash flows, for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information.

### Opinion

In my opinion, the financial statements:

- give a true and fair view of the financial position of the Council as at 30 June 2013, and of its financial performance and its cash flows for the year then ended in accordance with Australian Accounting Standards
- are in accordance with section 41B of the *Public Finance and Audit Act 1983* (the PF&A Act) and the Public Finance and Audit Regulation 2010.

My opinion should be read in conjunction with the rest of this report.

### The Council's Responsibility for the Financial Statements

The members of the Council are responsible for the preparation of the financial statements that give a true and fair view in accordance with Australian Accounting Standards and the PF&A Act, and for such internal control as the members of the Council determine is necessary to enable the preparation of financial statements that give a true and fair view and that are free from material misstatement, whether due to fraud or error.

### Auditor's Responsibility

My responsibility is to express an opinion on the financial statements based on my audit. I conducted my audit in accordance with Australian Auditing Standards. Those Standards require that I comply with relevant ethical requirements relating to audit engagements 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 the auditor's judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Council's preparation of the financial statements that give a true and fair view in order to design audit procedures appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Council's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the members of the Council, as well as evaluating the overall presentation of the financial statements.

I believe the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

My opinion does *not* provide assurance:

- about the future viability of the Council
- that it has carried out its activities effectively, efficiently and economically
- about the effectiveness of its internal control
- about the security and controls over the electronic publication of the audited financial statements on any website where they may be presented
- about other information which may have been hyperlinked to/from the financial statements.

### **Independence**

In conducting my audit, I have complied with the independence requirements of the Australian Auditing Standards and other relevant ethical pronouncements. The PF&A Act further promotes independence by:

- providing that only Parliament, and not the executive government, can remove an Auditor-General
- mandating the Auditor-General as auditor of public sector agencies, but precluding the provision of non-audit services, thus ensuring the Auditor-General and the Audit Office of New South Wales are not compromised in their roles by the possibility of losing clients or income.



C J Giumelli  
Director, Financial Audit Services

24 October 2013  
SYDNEY

## Psychology Council of New South Wales

### Statement of Comprehensive Income for the Year Ended 30 June 2013

	Notes	2013 \$	2012 \$
<b>EXPENSES EXCLUDING LOSSES</b>			
Operating expenses			
Personnel services	2(a)	(337,110)	(337,110)
Other operating expenses	2(b)	(350,014)	(350,014)
Depreciation and amortisation	2(c)	(26,665)	(26,665)
Finance costs	2(d)	(720)	(720)
Other expenses	2(e)	(148,622)	(148,622)
Education and research expenses	3	(25,000)	(25,000)
<b>Total Expenses Excluding Losses</b>		<b>(888,131)</b>	<b>(888,131)</b>
<b>REVENUE</b>			
Registration fees		1,030,220	967,876
Interest revenue	5(a)	51,127	82,728
Other revenue	5(b)	5,256	1,677
<b>Total Revenue</b>		<b>1,086,603</b>	<b>1,052,281</b>
Gain/(Loss) on disposal/additions	6	7,814	268
<b>Net Result</b>		<b>206,286</b>	<b>(228,437)</b>
Other comprehensive income		-	-
<b>Total Comprehensive Income</b>		<b>206,286</b>	<b>(228,437)</b>

The accompanying notes form part of these financial statements.

## Psychology Council of New South Wales

### Statement of Financial Position as at 30 June 2013

	Notes	2013 \$	2012 \$
<b>ASSETS</b>			
<b>Current Assets</b>			
Cash and cash equivalents	7	1,956,778	1,814,231
Receivables	8	27,260	51,754
<b>Total Current Assets</b>		<b>1,984,038</b>	<b>1,865,985</b>
<b>Non-Current Assets</b>			
Plant and equipment	9		
Leasehold improvements		65,775	63,390
Motor vehicles		750	1,428
Furniture and fittings		13,823	15,119
Other		11,102	19,776
<b>Total plant and equipment</b>		<b>91,450</b>	<b>99,713</b>
Intangible assets	10	21,864	32,490
<b>Total Non-Current Assets</b>		<b>113,314</b>	<b>132,203</b>
<b>Total Assets</b>		<b>2,097,352</b>	<b>1,998,188</b>
<b>LIABILITIES</b>			
<b>Current Liabilities</b>			
Payables	11	125,487	241,993
Fees in advance	12	452,013	438,476
<b>Total Current Liabilities</b>		<b>577,500</b>	<b>680,469</b>
<b>Non-Current Liabilities</b>			
Fees in advance	12	6,886	-
Provisions	13	16,716	27,755
<b>Total Non-Current Liabilities</b>		<b>23,602</b>	<b>27,755</b>
<b>Total Liabilities</b>		<b>601,102</b>	<b>708,224</b>
<b>Net Assets</b>		<b>1,496,250</b>	<b>1,289,964</b>
<b>EQUITY</b>			
Accumulated funds		1,496,250	1,289,964
<b>Total Equity</b>		<b>1,496,250</b>	<b>1,289,964</b>

The accompanying notes form part of these financial statements.

## Psychology Council of New South Wales

### Statement of Cash Flows for the Year Ended 30 June 2013

	Notes	2013 \$	2012 \$
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>			
<b>Payments</b>			
Personnel services		(357,212)	(447,199)
Other		(598,887)	(760,898)
<b>Total Payments</b>		<b>(956,099)</b>	<b>(1,208,097)</b>
<b>Receipts</b>			
Receipts from registration fees		1,051,138	1,233,436
Interest received		53,175	85,838
Other		628	1,677
<b>Total Receipts</b>		<b>1,104,941</b>	<b>1,320,951</b>
<b>Net Cash Flows from Operating Activities</b>	<b>17</b>	<b>148,842</b>	<b>112,854</b>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>			
Proceeds from sale of plant and equipment		-	3,795
Purchases of plant and equipment and intangible assets		(6,295)	(98,336)
<b>Net Cash Flows from Investing Activities</b>		<b>(6,295)</b>	<b>(94,540)</b>
<b>CASH FLOWS FROM FINANCING ACTIVITIES</b>			
<b>Net Cash Flows from Financing Activities</b>		<b>-</b>	<b>-</b>
<b>Net Increase/(Decrease) in Cash</b>		<b>142,547</b>	<b>18,314</b>
Opening cash and cash equivalents		1,814,231	1,795,917
<b>Closing Cash and Cash Equivalents</b>	<b>7</b>	<b>1,956,778</b>	<b>1,814,231</b>

The accompanying notes form part of these financial statements.



## Psychology Council of New South Wales

### Statement of Changes in Equity for the Year Ended 30 June 2013

	Notes	2013
		\$
Balance at 1 July 2012		1,289,964
Restated Total Equity at 1 July 2012		1,289,964
Net Result for the Year		206,286
Balance at 30 June 2013		1,496,250
Balance at 1 July 2011		1,518,401
Net Result for the Year		(228,437)
Balance at 30 June 2012		1,289,964

The accompanying notes form part of these financial statements.

# Psychology Council of New South Wales

## Notes to the Financial Statements

### 1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

#### a. Reporting Entity

The Psychology Council of New South Wales (the Council) as a not-for-profit reporting entity with no cash generating units, performs the duties and functions contained in the *Health practitioner Regulation National Law (NSW) No 86a* (the Law).

These financial statements for the year ended 30 June 2013 have been authorised for issue by the Council on 21 October 2013.

#### b. Basis of Preparation

The Council has adopted the going concern basis in the preparation of the financial statements.

The Council's financial statements are general purpose financial statements and have been prepared in accordance with:

- applicable Australian Accounting Standards (which include Australian Accounting Interpretations), and
- the requirements of the *Public Finance and Audit Act 1983* and Regulation.

The financial statements have been prepared on the basis of historical cost.

Judgements, key assumptions and estimations management has made are disclosed in the relevant notes to the financial statements.

All amounts are rounded to the nearest dollar and are expressed in Australian currency.

#### c. Statement of Compliance

The financial statements and notes comply with Australian Accounting Standards, which include Australian Accounting Interpretations.

#### d. Significant Accounting Judgments, Estimates and Assumptions

Effective from 1 July 2012, the Health Professional Councils Authority (HPCA) introduced an agreed cost sharing arrangement for the distribution of pooled costs between health professional Councils. This was a change from the cost sharing arrangements from prior years.

These indirect costs are shown as part of the Council's statement of comprehensive income under the following expense line items:

1. Personnel services
2. Rent and building expenses
3. Contracted labour
4. Depreciation and amortisation
5. Postage and communication
6. Printing and stationery

#### e. Insurance

The Council's insurance activities are conducted through the NSW Treasury Managed Fund Scheme of self-insurance for Government entities. The expense (premium) is determined by the Fund Manager based on past claim experience.

#### f. Accounting for the Goods and Services Tax (GST)

Income, expenses and assets are recognised net of the amount of GST, except that:

- the amount of GST incurred by the Council as a purchaser that is not recoverable from the Australian Taxation Office is recognised as part of the cost of acquisition of an asset or as part of an item of expense, and
- receivables and payables are stated with the amount of GST included.

Cash flows are included in the statement of cash flows on a gross basis. However, the GST components of cash flows arising from investing and financing activities which are recoverable from, or payable to, the Australian Taxation Office are classified as operating cash flows.

# Psychology Council of New South Wales

## Notes to the Financial Statements

### g. Income Recognition

Income is measured at the fair value of the consideration or contribution received or receivable.

The National Registration and Accreditation Scheme for all health professionals commenced on 1 July 2010. NSW opted out of the complaint handling component of the National scheme and the health professional Councils were established in NSW effective from 1 July 2010 to manage the complaints function in a co-regulatory arrangement with the NSW Health Care Complaints Commission (HCCC).

Under s 26A of the Law, the complaints element of the registration fees payable during 2013 by NSW health practitioners was decided by the Council established for that profession subject to approval by the Minister for Health.

The Council, under the Law, receives fees on a monthly basis from the Australian Health Practitioner Regulation Agency (AHPRA) being the agreed NSW complaints element for the 2013 registration fee.

Fees are progressively recognised as income by the Council as the annual registration period elapses. Fees in advance represent unearned income at balance date.

### h. Personnel Services

Ministry of Health (MOH) being the employer charges the council for personnel services relating to the provision of all employees. Staff costs are shown in the Statement of Comprehensive Income as personnel services in the financial statements of the Council. Amounts owing for personnel services in the Statement of Financial Position represent amounts payable to the MOH in respect of personnel services.

### i. Interest Revenue

Interest revenue is recognised using the effective interest method as set out in AASB 139 *Financial Instruments: Recognition and Measurement*.

### j. Education and Research

The Council is responsible for the administration of the Education and Research account. The Minister for Health may determine that a set amount of funds out of the fees received to be transferred to the Education and Research account.

### k. Assets

#### i. Acquisitions of Assets

The cost method of accounting is used for the initial recording of all acquisitions of assets controlled by the Council. Cost is the amount of cash or cash equivalents paid or the fair value of the other consideration given to acquire the asset at the time of its acquisition or construction or, where applicable, the amount attributed to that asset when initially recognised in accordance with the requirements of other Australian Accounting Standards.

Assets acquired at no cost, or for nominal consideration, are initially recognised at their historical cost at the date of acquisition.

Fair value is the amount for which an asset could be exchanged between knowledgeable, willing parties in an arms-length transaction.

Where payment for an item is deferred beyond normal credit terms, its cost is the cash price equivalent, i.e. the deferred payment amount is effectively discounted at an asset-specific rate.

#### ii. Capitalisation Thresholds

The Health Professional Councils Authority (HPCA) acquires all assets on behalf of the Council. Shared use assets that cost over \$5,000 at the time of purchase by the HPCA are capitalised. These capitalised shared use assets are then allocated to the Council using an appropriate allocation method. The minimum capitalisation threshold limits applied to the Council for the asset are \$238 (2011/2012 - \$45) (all Council shared use asset), or \$364 (2011/2012 - \$57) (Pitt Street shared use asset), whichever is applicable.

## Psychology Council of New South Wales

### Notes to the Financial Statements

#### iii. Impairment of Plant and Equipment

As a not-for-profit entity with no cash generating units, AASB 136 *Impairment of Assets* effectively is not applicable. AASB 136 modifies the recoverable amount test to the higher of fair value less costs to sell and depreciated replacement cost. This means that, where an asset is already measured at fair value, impairment can only arise if selling costs are material. Selling costs for the entity are regarded as immaterial.

#### iv. Depreciation of Plant, Equipment and Leasehold Improvements

Depreciation and amortisation is provided for on a straight-line basis for all depreciable assets so as to write off the amounts of each asset as it is consumed over its useful life to the Council.

Depreciation and amortisation methods, useful lives and residual values are reviewed at each reporting date and adjusted if appropriate.

Depreciation rates used are as follows:

Plant and equipment 20% - 25%

Furniture and fittings 16% - 20%

Motor vehicles 25% - 29%

Leasehold improvements 1.7% - 4%

#### v. Revaluation of Plant and Equipment

There has been no revaluation on any of the Council's plant and equipment as they are non-specialised assets. Non-specialised assets with short useful lives are measured at depreciated historical cost as a surrogate for fair value.

#### vi. Maintenance

Day-to-day servicing costs or maintenance are charged as expenses as incurred, except where they relate to the replacement of a component of an asset, in which case the costs are capitalised and depreciated.

#### vii. Intangible Assets

The Council recognises intangible assets only if it is probable that future economic benefits will flow to the entity and the cost of the asset can be measured reliably. Intangible assets are measured initially at cost. Where an asset is acquired at no or nominal cost, the cost is its fair value as at the date of acquisition.

All research costs are expensed. Development costs are only capitalised when certain criteria are met.

The useful lives of intangible assets are assessed to be finite.

Intangible assets are subsequently measured at fair value only if there is an active market. As there is no active market for the entity's intangible assets, the assets are carried at cost less any accumulated amortisation.

Intangible assets are tested for impairment where an indicator of impairment exists. If the recoverable amount is less than its carrying amount, the carrying amount is reduced to recoverable amount and the reduction is recognised as an impairment loss.

The Council's intangible assets are amortised using the straight line method over a period of four years. In general, intangible assets are tested for impairment where an indicator of impairment exists. However, as a not-for-profit entity with no cash generating units, the Council is effectively exempted from impairment testing.

#### viii. Loans and Receivables

Loans and receivables are recognised initially at fair value, usually based on the transaction cost or face value. Subsequent measurement is at amortised cost using the effective interest method, less an allowance for any impairment of receivables. Short-term receivables with no stated interest rate are measured at the original invoice amount where the effect of discounting is immaterial. An allowance for impairment of receivables is established when there is objective evidence that the Council will not be able to collect all amounts due. The amount of the allowance is the difference between the assets carrying amount and the present value of the estimated future cash flows, discounted at the effective interest rate. Bad debts are written off as incurred.

# Psychology Council of New South Wales

## Notes to the Financial Statements

### I. Liabilities

#### i. Trade and Other Payables

These amounts represent liabilities for goods and services provided to the Council and other amounts.

Payables are recognised initially at fair value, usually based on the transaction cost or face value.

Subsequent measurement is at amortised cost using the effective interest method. Short-term payables with no stated interest rates are measured at the original invoice amount where the effect of discounting is immaterial.

#### ii. Personnel Services - Ministry of Health

Personnel services are acquired from the MOH. As such the MOH accounting policy is below.

Liabilities for salaries and wages (including non-monetary benefits), recreation leave and paid sick leave that are due to be settled within 12 months after the end of the period in which the employees render the service are recognised and measured in respect of employees' services up to the reporting date at undiscounted amounts based on the amounts expected to be paid when the liabilities are settled.

Unused non-vesting sick leave does not give rise to a liability as it is not considered probable that sick leave taken in the future will be greater than the benefits accrued in the future.

The outstanding amounts of payroll tax, workers' compensation insurance premiums and fringe benefits tax, which are consequential to employment, are recognised as liabilities and expenses where the employee benefits to which they relate have been recognised.

All employees receive the Superannuation Guarantee Levy contribution. All superannuation benefits are provided on an accumulation basis - there are no defined benefits. Contributions are made by the entity to an employee superannuation fund and are charged as an expense when incurred.

#### iii. Provision for Make Good

Provisions include the Council's proportionate liability (allocated to the Council using an appropriate allocation method) of the estimated make good liability, discounted to today's present value.

### m. Equity

#### Accumulated Funds

The category 'Accumulated Funds' includes all current period funds.

### n. Comparative information

Except when an Australian Accounting Standard permits or requires otherwise, comparative information is disclosed in respect of the previous period for all amounts reported in the financial statements.

### o. Cash and cash equivalents

Cash and cash equivalent assets in the statement of financial position would normally comprise cash on hand, cash at bank and short-term deposits and include deposits in the NSW Treasury Corporation's Hour-Glass cash facility, other Treasury Corporation deposits (less than 90 days) and other at-call deposits that are not quoted in the active market.

Bank overdrafts are included within liabilities.

### p. Adoption of New and Revised Accounting Standards

A number of new standards, amendments to standards and interpretations are effective for annual periods beginning after 1 July 2013, and have not been applied in preparing these financial statements. None of these are expected to have a significant effect on the financial statements of the Council.

NSW Treasury issued NSWTC13/02 circular which states none of the new or revised Standards of Interpretations are to be adopted early.

List of new standards that are relevant to the Council are as follows:

- a) AASB 9 Financial Instruments (2010), AASB 9 Financial Instruments (2009)
- b) AASB 13 Fair Value Measurement (2011)

# Psychology Council of New South Wales

## Notes to the Financial Statements

### 2. EXPENSES EXCLUDING LOSSES

#### a. Personnel services expenses

Personnel services expenses are acquired from the MOH and comprise the following:

	2013 \$	2012 \$
Salaries and wages (including recreation leave)	281,046	398,739
Superannuation	29,698	31,858
Payroll taxes	23,020	25,507
Workers compensation insurance	3,346	3,862
	<u>337,110</u>	<u>459,966</u>

#### b. Other operating expenses

	2013 \$	2012 \$
Auditor's remuneration	6,450	7,000
Rent and building expenses	80,777	75,248
Council fees	14,600	11,984
Sitting fees	110,403	172,553
Contracted labour	137,784	180,861
	<u>350,014</u>	<u>447,646</u>

#### c. Depreciation and amortisation expense

	2013 \$	2012 \$
<b>Depreciation</b>		
Motor vehicles	347	757
Furniture and fittings	3,456	-
Other	7,603	7,100
	<u>11,405</u>	<u>7,857</u>

#### Amortisation

Leasehold improvement	4,162	1,678
Intangible assets	11,098	20,728
	<u>15,260</u>	<u>22,406</u>

<b>Total Depreciation and Amortisation</b>	<u>26,665</u>	<u>30,264</u>
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# Psychology Council of New South Wales

## Notes to the Financial Statements

### 2. EXPENSES EXCLUDING LOSSES (continued)

#### d. Finance costs

	2013 \$	2012 \$
Unwinding of discount rate on make good provision	720	916
	<u>720</u>	<u>916</u>

#### e. Other expenses

	2013 \$	2012 \$
Subsistence and transport	27,647	22,922
Fees for service	84,668	108,561
Postage and communication	8,274	5,945
Printing and stationery	10,867	14,506
Equipment and furniture	769	904
General administration expenses	16,397	17,389
	<u>148,622</u>	<u>170,227</u>

### 3. EDUCATION AND RESEARCH

#### a. Education and Research Expenses

	2013 \$	2012 \$
Grants	25,000	171,968
Total (excluding GST)	<u>25,000</u>	<u>171,968</u>

#### b. Education and Research Account Receipts and Payments Reconciliation

	Notes	2013 \$	2012 \$
Opening balance 1 July 2012		27	119,831
Deposits		300,000	-
Interest		3,262	5,246
		<u>303,289</u>	<u>125,077</u>
Outgoings		(82,500)	(125,050)
Closing Balance 30 June 2013	7	<u>220,789</u>	<u>27</u>



# Psychology Council of New South Wales

## Notes to the Financial Statements

### 4. EXPENDITURE MANAGED ON BEHALF OF THE COUNCIL THROUGH THE HEALTH ADMINISTRATION CORPORATION

The Council's accounts are managed by the Health Administration Corporation (HAC). Executive and administrative support functions are provided by the HPCA, which is an administrative unit of the HAC. The HAC has determined the basis of allocation of material costs to the Council.

Salaries and associated oncosts are paid by the MOH. The MOH continues to pay for the staff and associated oncosts. These costs are reimbursed by the Council to the MOH.

Details of transactions managed on behalf of the Council through the HAC are detailed above in Notes 2 to 11.

### 5. (a) INTEREST REVENUE

	2013 \$	2012 \$
Interest revenue from financial assets not at fair value through profit or loss	51,127	82,728
	<u>51,127</u>	<u>82,728</u>

The interest received was paid under a Special Interest Arrangement with the bank which applied to all daily balances of bank accounts administered on behalf of all health professional Councils by the HAC. In addition to daily balances receiving interest at a rate revised each week, the bank also waived normal bank fees payable such as transaction fees, dishonoured cheque fees and overseas draft fees.

	2013 %	2012 %
Weighted Average Interest Rate	2.81	3.65

### (b) OTHER REVENUE

	2013 \$	2012 \$
Recoupment of costs	165	-
Make good revenue resulting from decrease in make good provision	5,091	-
Other	-	1,677
	<u>5,256</u>	<u>1,677</u>

### 6. GAIN/(LOSS) ON DISPOSAL/ADDITIONS

	2013 \$	2012 \$
<b>Plant and equipment</b>		
Net book value disposed/acquired during the year	9,325	(3,527)
Proceeds from sale/acquisition costs	-	3,795
	<u>9,325</u>	<u>268</u>

## Psychology Council of New South Wales

### Notes to the Financial Statements

#### Intangible assets

Net book value disposed/acquired during the year	(1,511)	-
Proceeds from sale/acquisition costs	-	-
	<u>(1,511)</u>	<u>-</u>
<b>Total Gain/(loss) on Disposal/Additions</b>	<b><u>7,814</u></b>	<b><u>268</u></b>

Included in the above Gain/(Loss) on Disposal/Additions for 2013 is an adjustment arising from the Council's decision to acquire an increased portion of its share of the opening carrying values of the pooled assets located at Level 6, 477 Pitt Street, Sydney for no charge.

This adjustment was necessary as the HPCA introduced a revised cost sharing arrangement with the agreement of all the health professional Councils for the distribution of costs of depreciation of the pooled assets between all the Health Professional Councils effective from 1 July 2012 - refer Note 1.d.

#### 7. CASH AND CASH EQUIVALENTS

	2013 \$	2012 \$
Cash at bank and on hand	542,486	608,844
Short-term bank deposits	333,041	333,041
Cash at bank - held by HPCA*	<u>1,081,251</u>	<u>872,346</u>
	<b><u>1,956,778</u></b>	<b><u>1,814,231</u></b>

\* This is cash held by the HPCA, an administrative unit of the HAC, on behalf of the Council for its operating activities.

The Council operates the bank accounts shown below:

	Notes	2013 \$	2012 \$
Operating account**		321,697	608,817
Education and research account**	3	<u>220,789</u>	<u>27</u>
		<b><u>542,486</u></b>	<b><u>608,844</u></b>

\*\* managed by the HPCA, an administrative unit of the HAC.

# Psychology Council of New South Wales

## Notes to the Financial Statements

### 8. RECEIVABLES

	2013 \$	2012 \$
Prepayments	1,270	2,153
Other receivables	(182)	19,336
Interest receivable	5,358	7,406
Trade receivables	21,276	22,859
Less: allowance for impairment	(462)	-
	<u>27,260</u>	<u>51,754</u>
<b>Movement in the Allowance for Impairment</b>		
Balance at 1 July 2012	-	-
Amounts written off during the year	-	-
Amounts recovered during the year	-	-
Increase/(decrease) in allowance recognised in profit or loss	462	-
Balance at 30 June 2013	<u>462</u>	<u>-</u>

No receivables are considered impaired.

The trade receivables include monies that AHPRA has collected from registrants as at 30 June 2013 and has remitted the monies to HPCA in July 2013.

### Analysis of Trade Debtors Overdue

2013	Total \$	Past due but not impaired \$	Considered impaired \$
< 3 months overdue	-	-	-
3-6 months overdue	-	-	-
> 6 months overdue	462	-	462
<b>2012</b>			
< 3 months overdue	-	-	-
3-6 months overdue	-	-	-
> 6 months overdue	462	-	462

### Notes

1. Each column in the table represents the 'gross receivables'.
2. The ageing analysis excludes statutory receivables that are not past due and not impaired.

## Psychology Council of New South Wales

### Notes to the Financial Statements

#### 9. PLANT AND EQUIPMENT

The Council has an interest in plant and equipment used by all health professional Councils. Plant and equipment is not owned individually by the Council. The amounts recognised in the financial statements have been calculated based on the benefits expected to be derived by the Council.

	Leasehold Improvements	Motor Vehicles	Furniture & Fittings	Other	Total
	\$	\$	\$	\$	\$
<b>At 1 July 2012</b>					
Gross carrying amount	63,679	1,833	15,119	49,347	129,978
Accumulated depreciation and impairment	(289)	(405)	-	(29,571)	(30,265)
<b>Net Carrying Amount</b>	<b>63,390</b>	<b>1,428</b>	<b>15,119</b>	<b>19,776</b>	<b>99,713</b>
<b>At 30 June 2013</b>					
Gross carrying amount	68,852	1,386	17,279	46,257	133,774
Accumulated depreciation and impairment	(3,077)	(636)	(3,456)	(35,155)	(42,324)
<b>Net Carrying Amount</b>	<b>65,775</b>	<b>750</b>	<b>13,823</b>	<b>11,102</b>	<b>91,450</b>

#### Reconciliation

A reconciliation of the carrying amount of each class of plant and equipment at the beginning and end of the current reporting period is set out below:

	Leasehold Improvements	Motor Vehicles	Furniture & Fittings	Other	Total
	\$	\$	\$	\$	\$
<b>Year Ended 30 June 2013</b>					
Net carrying amount at start of year	63,390	1,428	15,119	19,776	99,713
Additions	2,413	-	-	1,898	4,311
Disposals	-	-	-	-	-
Other <sup>1</sup>	4,134	(331)	2,160	(2,969)	2,994
Depreciation	(4,162)	(347)	(3,456)	(7,603)	(15,568)
<b>Net Carrying Amount at End of Year</b>	<b>65,775</b>	<b>750</b>	<b>13,823</b>	<b>11,102</b>	<b>91,450</b>

1. Other includes:

- Adjustments required to opening balances due to the implementation of agreed Cost Allocation Methodology as at 1 July 2012.
- Adjustments required to make good asset/liability in accordance with AASB 137.

# Psychology Council of New South Wales

## Notes to the Financial Statements

	Leasehold Improvements	Motor Vehicles	Furniture & Fittings	Other	Total
	\$	\$	\$	\$	\$
<b>At 1 July 2011</b>					
Gross carrying amount	13,200	5,578	-	44,168	62,946
Accumulated depreciation and impairment	(79)	(1,699)	-	(25,780)	(27,558)
<b>Net Carrying Amount</b>	<b>13,121</b>	<b>3,879</b>	<b>-</b>	<b>18,388</b>	<b>35,388</b>

<b>At 30 June 2012</b>					
Gross carrying amount	63,679	1,833	15,119	49,347	129,978
Accumulated depreciation and impairment	(289)	(405)	-	(29,571)	(30,265)
<b>Net Carrying Amount</b>	<b>63,390</b>	<b>1,428</b>	<b>15,119</b>	<b>19,776</b>	<b>99,713</b>

### Reconciliation

A reconciliation of the carrying amount of each class of plant and equipment at the beginning and end of the current reporting period is set out below:

	Leasehold Improvements	Motor Vehicles	Furniture & Fittings	Other	Total
	\$	\$	\$	\$	\$
<b>Year Ended 30 June 2012</b>					
Net carrying amount at start of year	13,121	3,879	-	18,388	35,388
Additions	51,947	1,833	15,119	8,488	77,387
Disposals	-	(3,527)	-	-	(3,527)
Depreciation	(1,678)	(757)	-	(7,100)	(9,535)
<b>Net Carrying Amount at End of Year</b>	<b>63,390</b>	<b>1,428</b>	<b>15,119</b>	<b>19,776</b>	<b>99,713</b>

# Psychology Council of New South Wales

## Notes to the Financial Statements

### 10. INTANGIBLE ASSETS

The Council has an interest in intangible assets used by all health professional Councils. The asset is not owned individually by the Council. The amounts recognised in the financial statements have been calculated based on the benefits expected to be derived by the Council.

	Software Work in Progress	Software	Total
	\$	\$	\$
<b>At 1 July 2012</b>			
Cost (gross carrying amount)	1,209	87,887	89,096
Accumulated amortisation and impairment	-	(56,606)	(56,606)
<b>Net Carrying Amount</b>	<b>1,209</b>	<b>31,281</b>	<b>32,490</b>

<b>At 30 June 2013</b>			
Cost (gross carrying amount)	3,037	83,368	86,405
Accumulated amortisation and impairment	-	(64,541)	(64,541)
<b>Net Carrying Amount</b>	<b>3,037</b>	<b>18,827</b>	<b>21,864</b>

	Software Work in Progress	Software	Total
	\$	\$	\$
<b>Year Ended 30 June 2013</b>			
Net carrying amount at start of year	1,209	31,281	32,490
Additions	1,828	156	1,984
Disposals	-	-	-
Other <sup>1</sup>	-	(1,512)	(1,512)
Amortisation	-	(11,098)	(11,098)
<b>Net Carrying Amount at End of Year</b>	<b>3,037</b>	<b>18,827</b>	<b>21,864</b>

1. Other includes:

- a. Adjustments required to opening balances due to the implementation of agreed Cost Allocation Methodology as at 1 July 2012.

## Psychology Council of New South Wales

### Notes to the Financial Statements

	Software Work in Progress	Software	Total
	\$	\$	\$
<b>At 1 July 2011</b>			
Cost (gross carrying amount)	5,013	59,826	64,839
Accumulated amortisation and impairment	-	(32,569)	(32,569)
<b>Net Carrying Amount</b>	<b>5,013</b>	<b>27,257</b>	<b>32,270</b>
<b>At 30 June 2012</b>			
Cost (gross carrying amount)	1,209	87,887	89,096
Accumulated amortisation and impairment	-	(56,606)	(56,606)
<b>Net Carrying Amount</b>	<b>1,209</b>	<b>31,281</b>	<b>32,490</b>
	Software Work in Progress	Software	Total
	\$	\$	\$
<b>Year Ended 30 June 2012</b>			
Net carrying amount at start of year	5,013	27,257	32,270
Additions	1,209	19,739	20,948
Transfers	(5,013)	5,013	-
Disposals	-	-	-
Amortisation	-	(20,728)	(20,728)
<b>Net Carrying Amount at End of Year</b>	<b>1,209</b>	<b>31,281</b>	<b>32,490</b>



## Psychology Council of New South Wales

### Notes to the Financial Statements

#### 11. PAYABLES

	2013	2012
	\$	\$
Personnel services - Ministry of Health	37,307	57,409
Trade and other payables	88,180	184,584
	<u>125,487</u>	<u>241,993</u>

#### 12. FEES IN ADVANCE

	2013	2012
	\$	\$
<b>Current</b>		
Registration fees in advance	452,013	438,476
	<u>452,013</u>	<u>438,476</u>
<b>Non-Current</b>		
Registration fees in advance	6,886	-
	<u>6,886</u>	<u>-</u>

Registration fees in advance is the unearned revenue from NSW Regulatory Fees received on behalf of the Council by the HPCA from the AHPRA.

#### 13. PROVISIONS

	2013	2012
	\$	\$
<b>Non-Current</b>		
Make good	16,716	27,755
	<u>16,716</u>	<u>27,755</u>

# Psychology Council of New South Wales

## Notes to the Financial Statements

### Movement in Provisions (other than personnel services)

Movements in each class of provision during the financial year, other than personnel services, are set out below:

	Make Good 2013 \$
Carrying amount at the beginning of financial year	27,755
Decrease in provisions recognised due to re-allocation of opening balances as at 1 July 2012	(1,913)
Decrease in provisions recognised due to the decrease in the provision for make good due to changes in restoration costs and interest rates	(9,846)
Amount used	-
Unused amounts reversed	-
Unwinding/change in discount rate	720
<b>Carrying Amount at the End of Financial Year</b>	<b>16,716</b>

The HPCA recognised a lease make good provision on entering into lease arrangements for Level 6, 477 Pitt Street. The provision was first included in the financial statements for 30 June 2011 and was based on a market-based estimate of the cost per square metre to make good the areas of the Pitt Street building that the HPCA occupies at the end of the lease.

As required under paragraph 59 of AASB 137, provisions are required to be reviewed at the end of each reporting period and adjusted to reflect the current best estimate of the provision. The HPCA has recalculated the estimated lease make good provision as at 30 June 2013, taking into account the updated discount rate and inflation rates that are required under TC 11/17 and an updated estimate of the cost per square metre to make good the leased areas.

The impact of the changes to the three inputs to the overall lease make good provision has been to reduce the required provision as at 30 June 2013.

The lease arrangements for the Pitt Street building will expire on November 2016.

# Psychology Council of New South Wales

## Notes to the Financial Statements

### 14. COMMITMENTS FOR EXPENDITURE

#### a. Capital Commitments

There is no aggregate capital expenditure contracted (2012 acquisition of audio-visual equipment and furniture at Level 6 477 Pitt Street office) for at balance date and not provided for.

	2013 \$	2012 \$
Not later than one year	-	1,777
Later than one year and not later than five years	-	-
<b>Total (including GST)</b>	<b>-</b>	<b>1,777</b>

#### b. Operating Lease Commitments

Future non-cancellable operating lease rentals not provided for and payable:

	2013 \$	2012 \$
Not later than one year	96,996	82,164
Later than one year and not later than five years	251,684	303,472
<b>Total (including GST)</b>	<b>348,680</b>	<b>385,636</b>

### 15. RELATED PARTY TRANSACTIONS

The Council has only one related party, being the HPCA, an administrative unit of the HAC.

The Council's accounts are managed by the HAC. Executive and administrative support functions are provided by the HPCA. All accounting transactions are carried out by the HPCA on behalf of the Council.

### 16. CONTINGENT LIABILITIES AND CONTINGENT ASSETS

There are no material unrecorded contingent assets and liabilities as at 30 June 2013.

### 17. RECONCILIATION OF NET RESULT TO CASH FLOWS FROM OPERATING ACTIVITIES

	2013 \$	2012 \$
Net result	206,286	(228,437)
Depreciation and amortisation	26,665	30,264
Increase/(Decrease) in receivables	462	-
Increase/(Decrease) in receivables	24,032	163,885
Increase/(Decrease) in fees in advance	20,422	100,162
Increase/(Decrease) in payables	(116,506)	46,333
Increase/(Decrease) in provisions	(4,705)	916
Net gain/(loss) on sale of plant and equipment	(7,814)	(269)
<b>Net Cash used on Operating Activities</b>	<b>148,842</b>	<b>112,854</b>

# Psychology Council of New South Wales

## Notes to the Financial Statements

### 18. FINANCIAL INSTRUMENTS

The Council's main risks arising from financial instruments are outlined below, together with the Council's objectives, policies and processes for measuring and managing risk. Further quantitative and qualitative disclosures are included throughout the financial statements.

The Council has overall responsibility for the establishment and oversight of risk management and reviews and agrees on policies for managing each of these risks.

#### a. Financial Instrument Categories

Financial Assets	Note	Category	Carrying Amount 2013	Carrying Amount 2012
Class			\$	\$
Cash and Cash Equivalents	7	N/A	1,956,778	1,814,231
Receivables <sup>1</sup>	8	Loans and receivables (measured at amortised cost)	26,172	49,601
Financial Liabilities	Note	Category	Carrying Amount 2013	Carrying Amount 2012
Class			\$	\$
Payables <sup>2</sup>	11	Financial liabilities (measured at amortised cost)	125,487	241,993

Notes:

1. Excludes statutory receivables and prepayments (i.e. not within scope of AASB 7).
2. Excludes statutory payables and unearned revenue (i.e. not within scope of AASB 7).

## Psychology Council of New South Wales

### Notes to the Financial Statements

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#### **b. Credit Risk**

Credit risk arises when there is the possibility of the Council's debtors defaulting on their contractual obligations, resulting in a financial loss to the Council. The maximum exposure to credit risk is generally represented by the carrying amount of the financial assets (net of any allowance for impairment).

Credit risk arises from the financial assets of the Council, including cash, receivables, and authority deposits. No collateral is held by the Council. The Council has not granted any financial guarantees.

##### **Cash**

Cash comprises cash on hand and bank balances held by the Council and the HPCA on behalf of the Council. Interest is earned on the daily bank balances.

##### **Receivables - Trade Debtors**

All trade debtors are recognised as amounts receivable at balance date. Collectability of trade debtors is reviewed on an ongoing basis. Debts which are known to be uncollectible are written off. An allowance for impairment is raised when there is objective evidence that the entity will not be able to collect all amounts due. This evidence includes past experience, and current and expected changes in economic conditions and debtor credit ratings. No interest is earned on trade debtors. The Council is not materially exposed to concentrations of credit risk to a single trade debtor or group of debtors.

##### **Authority Deposits**

The Council has placed funds on deposit with the Commonwealth Bank. These deposits are fixed term, the interest rate payable by the bank is negotiated initially and is fixed for the term of the deposit.

The deposits at balance date were earning an interest rate of 2.65%, while over the year the weighted average interest rate was 2.94%. None of these assets are past due or impaired.

#### **c. Liquidity Risk**

Liquidity risk is the risk that the Council will be unable to meet its payment obligations when they fall due. The HPCA on behalf of the Council continuously manages risk through monitoring future cash flows and maturities planning to ensure adequate holding of high quality liquid assets.

The liabilities are recognised for amounts due to be paid in the future for goods or services received, whether or not invoiced. Amounts owing to suppliers (which are unsecured) are settled in accordance with the policy set out in Treasurer's Direction 219.01. If trade terms are not specified, payment is made no later than the end of the month following the month in which an invoice or a statement is received. Treasurer's Direction 219.01 allows the Minister to award interest for late payment.

All payables are current and will not attract interest payments.

#### **d. Market Risk**

The Council does not have exposure to market risk on financial instruments.

### **19. EVENTS AFTER THE REPORTING PERIOD**

There are no events after the reporting period to be included in the financial statements as of 30 June 2013.

End of Audited Financial Statements

# Appendix 1 - Legislative Changes

## *Health Practitioner Regulation National Law*

During 2012/2013 the NSW Parliament passed two minor amendments to the *Health Practitioner Regulation National Law (NSW)* (the Law).

Amendments were made by the *Health Legislation Amendment Act 2013*. Those amendments are:

1. The inclusion of s 150D(4A) to provide that notwithstanding ss 150D(3) and (4), the Health Care Complaints Commission is not required to investigate a complaint that is referred to it following the taking of immediate action under s 150 if the matter that is the subject of the complaint is being, or has been, investigated as, or as part of, another complaint to the Commission.
2. Amendment of s 152J(b) to provide that a practitioner's consent is required before the Council suspends his or her registration following the recommendation of an Impaired Registrants Panel (IRP). The amendment clarifies that, in keeping with the cooperative and remedial nature of the impaired practitioner process, both suspension and conditions on registration following an IRP require the practitioner's consent.
3. Amendment of clause 11 of Schedule 5C to provide that the appointment of a person as an acting member of a Council or of a member as the acting President of a Council is by the Minister for Health rather than by the Governor.

## *Health Practitioner Regulation (New South Wales) Regulation 2010*

The Governor approved amendments to the *Health Practitioner Regulation (New South Wales) Regulation 2010* concerning the composition of certain Councils.

Amendments were made by the *Health Practitioner Regulation (New South Wales) Amendment (Health Professional Councils) Regulation 2012*. They comprised minor amendments to the membership composition of the Dental Council, Medical Council, Nursing and Midwifery Council, Pharmacy Council, Physiotherapy Council and Psychology Council.

## Appendix 2 - GIPA Statistics 2012/2013

### Government Information (Public Access) Act 2009

Table A: Number of applications by type of applicant and outcome\*

	Access granted in full	Access granted in part	Access refused in full	Information not held	Information already available	Refuse to deal with application	Refuse to confirm/deny whether information is held	Application withdrawn
Media	0	0	0	0	0	0	0	0
Members of Parliament	0	0	0	0	0	0	0	0
Private sector business	0	0	0	0	0	0	0	0
Not for profit organisations or community groups	0	0	0	0	0	0	0	0
Members of the public (application by legal representative)	0	0	0	0	0	0	0	0
Members of the public (other)	0	1	0	0	0	0	0	0

\* More than one decision can be made in respect of a particular access application. If so, a recording must be made in relation to each such decision. This also applies to Table B.

Table B: Number of applications by type of application and outcome

	Access granted in full	Access granted in part	Access refused in full	Information not held	Information already available	Refuse to deal with application	Refuse to confirm/deny whether information is held	Application withdrawn
Personal information applications*	0	0	0	0	0	0	0	0
Access applications (other than personal information applications)	0	1	0	0	0	0	0	0
Access applications that are partly personal information applications and partly other	0	0	0	0	0	0	0	0

\* A *personal information application* is an access application for personal information (as defined in clause 4 of Schedule 4 to the Act) about the applicant (the applicant being an individual).



**Table C: Invalid applications**

Reason for invalidity	No of applications
Application does not comply with formal requirements (s 41 of the Act)	0
Application is for excluded information of the agency (s 43 of the Act)	0
Application contravenes restraint order (s 110 of the Act)	0
Total number of invalid applications received	0
Invalid applications that subsequently became valid applications	0

**Table D: Conclusive presumption of overriding public interest against disclosure: matters listed in Schedule 1 to Act**

	Number of times consideration used*
Overriding secrecy laws	0
Cabinet information	0
Executive Council information	0
Contempt	0
Legal professional privilege	0
Excluded information	0
Documents affecting law enforcement and public safety	0
Transport safety	0
Adoption	0
Care and protection of children	0
Ministerial code of conduct	0
Aboriginal and environmental heritage	0

\* More than one public interest consideration may apply in relation to a particular access application and, if so, each such consideration is to be recorded (but only once per application). This also applies in relation to Table E.

Table E: Other public interest considerations against disclosure: matters listed in table to s 14 of Act

	Number of occasions when application not successful
Responsible and effective government	0
Law enforcement and security	0
Individual rights, judicial processes and natural justice	0
Business interests of agencies and other persons	0
Environment, culture, economy and general matters	0
Secrecy provisions	0
Exempt documents under interstate Freedom of Information legislation	0

Table F: Timeliness

	Number of applications
Decided within the statutory timeframe (20 days plus any extensions)	0
Decided after 35 days (by agreement with applicant)	1
Not decided within time (deemed refusal)	0
Total	1

Table G: Number of applications reviewed under Part 5 of the Act (by type of review and outcome)

	Decision varied	Decision upheld	Total
Internal review	0	0	0
Review by Information Commissioner*	0	0	0
Internal review following recommendation under s 93 of Act	0	0	0
Review by ADT	0	0	0
Total	0	0	0

\* The Information Commissioner does not have the authority to vary decisions, but can make recommendations to the original decision-maker. The data in this case indicates that a recommendation to vary or uphold the original decision has been made by the Information Commissioner.

Table H: Applications for review under Part 5 of the Act (by type of applicant)

	Number of applications for review
Applications by access applicants	0
Applications by persons to whom information the subject of access application relates (see s 54 of the Act)	0

## *Appendix 3 - Members of Committees, Panels and Tribunals 2012/2013*

### **Psychology Tribunal**

#### **Chairperson**

Ms Diane Robinson (sat in 2012/2013)

#### **Deputy Chairpersons**

The Hon Jennifer Boland AM  
Ms Mary Brennan  
Mr Peter Dwyer  
Ms Julie Hughes  
Mr Michael Joseph sc  
Mr Mark Lynch  
The Hon Graham Mullane (sat in 2012/2013)  
Ms Joanne Muller (sat in 2012/2013)  
Mr Ian Michael Newbrun  
Mr Nicholas O'Neill  
Mr Oscar Shub  
Mr Robert Titterton

#### **Professional Members**

The Psychology Council appointed the following psychologists from a pool of professional members to sit on the Psychology Tribunal during the reporting period.

Dr Megan Brock	Dr Lizabeth Tong
Ms Margaret Crowley	Ms Elisabeth Shaw
Mr Peter Champion	Dr Janina Szyndler
Mr John Haigh	Associate Professor William Warren
Dr Judith Kennedy	Ms Kristin Young
Mr Brian Sheridan	

#### **Lay Members**

The Psychology Council appointed the following community members to sit on the Psychology Tribunal during the reporting period.

Dr Noel Greenaway	Ms Frances Taylor
Ms Jacqueline Milne	Ms Leanne Wrightson

## Assessment Committee

Term of appointment: 6 June 2011 to 30 June 2015

Role	Name
Chair (Practitioner)	Associate Professor Chris Willcox
Member(Practitioner)	Dr Elizabeth Tong
Member(Practitioner)	Dr Judith Kennedy
Member (Not registered health practitioner)	Ms Maree Turner

## Impaired Registrants Panel

### Professional Members

Professor Alexander Blaszczyński  
Associate Professor Wayne Reid  
Dr Elizabeth Tong  
Associate Professor Chris Willcox

### Registered Medical Practitioners

Dr Michael Diamond  
Dr Mary-Anne Friend

## Performance Review Panel

Ms Barbara Armitage OAM (Lay member)  
Professor Alexander Blaszczyński (Psychologist member)  
Dr Jill Duffield (Psychologist member)

## *Appendix 4 - Psychology Tribunal Decisions 2012/2013*

Name	Date of Decision	Process (complaint, review, appeal etc)	Outcome
Stephen Whyte	16 October 2012	Complaint	Registration cancelled for 18 months and prohibition orders
	8 November 2012	(Final Orders) (Reasons for Decision)	
Ross Colquhoun	5 December 2012	Complaint	Registration cancelled and prohibition orders

# Glossary

## Adjudication Body

The Council, a Panel, Tribunal or Court can be declared an adjudication body for the purposes of the Law

## Cancellation

- A Council may recommend the cancellation of a practitioner's registration to the Tribunal Chair if the practitioner does not have sufficient physical and mental capacity to practice the profession
- A Council may recommend the cancellation of a student's registration if the student has an impairment
- The Tribunal may order the cancellation of a practitioner's or student's registration if it is satisfied that the practitioner is not competent to practise or is guilty of professional misconduct, or if the practitioner / student is unfit in the public interest to practise / to undertake clinical training or is not a suitable person for registration in the profession.
- The Tribunal must cancel a practitioner's or student's registration if he / she has contravened a critical compliance order

## Closed Notification

A notification (complaint) is closed when a final outcome/decision has been determined by the Council or other decision-making entity under the Law, such as a Tribunal, Professional Standards Committee, Performance Review Panel or Court. This decision disposes of the matter

## Complainant

A person who makes a notification (complaint) to a health complaint entity:

- A health professional Council of NSW
- Health Professional Councils Authority (HPCA)
- Health Care Complaints Commission (HCCC)
- Australian Health Practitioner Regulation Agency (AHPRA)

## Conciliation

The Council may refer a notification (complaint) to the HCCC for conciliation, whereby the parties involved can negotiate a resolution

## Caution

A caution is a formal warning intended to act as a deterrent to a practitioner not to repeat conduct. This is a less serious outcome than a reprimand

## Condition

A condition aims to restrict a practitioner's practice in some way or may relate to the management of the practitioner's health, to protect the public. Conditions on practice are displayed on the public register maintained by AHPRA

## Notification (Complaint)

A notification (complaint) can be either a voluntary notification or a mandatory notification. A voluntary notification is about behaviour which presents a risk but is not as serious as a mandatory notification

## Notifiable Conduct/Mandatory Reporting

Notifiable conduct includes practising whilst intoxicated, engaging in sexual misconduct, placing the public at risk of substantial harm due to an impairment or a significant departure from accepted professional standards

### Open Matter

A notification (complaint) remains open until such time as a final outcome/decision has been determined by the Council or other decision-making entity under the Law, such as a Tribunal, Professional Standards Committee, Performance Review Panel or Court. This decision disposes of the matter

### Order

An order is a decision, condition or restriction placed on a practitioners registration or practice

### Professional Misconduct

Unsatisfactory professional conduct of a sufficiently serious nature to justify suspension or cancellation of the practitioner's registration

### Reprimand

A reprimand is a formal rebuke or chastisement for inappropriate and unacceptable conduct and appears on a practitioner's registration

### Stage

This refers to the stage at which a matter was at any point in time. These are:

- Assessment by the HCCC and / or Council to determine the course of action to be taken
- Health - the matters primarily relates to determining if the registrant has a health issue that impacts on practice and the support of the registrant in managing the health issues to remain in practice
- Performance - the matters primarily relates to determining if the registrant has a performance issue that impacts on practice and the support of the registrant in managing the health issues to remain in practice
- Investigation by the HCCC or being considered by the HCCC for prosecution
- Panel - the matter has been referred to or is being considered by an Impaired Registrants Panel (IRP) a Performance Review Panel (PRP) and Inquiry at a meeting of the Council [except for medical, nursing and midwifery registrants] or a Professional Standards Committee (PSC) [only for medical, nursing and midwifery registrants]
- Tribunal - the matter has been referred to or is being heard by the Tribunal
- Appeal/Court - appeals against the decisions of an adjudicating body

### Stream

Health: a practitioner who may have a physical or mental impairment, disability, condition or disorder that detrimentally affects, or is likely to detrimentally affect their capacity to practise their profession

Conduct: behaviour by a practitioner that may be categorised as professional misconduct or unsatisfactory professional conduct

Performance: professional performance that is considered unsatisfactory because it is below the standard reasonably expected of a practitioner of an equivalent level of training or experience

### Supervision

Supervision is the performing of one's duties or practice under the supervision of another similarly qualified practitioner



## Suspension

- A Council may suspend a practitioner's registration for an interim period if it determines that immediate action is required to protect the health or safety any person(s) or the action is in the public interest
- With the voluntary agreement of the practitioner or student, a Council may suspend registration if recommended by an Impaired Registrants Panel
- A Council may recommend the suspension of a practitioner's registration to the Tribunal Chair if the practitioner does not have sufficient physical and mental capacity to practice the profession. It may recommend the suspension of a student's registration if the student has an impairment
- The Tribunal may order the suspension of a practitioner's or student's registration if it is satisfied that the practitioner is not competent to practise or is guilty of professional misconduct, or if the practitioner / student is unfit in the public interest to practise/to undertake clinical training or is not a suitable person for registration in the profession

## Unsatisfactory Professional Conduct

Conduct which is:

- significantly below reasonable standards
- in contravention of the Law or regulations
- in contravention of conditions of registration
- failure to comply with order/decision of a Professional Standards Committee or Tribunal
- accepting or offering a benefit for referral or recommendation to a health service provider or a health product
- engaging in over servicing
- failure to disclose pecuniary interest in giving a referral or recommendation
- permitting assistants not registered in the profession to provide services requiring professional discretion or skill, or
- other unethical or improper behaviour.

Additional matters apply to medical practitioners and pharmacists.

## Abbreviations

AABS	Australian Accounting Standards Board	HCCC	Health Care Complaints Commission
AHPRA	Australian Health Practitioner Regulation Agency	HPCA	Health Professional Councils Authority
ARC	Australian Research Council	IAB	Internal Audit Bureau
ATO	Australian Taxation Office	IRP	Impaired Registrants Panel
AustLII	Australasian Legal Information Institute	MaCS	Monitoring and Complaints System
CAP	Council appointed practitioner	MOH	Ministry of Health
CAPS	Coaching and Performance System	NB	National Board
CPI	Consumer Price Index	NRAS	National Registration and Accreditation Scheme
DP	Director of Proceedings	PA	Performance Assessment
DPP	Director of Public Prosecutions	PRP	Performance Review Panel
EEO	Equal Employment Opportunity	SLA	Service level agreement
FTE	Full-time Equivalent	The Law	<i>Health Practitioner Regulation National Law (NSW) No 86a</i>
GIPA Act	<i>Government Information (Public Access) Act 2009</i>	TRIM	Total Records Information Management - the document management system used by the HPCA
GST	Goods and Services Tax	WRAPP	Waste Reduction and Purchasing Policy
HAC	Health Administration Corporation		

# Index

	Page		Page
Access	Inside Front Cover	Information Management and Systems	18
Access to Information (GIPA)	16, 46	Insurance	18
Accounts Payable	20	Investigations by the HCCC	12
Administration	16	Investment Performance	19
AHPRA	5, 7, 8, 9, 13, 14, 15, 16, 52, 55	Learning and Development	17
Aims and Objectives	3	Legislative Changes	6, 45
Annual Report Costs	18	Letter to the Minister	1
Appeals	13	Mandatory Notifications	9
Assessment Committee	4, 10	Matters Referred to Another Entity	14
Attendance at Council Meetings	3	Matters Referred to the HCCC for Conciliation	14
Audit	17	Meetings and Conferences	5
Audit and Risk Committee	16, 17	Membership, Council	3
Audit Office of New South Wales	17	Membership, Tribunal	49
Australian Health Practitioner Regulation		Ministry of Health (MOH)	16, 17, 18, 55
Agency (AHPRA)	5, 7, 8, 9, 13, 14, 15, 16, 52, 55	Monitoring and Compliance of Orders and Conditions	14
Australian Research Council	5, 55	National Registration and Accreditation Scheme	5, 7, 55
Budget	21	Notes to Financial Statements	29
Business Process Improvement	18	Notifications (Complaints) Management	9
Charter	3	Notifications (Complaints) Outcomes	13
Complaints Received About Council Administrative Processes	6	Notifications (Complaints) Received	7
Conditions of Registration	54	Notifications under the Former Act	13
Conduct Program	11	Organisation Chart	17
Consultants	18	Other Council Activities	19
Council Appointed Practitioner Assessments	10	Outcomes of Mandatory Notifications	14
Council Committees	4	Overseas Travel	5
Council Inquiry	12	Payments Performance	20
Council Membership	3	Performance	19
Counselling	14	Performance Assessment	11
Education and Research Committee	4	Performance Program	11
Education and Research	5	Performance Review Panel (PRP)	5, 11
Executive Officer	5	Psychologists Registration Board NSW	5, 14
Exemptions from the Reporting Provisions (EEO OHS, WRAPP, multicultural and disability)	18	Psychology Board of Australia	5, 6, 7, 13
Expenditure	19, 35, 44	Psychology Council of New South Wales	3, 4, 5, 49
Finance Committee	4	Psychology Tribunal of New South Wales	4, 12, 51
Financial Management	19	Privacy	16
Financial Statements	22	Promotion of Council Activities	5
Format	19	Protective Orders	9
Government Information (Public Access) Act 2009 (GIPA)	16, 46	Public Interest Disclosures	17
Health Care Complaints Commission (HCCC)	3, 5, 7, 8, 9, 10, 11, 12, 13, 14, 16, 52, 53, 55	Registration	7
Health Practitioner Regulation National Law (NSW)	3, 17, 45, 55	Regulatory Committees	4
Health Practitioner Regulation (NSW) Regulation 2010	45	Remuneration	3
Health Professional Council Authority (HPCA)	3, 16, 17, 18, 19, 52, 55	Reviews by the Council	12
Health Program	10	Risk Management	17
Human Resources	16	Section 150	9
IAB	17, 55	Service Level Agreement	16, 19, 55
Impaired Registrants Panel (IRP)	4, 10	Shared Services	16
Independent Auditor's Report	23	Staff Training	17
		Statement by Members of the Council	22
		Tribunal	5, 12, 51
		Tribunal Reviews	13
		Website	5, 6, 9, 13, 16, 18



